

# Sexual Health Information for Men with Cancer



Symptom Management

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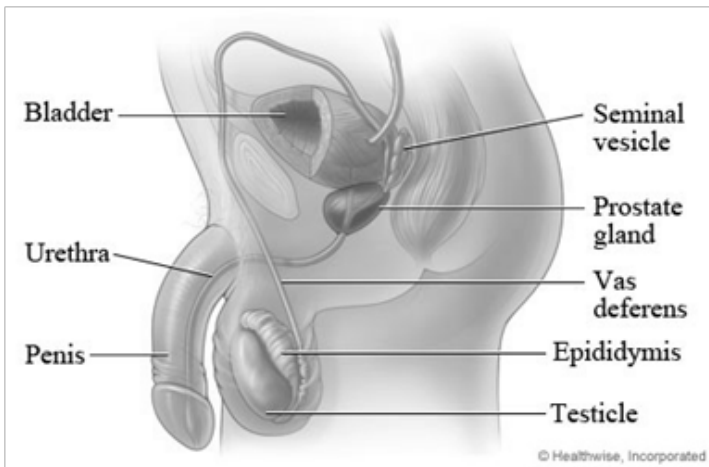
## The Male Reproductive System

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This information will help you understand how the male reproductive system works (before treatment) and some of the words your doctor or health care provider might use.

A man's genitals (the penis and scrotum) are outside the body. The scrotum contains the testicles, which make sperm and testosterone. When a man ejaculates, sperm travels through a tube (vas deferens) to the prostate gland. White, milky fluid called semen is added and it travels down the urethra and out the penis.

When a man has a vasectomy, the vas deferens is cut and tied.



## **What is testosterone?**

Testosterone is a hormone that affects sex drive and interest in sex. The testicles make sperm and testosterone. Some testosterone is also made by the adrenal glands.

Testosterone normally decreases as men get older. Testosterone can also decrease for a short time if a man is depressed, stressed, sick, or gets hurt.

Testosterone replacement is a treatment for low testosterone. If you've had testicular cancer and had one or both testicles removed, ask your doctor about testosterone replacement.

## **Will cancer treatment affect my testosterone?**

Some cancer treatments stop the body from making testosterone. For example, androgen deprivation therapy like Eligard®, Casodex®, or having the testicles removed can do this. If you have questions about testosterone replacement, talk to your doctor or health care provider.

You don't need testosterone to have sex, but it does help you get aroused, have an erection, and have an orgasm. Men without testosterone can still have sex, but it can be challenging with a low sex drive. When testosterone is decreased, many men aren't as interested in sex.

Sometimes men stop being sexual and sometimes they even stop being affectionate. This can happen because they can't have sex or because they've lost their sexual desire. If this happens to you, remember your partner might still be interested in sex and/or being affectionate like hugging or cuddling. Your partner might not say anything about this because he or she doesn't want to put pressure on you.

Some couples aren't affected if they don't have sex. It's important to talk about sex or other ways to be intimate so you know how your partner feels. Your partner might want to talk about ways to be sexual or he or she might be okay with not having sex.



There are ways to improve your sex life and be intimate by learning more about improving your sexual desire and erections.

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## Managing Erection Problems

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### What is an erection?

When a man has an erection blood flows to the penis, which makes it hard. Many men have erection problems (erectile dysfunction, impotence) as they get older.

Some of these problems include:

- trouble getting an erection
- the penis isn't as hard as it used to be with an erection
- erections don't last as long as they used to

Men can still have orgasms, even if they don't have an erection. During sexual touching or stimulation, a man can still have an orgasm, even if the penis isn't hard enough for intercourse. It's normal for men to have difficulty with erections on occasion. Erectile dysfunction gets more common as men get older.

## **What happens during an erection?**

The prostate gland has a bundle of nerves around it. When a man gets turned on (is aroused) or interested in sex, or the penis is stimulated, a message is sent to these nerves that makes blood flow to the penis. The tissue of the penis is like a sponge, which can absorb blood. When this spongy tissue fills with blood, the penis gets hard.

