Let’s talk about sexuality in cancer care: a cross-sectional analysis of a multicenter survivorship program.

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INTRODUCTION

- Sexual dysfunction is a highly prevalent but frequently overlooked issue among breast cancer survivors (BCS)[1,2].
- Despite its well-established negative impact on quality of life and intimate relationships, conversations about sexual health rarely occur in routine oncology care[3].
- This study investigates the prevalence of post-treatment sexual symptoms and explores their associations with emotional well-being and partner dynamics among BCS participating in a structured survivorship program.

METHODS

- We conducted a cross-sectional analysis using data from “OC sobre VIVER,” a multicenter survivorship program led by the Oncoclínicas Group (Brazil). One of the few structured survivorship care models in Latin America and the largest coordinated initiative in Brazil.
- Eligible participants were women 3–18 months post-completion of active treatment.
- Structured clinical interviews were used to assess:
  - **Sexual symptoms**: vaginal dryness, dyspareunia, and low libido
  - **Emotional health:** self-esteem, anxiety, and depression
  - **Partner relationship factors:** communication quality among those with partners
- All data were collected and managed using REDCap. Descriptive statistics and bivariate analyses were performed in GraphPad Prism (Version 10).

RESULTS

- Between July 2023 and March 2025, a total of **391 women** were enrolled (median age 50 years; range 30–86). Among the 391 survivors enrolled, staging information was available for 376.
- Among the 376 women with staging data, **95% had invasive breast cancer.**

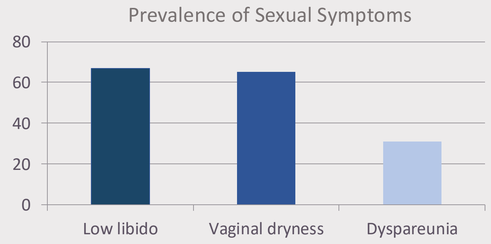
Stage I – 55% Stage II – 33% Stage III – 12%

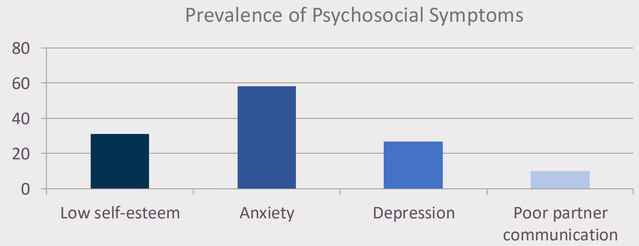
Women strongly desire open, supportive conversations about sexual health during survivorship care.

92%



A striking 92% of breast cancer survivors wished to discuss sexual health during clinical visits.





- Dyspareunia was significantly associated with anxiety (p = 0.0003), but not with cancer stage, depression, or communication quality.
- Low libido was more frequent among women with low self-esteem (75% vs. 64%, p = 0.043), higher cancer stage (Stage III: 15% vs. 4%, p = 0.008), and ongoing endocrine therapy (71% vs. 56%, p = 0.012).
- There was non–significant trend toward a higher prevalence of low libido among women reporting poor partner communication (78% vs. 63%, p= 0.143). No associations were observed with age, marital or relationship status, or chemotherapy exposure(p > 0.05)

CONCLUSIONS

- **Sexual symptoms—including libido changes, vaginal dryness, and dyspareunia—were highly prevalent among breast cancer survivors participating in this nationwide survivorship program. These symptoms were not isolated physical complaints; rather, they were closely linked with emotional well-being and the quality of partner communication, underscoring the multidimensional nature of sexual health after cancer treatment.**
- **The high proportion of women expressing a desire to discuss these issues with their clinicians further highlights a substantial and persistent gap in routine care.**
- **Our findings reinforce the importance of integrating systematic sexual health assessment into survivorship workflows. Tailored, multidisciplinary interventions should be prioritized to meet these complex needs.**
- **Proactive recognition and management of sexual symptoms have the potential to meaningfully enhance survivors’ quality of life, support emotional recovery, and strengthen intimate relationships.**
- **Expanding structured survivorship models that normalize these conversations and ensure timely access to evidence-based support may ultimately contribute to more holistic, equitable, and patient-centered cancer care.**

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- **DOI:** The author who is presenting declares that they do not have any conflicts of interest
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San Antonio Breast Cancer Symposium® - December 9-12, 2025

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