Psychological Correlates of Sexual Dysfunction in Female Rectal and Anal Cancer Survivors: Analysis of Baseline Intervention Data

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Purpose: Sexual dysfunction represents a complex and multifactorial construct that can affect both men and women and has been noted to often deteriorate significantly after treatment for rectal and anal cancer. Despite this, it remains an understudied, underreported and undertreated issue in the field of cancer survivorship. The current study examined the characteristics of women enrolled in an intervention trial to treat sexual dysfunction, and explored the relationship between sexual functioning and psychological well-being.

Method: There were 70 female post-treatment anal or rectal cancer survivors assessed as part of the current study. Participants were enrolled in a randomized intervention trial to treat sexual dysfunction and completed measures of quality of life (EORTC-30), sexual functioning (FSFI) and psychological well-being (BSI Depression and Anxiety, IES-R, CR-38 Body Image) prior to randomization.

Results: Women enrolled in the study intervention were on average 55 years old, predominantly Caucasian (79%), married (57%) and a median of 5 years post-primary treatment. For those reporting sexual activity at baseline (N=41), sexual dysfunction was associated with a range of measures of psychological well-being in the hypothesized direction. The Sexual/Relationship Satisfaction subscale was associated with all measures of psychological well-being (all p<.01). Body image was associated with five of the six subscales of sexual functioning (Desire, Arousal, Lubrication, Orgasm, Satisfaction; all p<.05), while anxiety and cancer-specific post-traumatic intrusion were associated with four of six subscales (Desire, Arousal, Orgasm, Satisfaction; all p<.05).

Conclusion: For sexually-active female rectal and anal cancer survivors enrolled in a sexual health intervention, sexual dysfunction was significantly and consistently associated with measures of psychological well-being in this understudied population. Sexual/Relationship Satisfaction was found to be most consistently associated with psychological well-being, while a global measure of quality of life was largely unrelated to sexual functioning domains. These results suggest that sexual functioning requires focused assessment by providers, and that attention to sexual/relationship satisfaction may be critical in the development and implementation of interventions.

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