When men have pelvic surgery or pelvic radiation, these nerves are often damaged. After surgery, the nerves might be bruised or inflamed. These nerves can heal, but it's a slow process that can take up to 2 years. If the nerves are cut, they won't grow back together and the damage is likely permanent.

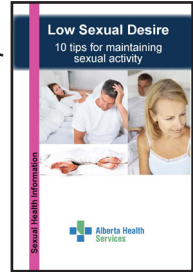
Men can still enjoy having their penis or genital area stimulated and they can still have an orgasm, even if they don't get an erection. Cancer treatments don't damage the nerves that control orgasms or feelings in the pelvic area and penis.

## **What causes erection problems?**

Erection problems can be caused by:

- blood vessel problems
- nerve problems
- heart disease
- diabetes
- smoking
- cancer treatments involving the pelvis, such as pelvic radiation therapy, or pelvic surgery
- depression, anxiety, or stress
- drinking too much alcohol

Chemotherapy can also affect the ability to have an erection because it can affect sexual desire. If this happens, sexual touching might be needed before an erection can happen. If you're having trouble with your interest in sex or erectile function, think about erections in a different way—as a response to sexual touch. Erections may happen with sexual touching instead of on their own when you think about or feel the urge to have sex. (For more information, see the **Low Sexual Desire** booklet).



### **How does an orgasm happen?**

When some nerves are stimulated, it gives the body a feeling of pleasure. For example, when the penis is touched in a sexual way, a man feels pleasure.

Many people think ejaculation and orgasm are the same thing—they aren't. Sometimes after surgery or pelvic radiation, some of the nerves are damaged and some of the nerves aren't. Even if nerves are damaged, a man can have an orgasm without having an erection. This is because the nerves that help a man feel pleasure are different than the nerves that cause an erection.

If taking part in sexual activities, like stimulating the penis with a hand, and your penis isn't hard, it's a good idea to use a lubricant. If you don't, the friction can be painful and you might not enjoy it as much.

If the prostate has been removed, a man can still have an orgasm, but he won't ejaculate. This is called a dry orgasm. Some men say that the quality of the orgasm is different, but many men say it's just as enjoyable.

## **What is ejaculation?**

Men ejaculate when they orgasm, which causes fluid to come out of the penis.

If men have had treatment for prostate cancer, they typically no longer ejaculate semen. The gland that makes the liquid part of semen is removed during surgery, and is damaged during radiation.

An orgasm is different than ejaculation. For most men, these happen at the same time, but a man can have an orgasm without ejaculating, which is called a dry orgasm. If a man is unable to ejaculate semen, then it means he is infertile.

### **If I have trouble with erections, are there treatments?**

There are many ways to treat erectile dysfunction including:

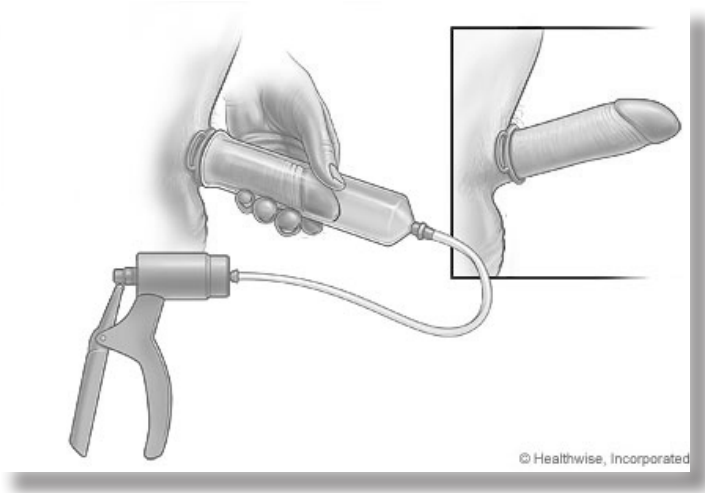
- A. Vacuum Erection Devices
- B. Oral Medicine for Erections
- C. Penile Injections
- D. Penile Prosthesis
- E. Sex Without a Firm Erection
- F. External Penile Protheses



**A**

## Vacuum Erection Devices

Vacuum devices are cylinder-shaped, external pumps put over a soft penis to make it hard.



