

#### Cancer- Chronic illness and Intimacy Sexual Health- through a biopsychosocial lens

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Urologist and Fellowship Trained Sexual Medicine Specialist

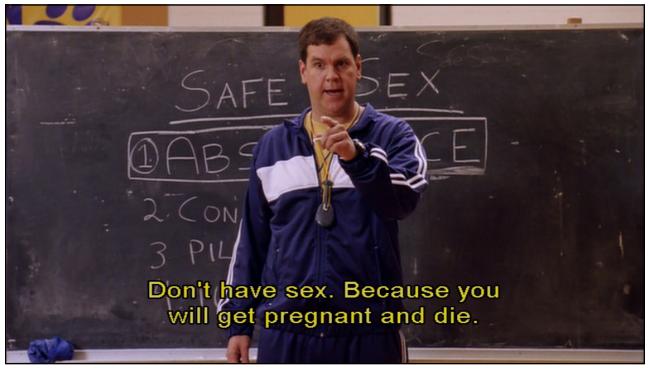
Assistant Clinical Professor, Department of Urology, Georgetown University Clinical Instructor, Department of Urology, George Washington University

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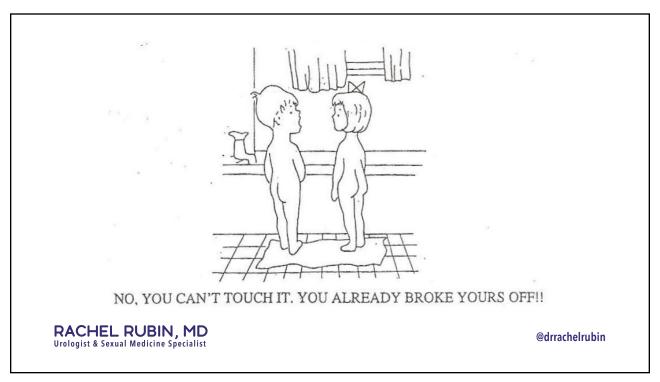
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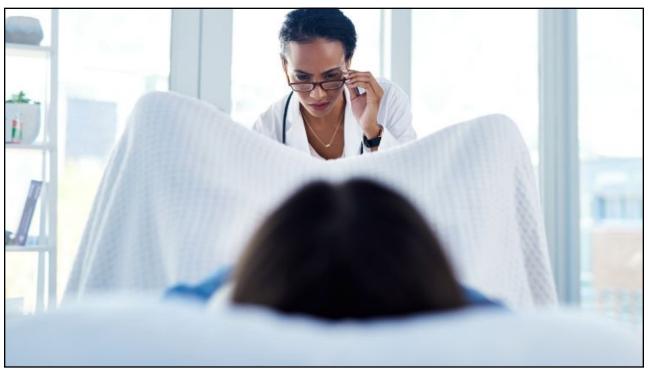
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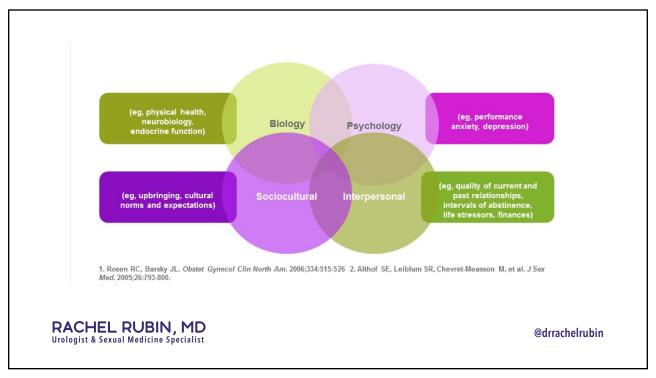
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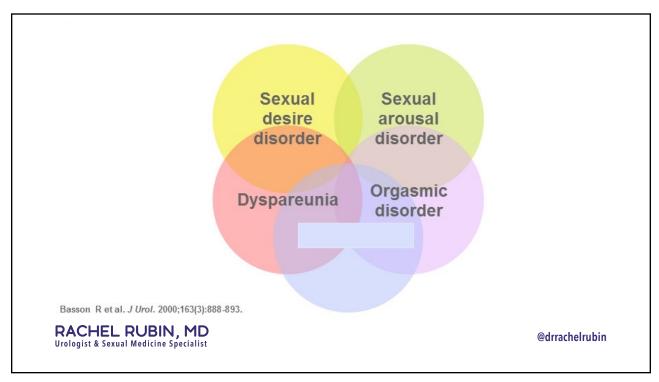
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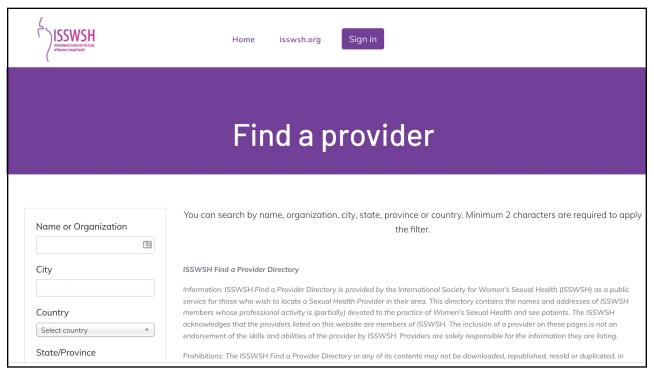




