

Interventions for sexual problems following treatment for breast cancer: a systematic review.

Posted At : December 6, 2011 6:32 PM | Posted By : [Tim Brunson, PhD](#)

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Sexual functioning is an important element of quality of life. Many women experience sexual problems as a result of a breast cancer diagnosis and its treatment. Little is known about the availability and the effectiveness of interventions for sexual problems in this patient population. Six electronic databases were searched using Medical Subject Headings and keywords. Additional hand searching of the references of relevant papers was also conducted. The searches were conducted between October 2010 and January 2011. Papers were included if they evaluated interventions for sexual problems caused as a result of breast cancer or its treatment. Studies were only included if sexual functioning was reported using a patient-reported outcome questionnaire. Studies were excluded if sexual functioning was measured but improving sexual problems was not one of the main aims of the intervention. 3514 papers were identified in the initial search. 21 papers were selected for inclusion. Studies were of mixed methodological quality; 15 randomised trials were identified, many included small sample sizes and the use of non-validated questionnaires. Three main types of interventions were identified: Exercise (2), medical (2) and psycho-educational (17). The psycho-educational interventions included skills-based training such as problem-solving and communication skills, counselling, hypnosis, education and specific sex-therapies. Interventions were delivered to individual patients, patients and their partners (couple-based) and groups of patients. The widespread methodological variability hinders the development of a coherent picture about which interventions work for whom. Tentative findings suggest the most effective interventions are couple-based psycho-educational interventions that include an element of sexual therapy. More methodologically strong research is needed before any intervention can be recommended for clinical practice. Improved screening and classification of sexual problems will ensure interventions can be more effectively targeted to suit individual patient needs.

Breast Cancer Res Treat. 2011 Sep 9. Taylor S, Harley C, Ziegler L, Brown J, Velikova G. Psychosocial Oncology and Clinical Practice Research Group, St James's Institute of Oncology, University of Leeds, Leeds, UK, s.s.taylor@leeds.ac.uk.

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