### How does a vacuum erection device work?

You use a lubricant to create a seal between the cylinder and the skin. When you start pumping, the air in the cylinder is removed. This creates a vacuum around the outside of the penis. The pressure pulls blood into the penis, which makes it swell and get hard.

Once the penis is hard, put a rubber retaining ring on the penis before you take off the pump. This is not harmful. You can leave the ring on for up to 30 minutes, but no longer.

## **What if I want an erection longer than 30 minutes?**

If you want to have an erection for longer than 30 minutes, you need to take the ring off for a few minutes so the blood flows normally. After a few minutes, use the pump again to make the penis hard and put the retaining ring back on for 30 minutes, but no longer.



## **Will the erection look normal?**

- The skin of the penis may look darker or blue and might feel cool.
- The erect penis might move more from side to side than normal.
- The penis may hang erect from the body instead of standing up erect. Sometimes this makes the penis slip out during intercourse. You and your partner might need to adjust the way you thrust during sex, or try different positions.
- Some men get a firmer erection if the device is used after foreplay that might stimulate a partial erection.
- It won't change how the skin on the penis feels, or the ability to feel an orgasm.
- Many men find that the ring closes off the urinary tube, which means that no fluid comes out during an orgasm. If this happens, it will likely drip out when the ring is removed after sex.

## **Are there side effects when the vacuum device is used?**

When you use a vacuum device, you might get mild bruising on the penis.

## **Where can I buy a vacuum device?**

It's a good idea to buy a medical quality device. You can buy them online. Call Psychosocial & Rehabilitation Oncology in Calgary at 403-355-3207 to learn more about using vacuum devices. You can attend a teaching session with staff in this department and also access the device from there.

### **Tips for Using a Vacuum Device**

- It's important to have support from your partner if you choose this option. It's also a good idea to have foreplay with your partner before and after you use the vacuum device.
- Practice using the device for a few weeks before you use it for sexual activity. If you have questions, call the manufacturer—there's usually an advice line.
- You can buy many different types of rings. Try different ones to find out what you like, what you're comfortable with, and what size is right for you.
- Think about asking your partner to help you use the device.
- Before intercourse, warm the penis with a warm cloth or hand massage.
- Talk about and make sure your partner understands that you're still attracted to him or her, even though you need the device to get an erection.
- Try some foreplay on your partner after you use the device and before you start intercourse, so that sexual excitement stays high.
- Some partners feel comfortable touching themselves while you use the device to stay sexually excited.

**B****Oral Medicine for Erections**

There are types of medicine taken by mouth for erection problems, which include:

- Viagra®
- Cialis®
- Levitra®
- Staxyn®

**How does medicine taken by mouth work for erections?**

A man takes a pill before he wants to have an erection for sex. The pills work by increasing a chemical that helps blood flow to the penis. It takes at least 30 minutes to work. Most medications last up to 4 hours, except Cialis® which has both the daily dose version and also a longer acting pill that can last for 48 hours.

These types of medicine have no effect on sexual desire or interest so the erection will not just happen on its own. After the pill is taken, the man needs to get sexually excited (mentally) and start foreplay (such as touching) to get an erection. These types of medicine work for about 7 out of 10 men.