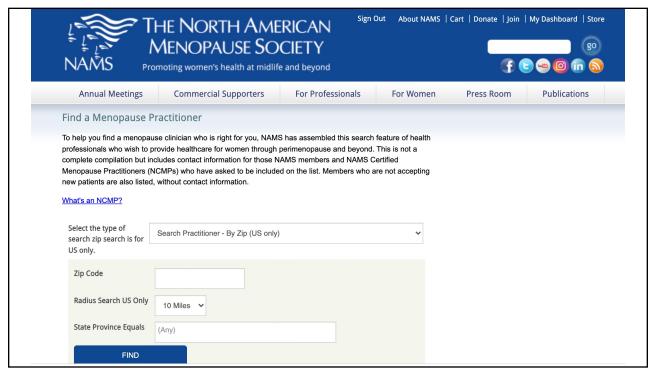


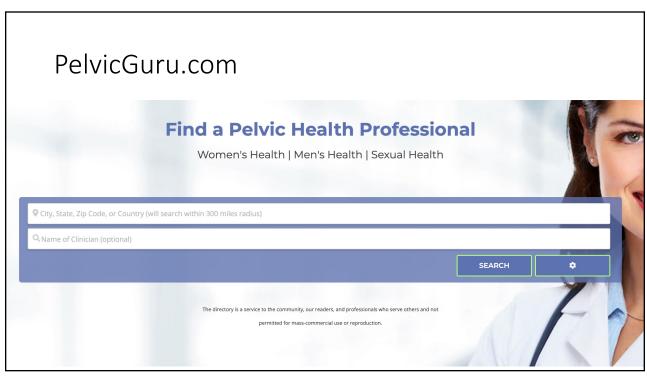


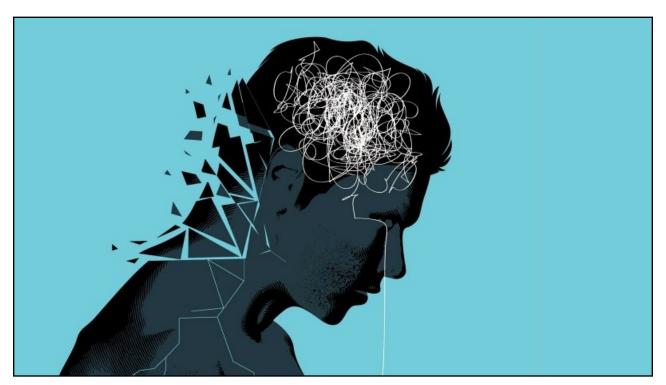


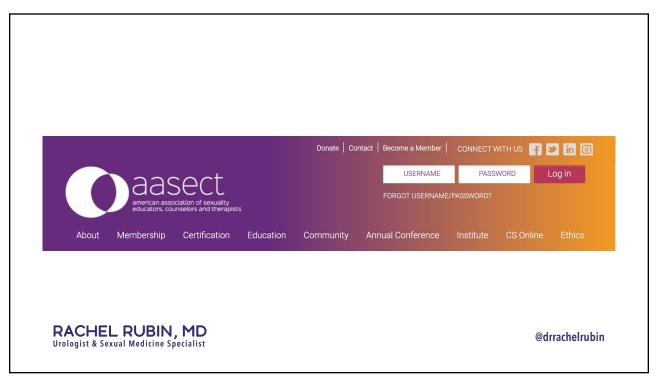


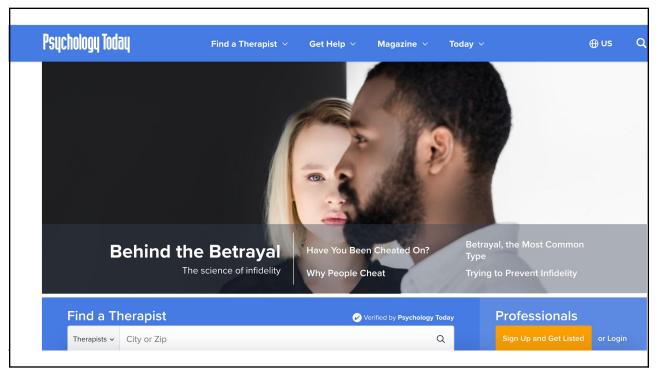












# Just Ask

nobody else will

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#### Specific Questions:

- "Are you sexually active?"
- "Are there sexual concerns you wish to discuss?"
- Explain that sexual problems are common
- Assure the patient that you are comfortable discussing sexual issues.
- "Many women with diabetes..." or "Many women going through menopause..."
- Tell me more about it...

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Clayton, A. et al. Mayo Clinic Proceedings March 2018

#### Listen

- TIME TIME TIME
- Look at the patient and try not to interrupt. Usually the story gives away the diagnosis.
