

Between the Sheets...

July 2019

This column provides the platform for experts in the field to help men and women by providing answers to questions about sexual health and intimacy challenges that can result from prostate cancer treatment.

This column was compiled with the help of Dr. Anne Katz, Certified Sexuality Counselor and Clinical Nurse Specialist at CancerCare Manitoba. She has educated thousands of healthcare providers and cancer survivors about cancer, sexuality and survivorship. She is the editor of the Oncology Nursing Forum, an avid blogger for ASCO Connections, and the author of 13 books on the topics of illness, sexuality and cancer survivorship. (www.drannekatz.com)

QUESTION FROM PROSTATE CANCER SURVIVOR:

I had radiation along with hormone therapy two years ago and, since then, I have not had any erections. I expected this and this is bad enough but my penis has almost disappeared. I can hardly find it when I need to urinate and it has made things really awkward at the golf course or any public restroom. Why has this happened and what can I do about it?

RESPONSE FROM DR. ANNE KATZ:

Genital shrinkage is very common after radiation therapy and especially after hormone therapy (or androgen deprivation therapy as it is correctly termed). This shrinkage is a complex process resulting, in part, from lack of testosterone (the purpose of androgen therapy) and lack of erections that limits blood flow to the penis. As a result, penile tissue is starved of oxygen and other nutrients and penile tissue becomes like scar tissue (not flexible etc.). The androgen deprivation also results in shrinkage of the testicles. All of this may impact negatively on a man's body image. It also has some practical problems as you describe; men tell me that they do not have the penile length to urinate into a urinal and they may drip urine on their clothing and/or shoes. And they are embarrassed to urinate in a public restroom where other men may see that they have a 'problem' with a short/small penis.

There are two things that might help. The first is to do daily gentle penile massage to encourage blood flow to the tissues. The intent is not necessarily to try and have an erection but merely to get oxygen into the tissues. There is some evidence that using a penile pump is helpful for this too. Success may depend on how long it has been since treatment and the onset of the shrinkage. The other potential is for the man to lose weight if he is overweight. The fat pad over the pubic bone will shrink with weight loss and give the penis some extra length outside the body (estimated to be about half an inch with each 15 lbs of weight lost!). Surgery may be suggested, however, there is not a lot of evidence supporting this and many men are not interested in this after everything else they have been through with treatment.

Watch Dr. Katz' presentation on sexual health and intimacy from the Prostate Cancer Pathways for Patients and Caregivers event recorded at Englewood Health in Englewood, NJ on September 29, 2018.

<https://www.youtube.com/watch?v=A2ZdDHw2WGY&t=8542s>.

Read previous issues of *Between the Sheets* at www.ustoo.org/BTS.

Do you have a question about sexual health or intimacy? If so, we invite you to send it to Us TOO. We'll select questions to feature in future *Between the Sheets* columns.

Please email your question to: ustooBTS@ustoo.org

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