Check with your doctor or pharmacist before you take any type of erection medicine. Don't take erection medicine if you take:

- nitrate medicine (such as nitroglycerin) for heart disease
- alpha-blockers to lower blood pressure and treat enlarged prostate glands

### **Will oral medicine work for me?**

- If you've had other types of cancer than prostate and some degree of erectile dysfunction, pills might help. You might need to take them long-term (or for weeks or months), until you can get an erection again on your own. Confidence can play a big part with erectile function. If you don't believe you'll get an erection, you might not get one. Sometimes taking erection medicine helps make you more confident and is only needed short-term.
- Oral medicine for erections usually works best for mild erection problems. Talk to your health care provider if you have any questions about erection problems.
- If you've had your prostate removed, these types of pills might not work for you in the first year after surgery. They may work for you if your surgery was a nerve-sparing procedure. The pills may work better after a man's natural erections have had time to recover—about 12 to 24 months after surgery.
- If you've had radiation for prostate cancer, the pills might help at first, but may not work long-term.

## **What are the side effects of erection medicine?**

Side effects may include:

- headaches
- flushing in the face
- upset stomach
- your vision going blue for a short time (Viagra® only)
- your eyes being sensitive to light
- nasal congestion

Don't eat heavy, high-fat meals when you take this type of medicine because it may not work as well. If you have any questions about the medicine, talk to your doctor or pharmacist.

## **Where can I get erection medicine?**

You need a prescription from your family doctor or oncologist. These types of medicine are not usually covered by most benefit plans. Talk to your insurance company to find out about your coverage.

### **Tips for Taking Erection Medicine**

- Try the medicine a few times because it doesn't always work well the first time.
- If you've had pelvic surgery, ask your doctor how long you have to wait before you try this type of medicine.
- Tell your partner you're taking erection medicine and that it's safe for you to use. Don't try to hide it.

A man can get an erection when medicine is injected into the shaft of the penis with a very fine needle. This medicine is only prescribed by specialists (usually urologists). Not all men can use these types of medicine. Talk to your doctor to see if they're right for you. These types of medicine include:

- prostaglandin E1 like Caverject® or Edex® (most common)
- phentolamine
- papaverine



If you've had prostate cancer, bladder cancer, colorectal cancer, or surgery or radiation to the pelvis, this treatment might be the best option for you. Injections can work even if you've had the prostate removed and the nerves that cause erections are damaged. If you've had surgery, usually just a small dose of medicine will give you a firm erection. If you've had radiation, you might need a higher dose since some of the blood vessels may be damaged.

### **How do the injections work?**

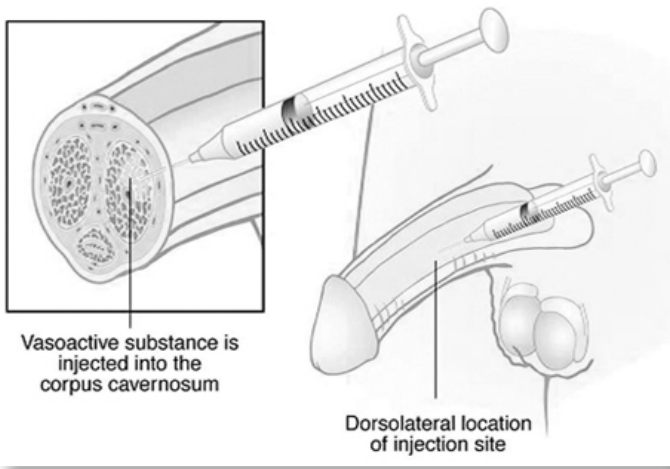
A man injects the medicine into his penis about 10 to 15 minutes before he wants to have an erection. The medicine makes the penis swell (without physical stimulation) by causing blood to flow to the area.

With foreplay or when a man is excited about sex, the erection will likely get harder. The erection usually happens within 10 to 15 minutes of the injection and will last 30 to 60 minutes.

The erection may not go down completely, even after an orgasm. **If the erection lasts longer than 2 hours after the injection, call your doctor right away.** If you can't reach your doctor, go to an urgent care centre or emergency room.

The idea of injecting medicine into the penis might not sound appealing, but most men say the pain isn't too bad.