- Do not make assumptions
- Ask questions after they've had time to talk
- Take notes

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#### Ask About the Past

- Past Medical / Surgical History
- Medications past and present
- Social history: Ask about relationships past and present, family situation, trauma, stress levels

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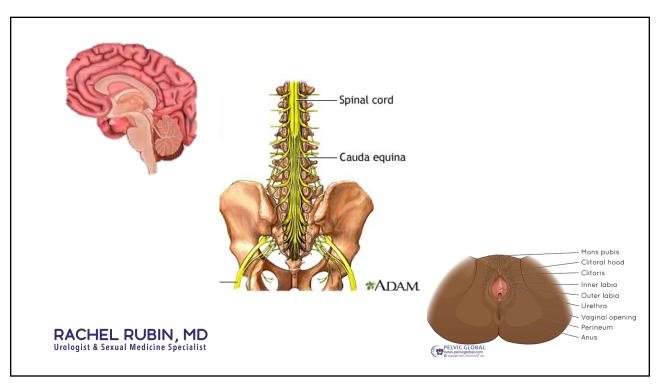
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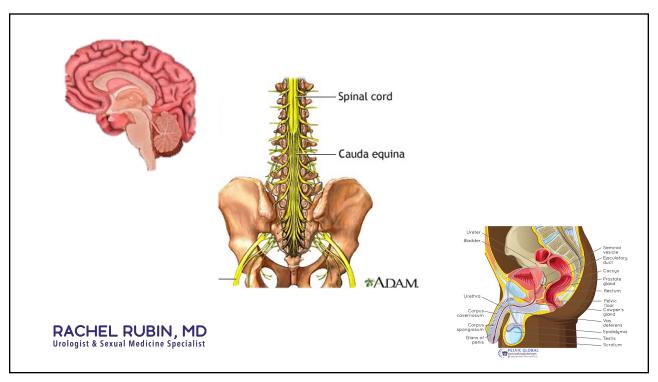
I added this to my intake in 2020 for all new patients as I hear their story – "I ask all my patients this regardless of gender or problem you are seeing me for: is there anything cultural, religious, or trauma related that you want to share with me today as part of your story?"

