

Sexual Activity During Cancer Treatment

Information for Women

This information provides guidance for women on sexual activity during cancer treatment.

1. Use Birth Control to Prevent Pregnancy

If you become pregnant with an egg that has been damaged by exposure to radiation, chemotherapy, or other anticancer medications, you are at risk for having a miscarriage or for your fetus having birth defects. Becoming pregnant can also prevent you from receiving the best diagnostic tests and treatments for your cancer, as these may harm a fetus.

If there is any chance you could become pregnant, use birth control (contraception) throughout your treatment. Do not rely on your partner withdrawing before ejaculation (“pulling out”) or avoiding sex during fertile times of your menstrual cycle (the “rhythm method”). These methods are not effective in preventing pregnancy.

It is important to pick a birth control method that is effective and fits your lifestyle. Make an appointment with the healthcare provider who manages your gynecologic care (HCP), and speak with him or her to choose an option that is best for you. No matter what method you choose, use birth control as instructed or you may become pregnant. If you have any problems with your birth control, talk with your HCP to find another option.

The following forms of birth control do not contain hormones and are safe for most women.

- **Diaphragm.** A diaphragm is a small reusable rubber or silicone cup that you cover with spermicide and place inside your vagina each time you have sex. You insert the diaphragm 1 to 6 hours before vaginal sex. Keep it in place for at least 6 hours after you have sex and then remove and clean it. Do not leave the diaphragm in your vagina for more than 24 hours because this can cause an infection. Your HCP will determine what size you need.
- **Copper intrauterine device (IUD).** This is a small, T-shaped device your HCP places inside your uterus. It can stay in place for 10 years or be removed earlier. Copper IUDs may cause heavier blood flow during your monthly periods, so check with your oncologist to see if this is safe for you.

- Condoms (used by a male partner). Condoms can prevent pregnancy and protect you from sexually transmitted infections (STIs), including HIV. If this is your only form of birth control, have your partner use a condom each time you have vaginal sex.
- Surgical sterilization. There are a number of surgical methods that provide permanent sterilization if you are certain you don't want any (more) children. One is a tubal ligation (having your "tubes tied"). Another is the placement of a device in your fallopian tubes to block them.

These following forms of birth control contain hormones, either a combination of estrogen and progestin, or progestin alone. Hormonal birth control is very effective in preventing pregnancy, but does not protect against STIs, including HIV.

Some medical conditions make it unsafe to use hormonal birth control, so they are not right for everyone. Women who should not take hormonal birth control include those with a hormone-sensitive tumor, a personal or family history of blood clots, a history of migraines with aura, impaired liver function, and those who are 35 years of age or older and smoke. There are other medical conditions that also make it unsafe to use hormonal birth control, so talk to your oncologist and HCP to see if this method is right for you and which type is best.

- Birth control pill. These pills are taken once a day. Skipping a day or more may increase your chance of becoming pregnant.
- Injectable contraception (Depo-Provera®). This is a shot your HCP gives you every 12 weeks.
- Implantable contraception (Implanon®, Explanon®). This is a small rod your HCP implants under the skin of your arm. It can stay in place for 3 years or be removed earlier.
- Intrauterine device (LNG IUD, Mirena®, Skyla®). This is a small, T-shaped device your HCP places inside your uterus. It releases the hormone progestin. The Skyla® IUD can stay in place for 3 years and the Mirena® IUD can stay in place for 5 years, but they can be removed earlier.

If you are getting chemotherapy or radiation directed to an area near your ovaries, continue to use birth control for at least 1 year after your treatment has ended. This allows time for damaged eggs to clear from your body. If you plan to have children after your treatment, ask your doctor when it is safe for you to start trying. Depending on your situation, your doctor may recommend you wait more or less time.

Some treatments may affect your fertility (the ability to become pregnant with a biologic child). If you have questions about this, ask your doctor or nurse.

2. Protect Yourself from Infection

If you or your partner have sex with multiple partners, you are at risk for sexually transmitted infections (STIs), including HIV, if you do not use barrier protection. In addition, certain cancer treatments can cause low blood cell counts for long periods of time, which may increase your risk of infection. Your doctor or nurse will tell you if this is a concern for you.