Your doctor will teach you how to do the injection and the first one will be given at the doctor's office. It's very important to do the injection the way your doctor taught you—on the side of the penis, towards the bottom. The needle is put right into the penis at a 90° angle.



<https://edpostprostatehelp.wordpress.com/treatment-options/penile-injection/>

Only use injection needles 1 time and then throw them away. You can buy needle disposal containers at a drug store or use an old bleach bottle to store them.



If you're having trouble injecting yourself, think about asking your partner to learn how to do the injection from your doctor. You can buy penile auto-injectors, which might make it easier. If you are interested in this, talk to your doctor or health care provider.

The medicine must be stored in the fridge, which makes it hard to use if you're travelling.

### **What are the side effects of the injection?**

The most common side effects of the injection are:

- aching in the penis (feels like pins and needles)
- a burning feeling in the penis
- bleeding at the injection site, which can cause a bruise—to prevent this, press firmly on the injection site for 5 minutes after the injection

Long-term effects are rare. About 3 to 10 men out of 100 develop scarring on the penis. Mild scarring might feel like small lumps, but severe scarring might make the penis curve with an erection.

### **What if my erection lasts longer than 60 minutes?**

An erection will rarely last for longer than 4 hours, but when it does, it's called **priapism**. If your erection lasts longer than 2 hours after you've had sex, see a doctor right away. This might happen if the dose of medicine is too high for you. Don't increase your dose of medicine unless your doctor tells you to. Don't inject more than 1 time a day. It's best to wait 48 hours between injections.

## Where do I get the medicine?

You need a prescription for the medicine and you also need a health care provider, such as a urologist to teach you how to inject it. You need a referral from your family doctor or oncologist to see a urologist. These types of medicine are not usually covered by most benefit plans. Talk to your insurance company to find out about your coverage.



## Tips for using the injection

- It's important to have support from your partner if you choose this option. It's also a good idea to have foreplay with your partner after you give the injection.
- If the injection doesn't work well the first time, wait at least 48 hours and try again.
- Always use the dose of medicine that your doctor tells you to.
- Men don't usually say the needle is too painful, but sometimes the erection itself may be painful. If you have pain using the injections and it's within the first 6 months after surgery, you may want to wait a few months to try the injection again. It will likely hurt less the longer it is since you had your surgery.
- Talk about and make sure your partner understands that you're still attracted to him or her, even though you need the injection to get an erection.



## **What if I've tried different types of medicine and they don't work?**

If you've tried different types of medicine to help with erection problems and they haven't worked well for you, there are other options including:

- inflatable penile prosthesis (IPP)
- sex without a firm erection
- penis pump/vacuum erection device with rubber retaining ring

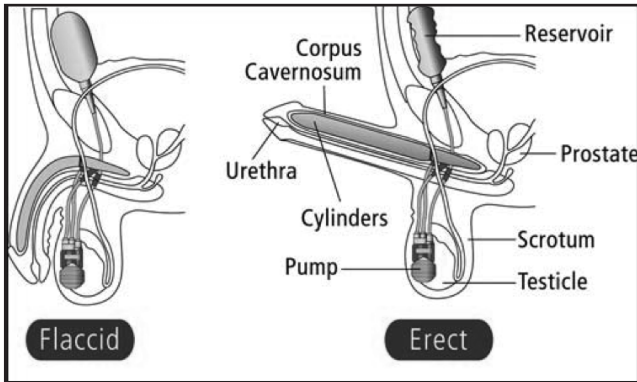
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## **Inflatable Penile Prosthesis (IPP)**

An IPP is a pump system implanted into the penis. Surgery is needed to put the pump system in. IPPs are inflated so they're erect for sex, and deflated so they're soft the rest of the time.

There are 2 companies that manufacture these implants. They come in self-contained, 2-piece or 3-piece versions. The more complex the implant, the firmer and larger the erection when it's inflated, and the softer and more natural the penis is when it isn't inflated. However, the more parts the implant has, the more likely it is to break down.