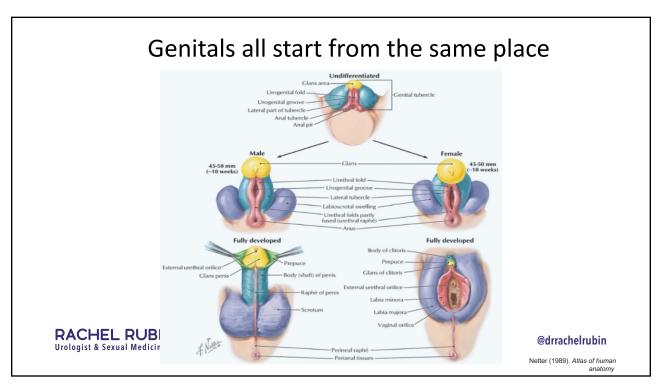
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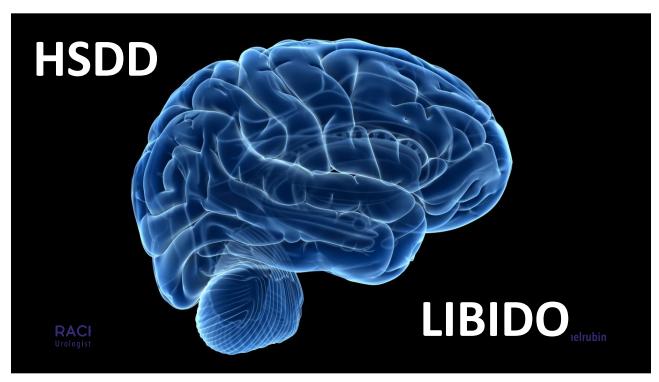
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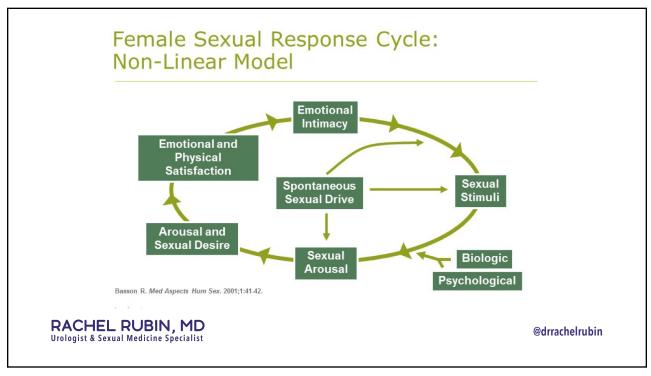
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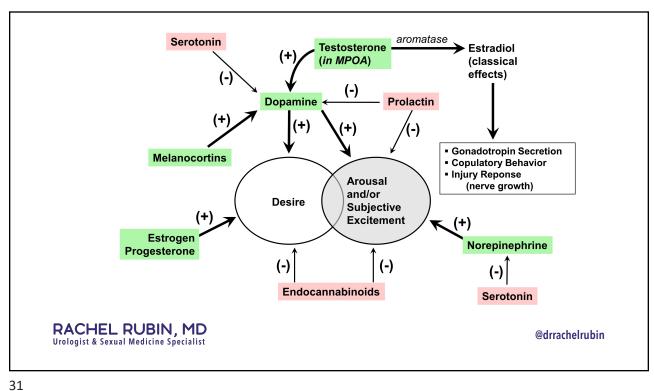