To prevent infection:

- Wash your hands and genitals before and after having vaginal, oral, or anal sex.
- To protect yourself from STIs (including HIV), consider using a condom each time you have vaginal, oral, or anal sex throughout your treatment, even if you are using another form of birth control.
- Your partner can use a condom, or you can use a female condom. The female condom is a polyurethane pouch placed inside your vagina before sex. Do not use a male and female condom at the same time. Female condoms are not an effective form of birth control, so you should not rely on them to prevent pregnancy.
- If you use sex toys, wash them with hot soapy water every time you use them.
- If you are expected to have very low blood cell counts for a long period of time, your doctor or nurse may advise you to use a barrier device during sex (condoms or dental dams). See the section “Barrier Devices” for more information.
- In some situations, you may even be advised to avoid sex that involves penetration or contact with mucous membranes while your blood counts are low. This includes vaginal, oral, and anal sex or inserting fingers, vibrators, or sex toys into your vagina or anus.
- Hugging, cuddling, gentle touching, and kissing skin are other ways you can be intimate with your partner during this time.
- Chemotherapy and radiation to the pelvis may cause your vagina to become dry and irritated. This may cause pain during vaginal sex and lead to infection. If you have vaginal discomfort, use a condom with a water-based lubricant or abstain from vaginal sex until the tissues heal. Ask your nurse for information on vaginal moisturizers and lubricants to help with vaginal dryness.
- Some women develop vaginal yeast infections during treatment, especially if they are taking steroids or antibiotics. Symptoms include vaginal itching, irritation, and white and lumpy discharge (like cottage cheese). If you think you have a yeast infection, avoid sexual activity and call your doctor or nurse.

If you have had a transplant you are at increased risk of infection for many months after your treatment. Until your doctor tells you that your immune system has recovered:

- Use a latex condom each time you have vaginal, oral, or anal sex.

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- Use a condom or dental dam any time your partner’s saliva, vaginal secretions, or semen could enter your mouth. See the section “Barrier Devices” for more information.
- Do not perform any sexual activity that could expose your mouth to feces.

3. Avoid Exposing Your Partner to Chemotherapy and Other Anticancer Medications

We do not know how much anticancer medication gets into a woman’s vaginal fluids or if this poses any risk to a sexual partner. If this is a concern for you or your partner, consider using a barrier device whenever your partner may have contact with your vaginal fluids.

This will prevent your partner, regardless of his or her age or sex, from being exposed to any medication that may be in your vaginal fluids. We don’t know how long these medications may be in vaginal fluids, but you could use barrier devices each day you have chemotherapy and for 1 week afterward.

4. Barrier Devices

Use a condom for vaginal or anal sex and a dental dam when you are receiving oral sex.

Condoms

You can buy condoms at any drug store. We recommend latex condoms, but if you or your partner is allergic to latex, use polyurethane condoms. Spermicides do not provide any added protection.

You can use lubricated condoms or use a separate water- or silicone-based lubricant.

Before you use a condom, check the expiration date on the wrapper. Expired condoms are more likely to break.

To use a condom correctly, have your male partner follow these instructions:

- Be careful when opening and handling the condom. Do not use your teeth, scissors, or other sharp objects to open the wrapper. Do not use the condom if it is torn, brittle, or stiff.
- Wait until your penis becomes firm before putting on the condom.
- While pinching the tip of the condom, unroll it over your penis as far as it will go. The extra space at the tip is needed to collect your semen.
- Smooth out any air bubbles—they can cause the condom to break.
- After you have ejaculated, but before your penis becomes soft, hold the base of the condom (where the ring is) and carefully pull your penis out of your partner so that nothing spills.
- Carefully slide off the condom and throw it in the trash.

A condom can tear if it is too tight or it can fall off if it is too loose. If this happens while you are having vaginal sex, and you are of childbearing age, consider emergency contraception if you are not using another form of birth control. Emergency contraception includes levonorgestrel (Plan B®), also known as the “morning-after pill.”

Dental dams

A dental dam is a thin, rectangular sheet of latex or silicone that covers the genitals of a woman receiving oral sex. You can buy these online or make one out of a condom.

- If you want to make a dental dam out of a condom, you may want to avoid those with a spermicide or lubricant, as the taste may be unpleasant. Cut off the tip and cut down the side of the tube to make a sheet.
- To use a dental dam, hold the sheet over your vulva or anus while your partner is giving you oral sex.

If you have any additional questions, speak with your doctor or nurse. If you have any concerns about how to follow these suggestions based on your religious observances, we advise you to speak with your religious leader.