To get an erection, a man presses on a small pump that moves fluid into the cylinders in the penis. The penis doesn't deflate after orgasm until a release valve is pushed. You can't tell if someone has a penile prosthesis, unless you see the small scar on the bottom of the penis.



<http://www.soc.ucsb.edu/sexinfo/article/erectile-dysfunction-causes-symptoms-treatment>

### How does the IPP work?

All IPPs are similar. They all have 2 cylinders and a pump system that are put in the penis and the surrounding area. When they're empty, the penis looks and feels soft and hangs down. When they're filled with fluid (saline or saltwater that stays in the pump system), the penis gets bigger and hard.

There are different kinds of pump systems, but they all work the same way—fluid is pumped into the device to make the penis hard. The IPP makes an erection that's just like a natural erection.

Many men say the size of the erection is shorter than what's normal for them. This doesn't usually matter to the person's partner and it doesn't usually affect a partner's orgasm with intercourse.

If this is a concern for you and your partner, try different sex positions. For heterosexual couples, try with the woman on top as it increases friction against the clitoris and makes it easier to have an orgasm. For same sex couples, it's safe to try different positions to stimulate the partner's prostate.



### **What can I expect with an IPP?**

- When the prosthesis isn't inflated, the soft penis is a little fuller than normal, but it looks the same.
- It doesn't change how the skin of the penis feels or a man's ability to have an orgasm.
- A man still ejaculates and passes urine the same way.
- Once a prosthesis is put in, a man will never be able to get an erection without inflating it.
- If the implant is removed, the man won't ever be able to have natural erections.

## Who can get penile prostheses?

IPPs are used for health issues that affect erection problems when there are no other treatment options. Once a prosthesis has been put in, a man can't have an erection without it. This means it won't work for men with stress-related erection problems. It's best to get counselling for these types of problems or just give it time.

If a man has had a radical prostatectomy for prostate cancer, he needs to wait at least 2 years before having surgery to get an IPP. This is to see if the ability to have an erection will recover.

## What are the side effects of the implant?

- Implants work well about 9 times out of 10. About 1 in 100 men have mechanical problems with the IPP (for example, part of the device springs a tiny leak). These problems can often be fixed.
- Men rarely get an infection in the first few days after surgery (about 2 out of 100 men). If this happens, the IPP has to be removed until it heals.
- It's best to choose a surgeon who has lots of experience putting in IPPs.



## Tips for Using an IPP

- It's important to have support from your partner if you choose this option. It's also a good idea to have foreplay with your partner before and after you use the IPP.
- Tell your partner you have an IPP. Don't try to hide it.
- Don't use the IPP until you're healed from your surgery. Your surgeon will tell you when it's okay to have sex.
- Think about getting your partner to inflate the IPP as part of foreplay. Before penetration, warm the penis with a warm washcloth or hand massage with a lubricant.
- Talk about and make sure your partner understands that you're still attracted to him or her, even though you need the device to get an erection.

## E Enjoying Sex Without a Firm Erection

Many couples keep having sex, even if the man can't get a firm erection. People can still have orgasms with caressing, oral sex, or other types of stimulation.

Think about trying a sex toy, such as a vibrator. A vibrator works well if you're tired or if you get tired using your hands to stimulate your partner. You can also lie facing your partner and rub your genitals against each other or use a vibrator between you. Make sure to use a good lubricant to make it feel good and decrease pain from friction.



Many people think that sex with penetration is the only ways to have sex. But, most couples use touching and caressing as part of their routine. When couples can't have intercourse because of erection problems, many give up on sex, but others continue to have sex in other ways. Think about trying something new.

There is no risk when learning to enjoy sex without a firm erection. Some people may feel this option goes against their religious beliefs or values. If this is a concern for you, talk to your health care provider.