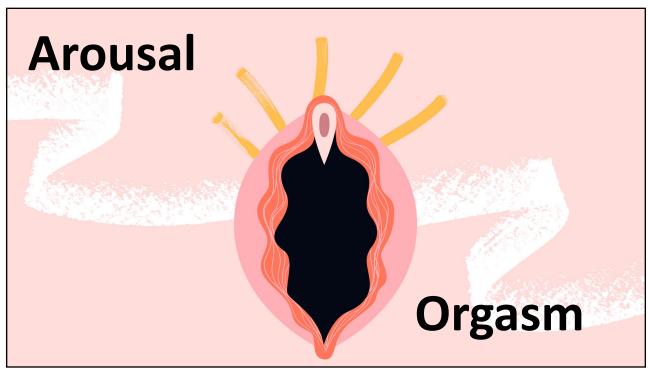


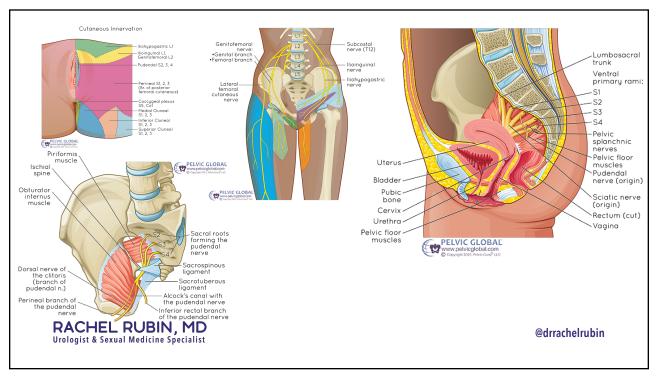


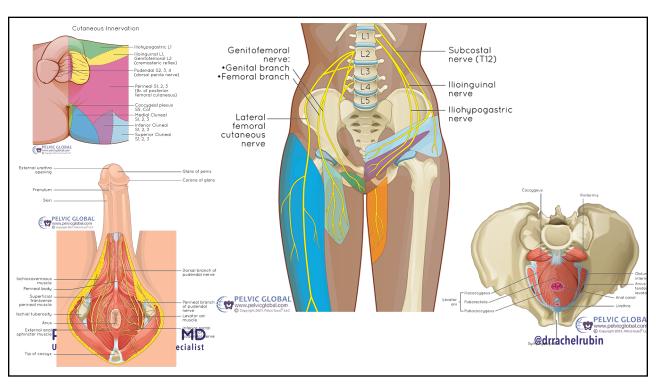








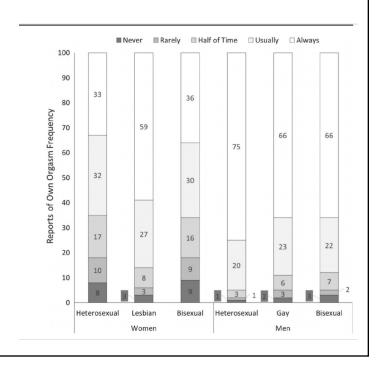






Differences in
Orgasm Frequency
Among Gay,
Lesbian, Bisexual,
and Heterosexual
Men and Women in
a U.S. National
Sample

RACHEL RUBIN, MD Urologist & Sexual Medicine Specialist Frederick, David A., et al. Archives of sexual behavior 47.1 (2018): 273-288.



