PS1-02-11 The Unbridged Gap in Sexual Health Counseling: A Global Oncology Trainee Perspective

Kriti Ahuja, MD[1], Malak Alharbi, MBBS[1,2], Zunairah Shah, MD[1], Julie Mussel, NP[1], Shipra Gandhi, MD,MS[3], Helen Cappuccino, MD[1],Atlal AbuSanad, MBBS[2], Varsha Gupta, MBBS[1], Laila S. Agrawal,MD[4], Arya Roy,MD[5]

[1]Roswell Park Comprehensive Cancer Center, NY, United States, [2]King Abdulaziz University Hospital, Jeddah, Saudi Arabia, [3] Winship Cancer Institute, Atlanta, GA, USA [4] Norton Cancer Institute, Louisville. KY, USA [5] Ohio State University, Wexnar Medical Center, Columbus, OH, USA

Introduction

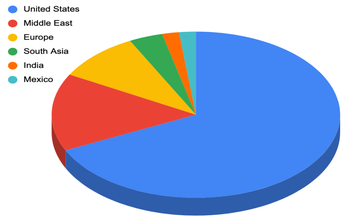
Clinical guidelines recommend addressing sexual health (SH) as part of routine oncology practice, yet only 20-29% of patients with breast cancer (BC) report receiving SH counseling. SH remains mostly excluded from formal medical training.

This study explored the current knowledge, attitudes, and barriers to SH counseling among oncology trainees working in breast oncology settings globally.

Methods

A cross-sectional survey of oncology trainees assessed demographics, SH knowledge, practices, and counseling barriers using anonymous questionnaires distributed through X, LinkedIn, WhatsApp, and email

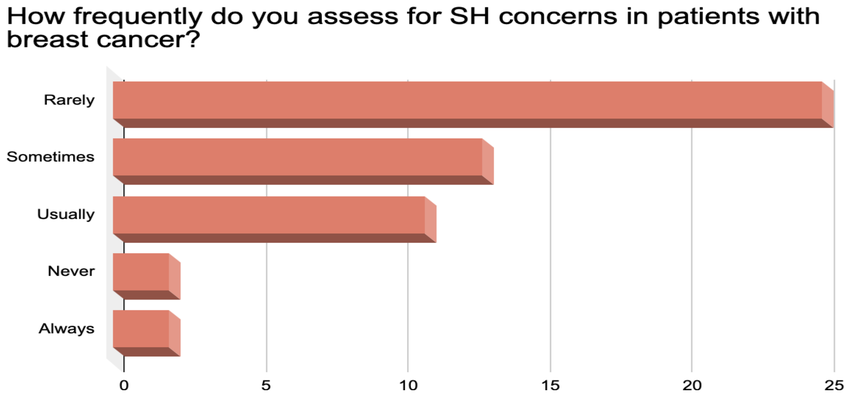
Results

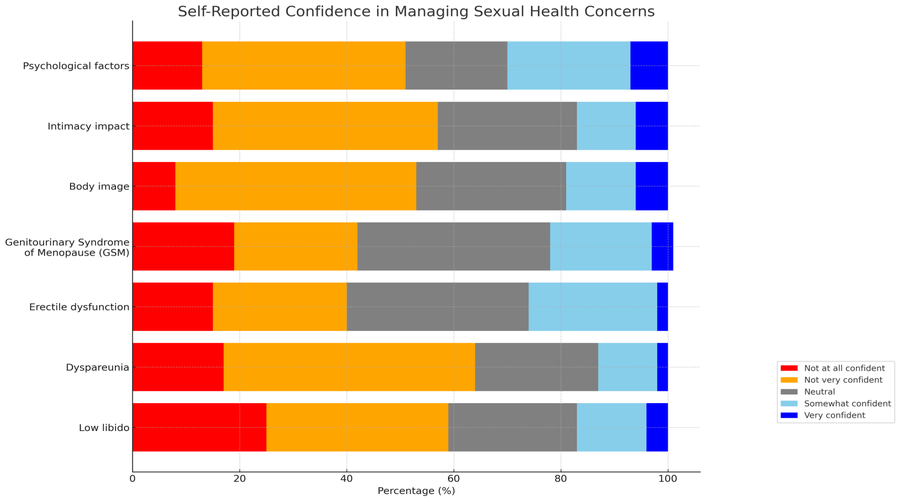


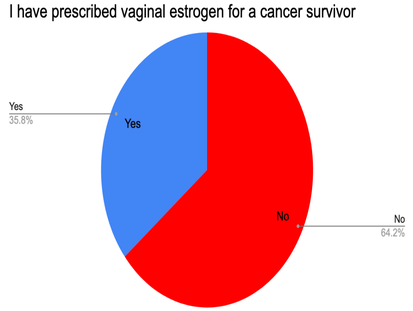
- ✓ N= 55 oncology trainees
- ✓ 51% male, 49% female
- ✓ Majority 31–35 years
- ✓ 91% medical oncology

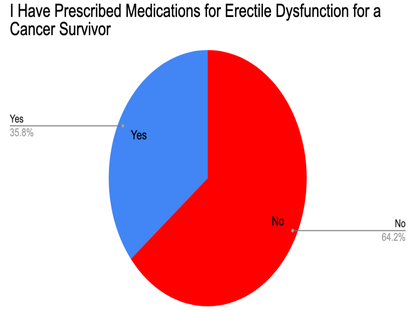
- **89%** reported limited knowledge of SH concerns during cancer treatment
- **72%** were more likely to address SH with patients **younger than 50**
- **68%** were more likely to address SH in **early-stage BC**
- **94%** reported **insufficient SH training**, with around **60% receiving**

no training to counsel females, males, or transgender patients with BC









➢ **Low awareness of SH resources in home institute:**
- Unsure about pelvic floor therapy (**50%**)
- Sex therapy (**59%**)
- Behavioral therapy (**50%**)

➢ **Top barriers to SH counseling:**
- Lack of training (**85%**)
- Limited time (**65%**)
- Cultural sensitivity, provider discomfort, limited treatments

➢ **Strong support for more SH education (83%)**
- Seminars (**83%**)
- Shadowing experts (**50%**)
- Online courses (**50%**)
- Simulation training (**26%**)

Conclusions

Oncology trainees worldwide treating BC report inadequate training in SH, low confidence, and limited awareness of available resources. Formal education and social media engagement may help bridge the counseling gap.

Contact
Malak Saud Alharbi
Roswell Park Comprehensive Cancer Center
Email: msdalharbe@kau.edu.sa

This presentation is the intellectual property of the author/presenter. Contact them at msdalharbe@kau.edu.sa for permission to reprint and/or distribute.

© Poster Template by Genigraphics® 1.800.790.4001 www.genigraphics.com