### **Where can I buy sex toys?**

You can buy sex toys at sex positive adult stores or online such as: [alittlemoreinteresting.com](http://alittlemoreinteresting.com), [pinkcherry.ca](http://pinkcherry.ca), or [amazon.ca](http://amazon.ca).

## **Tips for Having Sex without a Firm Erection**

- Try different ways to caress each other that you haven't tried before. Try things more than once if they don't work well the first time.
- Make sure you understand your partner's body, and where and how they like to be touched. Most women like to have the clitoris touched and caressed. Talk to your partner about what you like. Be open to trying new kinds of touch.
- If you or your partner has a hard time reaching orgasm, think about using a vibrator when you have sex.
- Add in new ways to increase your excitement like thinking about a sexual fantasy or reading an erotic story to each other.



- Use a lubricant when stimulating the penis by hand or with a vibrator.
- Think about masturbating (on your own or with your partner). This can help you know how you like being touched best. Sometimes, this can change after surgery or cancer treatment. Talk about how you like to be touched with your partner. Also, anything that increases the blood flow to the penis helps keep the tissue healthy, including masturbation.

## F

### External Penile Prosthesis

Research shows that many people find using external prostheses for intercourse very satisfying. This option might not be right for everyone.

To do this, a dildo and pelvic harness are used, which you can buy at adult sex stores or online. The dildo sits in the harness just like an erect penis. The pelvic harness holds the dildo on, right above the soft penis. The couple can then have penetrative intercourse.



<http://www.lovelifeandintimacy.com/>

Get into a position just like you would for regular intercourse. Thrust just like you would for penetrative sex. Your partner can get pleasure directly from this type of intercourse, but you'll need to be stimulated with your partner's hand to feel pleasure in the penis.

If the soft penis is caressed with the partner's lubricated hand, the man can have an orgasm. Having the penis stimulated and the pelvic movements with intercourse can make it pleasurable for the man wearing the prosthesis. Many men say this feels just like regular sex.

### **How does this type of sex work?**

With the right stimulation and the muscle memory of pelvic movements during sex, a person can actually make the brain think it's having penis-in-vagina sex or penetrative intercourse.

There are no risks with this type of intercourse, but some people may feel this option goes against their values or even their religious beliefs. If you have questions or concerns, talk to your health care provider.



## **Tips for Having Sex with an External Penile Prosthesis**

- Talk about these ideas with your partner ahead of time. Make sure to talk about your comfort level and worries you might have.
- Make sure you and your partner are both willing to explore a new way of being sexual.
- Go to the sex toy store together or go online together to buy these products.
- Use a water-based lubricant for stimulating a soft penis.
- Try different positions for sex to find what's most comfortable for you and your partner.
- Be open to trying new things. Even if you decide you don't want to try them again, you've bonded with each other over trying something new.

### **Possible questions/topics you can discuss with your partner:**

- How do we feel about using or exploring erectile aids and/or sex toys?
- What should we do when you get aroused and I don't?
- Are you comfortable with one of us reaching orgasm even if the other does not?
- Is it okay if I bring you to orgasm through touching or oral caressing even if I do not have a full erection?
- What kinds of touching do you most enjoy now?
- These are the kinds of touch that I most enjoy now.....

## What options are you willing to try?

Option	How willing are you to try it? (Circle one)	How willing is your partner? (Circle one)	Why?
<b>Non-penetrative sexual activity (touching, oral sex)</b>	1=willing to try 2=unsure 3=not willing to try	1=willing to try 2=unsure 3=not willing to try	
<b>Experiment with sex toys</b>	1=willing to try 2=unsure 3=not willing to try	1=willing to try 2=unsure 3=not willing to try	
<b>Oral medications</b>	1=willing to try 2=unsure 3=not willing to try	1=willing to try 2=unsure 3=not willing to try	
<b>Vacuum erection device</b>	1=willing to try 2=unsure 3=not willing to try	1=willing to try 2=unsure 3=not willing to try	
<b>Penile injections</b>	1=willing to try 2=unsure 3=not willing to try	1=willing to try 2=unsure 3=not willing to try	
<b>Inflatable penile prosthesis</b>	1=willing to try 2=unsure 3=not willing to try	1=willing to try 2=unsure 3=not willing to try	
<b>External penile prosthesis with harness</b>	1=willing to try 2=unsure 3=not willing to try	1=willing to try 2=unsure 3=not willing to try	
<b>Other</b>			