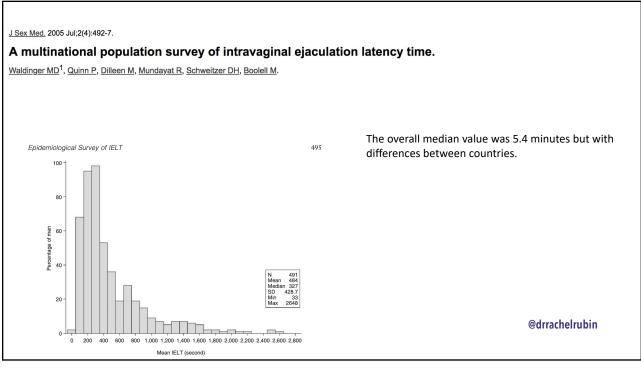


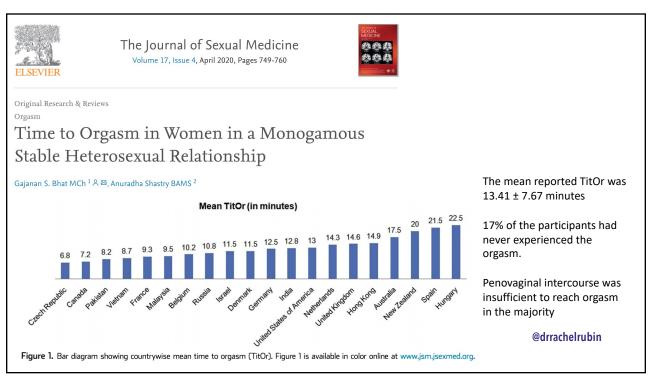
Setting expectations

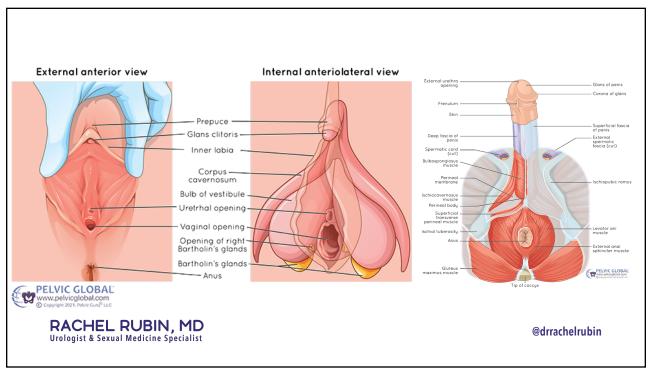
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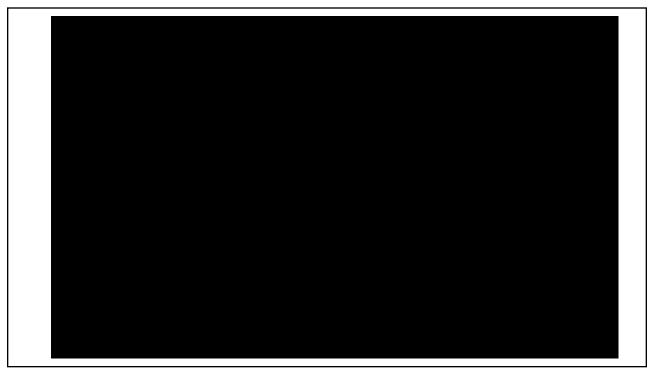
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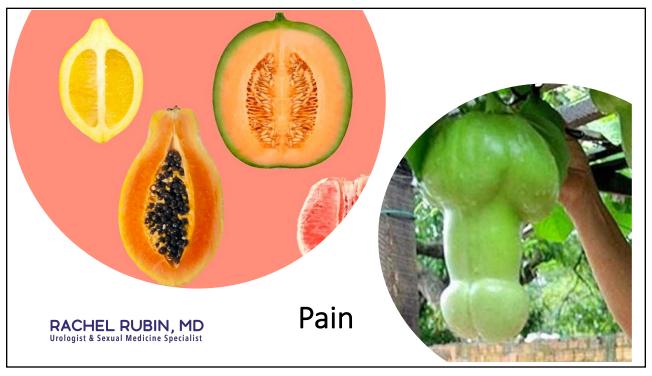
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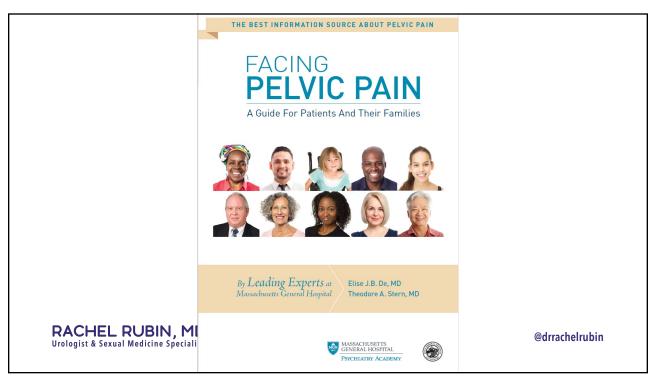


