Couples Counseling Helps Improve the Sex Lives of Prostate Cancer Survivors and Their Spouses

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Both internet-based counseling programs and face-to-face therapy sessions for couples improve the sex lives of prostate cancer survivors and their spouses. That is the finding of a new study published early online in Cancer, a peer-reviewed journal of the American Cancer Society. The results suggest that couples counseling can provide additional benefits to patients’ sex lives beyond those experienced from medications such as erectile dysfunction pills.

Despite efforts to make therapies for prostate cancer less destructive to men’s sex lives, most men who are treated end up with erection problems. Many also lose some desire for sex and have a diminished ability to reach or enjoy orgasms.

Leslie Schover, PhD, of the University of Texas MD Anderson Cancer Center in Houston, and her colleagues tested the effectiveness of different strategies to improve the sex lives of prostate cancer survivors and their spouses. Their study included 115 couples in which the man’s prostate cancer treatment had taken place a little less than two years previously. At the start of the study, half of the couples waited three months for an intervention while the other half either went through three face-to-face sex therapy sessions or interacted with a Web site that presented the same information with email feedback from a counselor. A third group of 71 couples who lived too far away for face-to-face therapy also received internet-based therapy.

After three months, no benefits were seen among couples in the waiting group, and they were then assigned to one of the two treatments. Both partners were asked to complete questionnaires that assessed sexual function and satisfaction before starting counseling, after the treatment, and at 6-month and 1-year follow-up.

Both face-to-face therapy and internet-based therapy were effective at improving men's sexual function and satisfaction, based on scores from questionnaires. Also, when the man's score improved, the woman's did as well. Even one year after the end of the counseling period, couples were still better off than before the program began. For those couples in the internet-based version, however, only those who completed most of the Web program improved significantly.

Dr. Schover noted that while both types of interventions improved couples’ sex lives, an internet-based program may be easier to implement than one that is conducted face-to-face. “An internet-based treatment has the advantage of costing less in counselor time and allowing expert health care providers to help cancer survivors who live too far away from a city or cancer center,” she said.

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