# Managing Incontinence and Leaking of Urine

## What is urinary incontinence?

Urinary incontinence is the accidental release of urine. It's common for people to lose some bladder control after treatments for cancer of the pelvis, such as radiation or surgery. This can be embarrassing and disrupt daily activities. Even if you have good bladder control during the day, you might still have incontinence when you sneeze, cough, or laugh (stress incontinence).

## What causes stress incontinence?

Stress incontinence happens when the muscle that holds the bladder's outlet closed isn't strong enough to hold back the urine.

## How is incontinence treated?

There are treatments for incontinence and ways to help you manage it at home.

## How long does incontinence last?

After pelvic surgery (e.g., for prostate cancer), many men have incontinence for at least 3 months. It's usually better after 6 months. Incontinence usually gets worse later in the day because the muscles in the pelvic floor get tired.



## **What is pelvic floor physiotherapy?**

Exercises you can do to strengthen your pelvic floor. When the muscles in the pelvic floor are tightened, it should feel like you're tightening the same muscles you use to stop the flow of urine or pass gas. It feels like you're lifting the scrotum up and inward. When the muscles are relaxed, it should feel like when you relax to pass urine.

Pelvic floor muscle strength is an important part of bladder control. Strong pelvic muscles can help decrease incontinence, help the bladder hold urine when you feel the urge, and make harder erections.

If you do pelvic floor exercises regularly, incontinence may get better after a couple of months. If symptoms don't get better, see your doctor. For information on finding a physiotherapist near you, visit: [physiotherapyalberta.ca](http://physiotherapyalberta.ca).

### **How to do pelvic floor exercises:**

1. Empty your bladder and get into a sitting position.
2. Tighten your pelvic floor muscles as strongly as you can, then let go. It should feel like you're lifting or pulling that area up. Don't tighten the muscles in your stomach or buttocks and don't hold your breath while you do the tightening.
3. Hold the tightening for 3 seconds, 5 seconds, or 10 seconds. Hold it only as long as you can fully hold it. It's better to do a few really good tightening exercises, than many that aren't fully tightened.
4. Repeat this 10 times. The more you practice, the more muscle strength you'll build up. If you keep doing the exercises, eventually you'll be able to hold for 10 seconds.
5. Try to practice these exercises during the day. You can do the exercises while sitting, standing, lying down, or walking. Your muscles will get stronger if you do the exercises 3 to 5 times every day.

## **How do I manage incontinence and sex?**

Some couples struggle with urine leaking during sex. These ideas might help:

- Lay a towel out on the bed before sex—if urine leaks, the towel will absorb it.
- Keep a warm, wet cloth near you for easy clean up if needed.
- Remember that urine doesn't have any germs in it, so it isn't harmful if it leaks while having sex.
- Try having sex in the shower or bath.
- Use an erection ring (like the kind used with a vacuum erection device) to help prevent leaking.
- Even when men have good control of the bladders during the day, they might still leak urine when they become aroused or have an orgasm.

## **What if my incontinence isn't getting better?**

Some men with severe stress incontinence might need surgery. Your doctor might want you to wait until after your cancer treatments to have surgery. Many doctors recommend waiting at least 1 year before having surgery for incontinence. Your doctor will tell you what surgery is best for you.

The different types of surgery for incontinence include:

- artificial sphincter
- urethral bulking
- bulbourethral sling: a sling is put under the urethra to support it and is attached to muscle or the pubic bone
- electrical stimulation



# OASIS

ONCOLOGY AND SEXUALITY,  
INTIMACY & SURVIVORSHIP

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