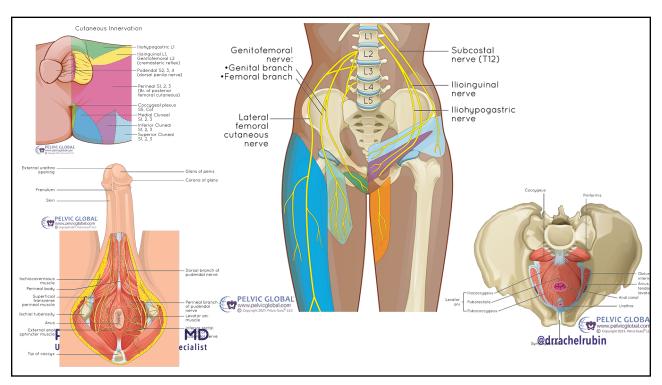


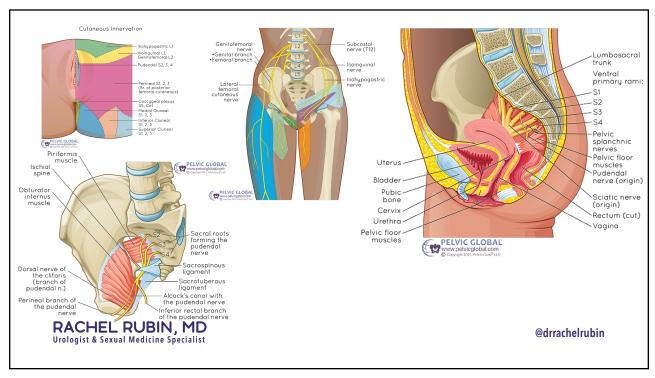












## The vulva: hormones matter! Estrogen and androgens

- Oral contraceptives
- · Breast feeding
- · Infertility treatments
- Menopause
- Oophorectomy
- Breast cancer treatments

**Urologist & Sexual Medicine Specialist** 

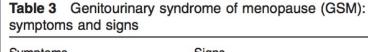
- SERMS\*
- Aromatase Inhibitors
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\*Selective Estrogen Receptor Modulator



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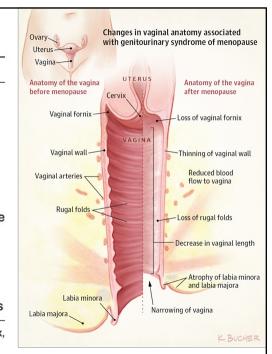
Photo courtesy of James A. Simon, MD



sed moisture sed elasticity
sed elasticity
ninora resorption
rythema
vaginal rugae
ragility/fissures/petechiae
eversion or prolapse
hymenal remnants
ence of urethral meatus
retraction
ent urinary tract infections
e

and decreased superficial cells on wet mount or maturation index

Portman et al, The journal of sexual medicine 11.12 (2014): 2865-2872.



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Pelvic Floor Physical Therapy...
Always the right answer!

#### **Common Symptoms of Hypertonic PFMs**

- Urinary urgency, frequency, hesitancy, pain
- Constipation and painful bowel movements
- Dyspareunia
- · Pain with sitting
- Vulvar, perineal, and/or anal itching, pain or burning
- Inability to achieve orgasm or pain with orgasm
- Clothing and exercise intolerance







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Prendergast Obstet Gynecol Clin N Am 2017; 44:509-22

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