Between the Sheets...

This column provides the platform for experts in the field to help men and women by providing answers to questions about sexual health and intimacy challenges that can result from prostate cancer treatment.

This column was compiled with the help of Dr. Jeffrey Albaugh, Director of Sexual Health at NorthShore University HealthSystem and at Jesse Brown VA Medical Center in Chicago, IL. Dr. Albaugh is a funded researcher, a board certified advanced practice urology clinical nurse specialist, and a board certified sexuality counselor. In addition to his many publications in peer reviewed journals and chapters in books on sexual dysfunction, Dr. Albaugh published Reclaiming Sex and Intimacy After Prostate Cancer Treatment. He has been quoted in media and publications as an expert in the treatment of sexual dysfunction, and is a member of the Us TOO Board of Directors.

QUESTION FROM PROSTATE CANCER SURVIVOR:
My partner and I are struggling with our changing sex life because of my lack of erection rigidity after my prostate surgery during sex. We have been together for more than 20 years and over the year since my surgery, I have begun to get partial erections, but they are still not hard enough for sex, even with the pills. Any advice on how we can continue to enjoy sex, given my lack of erection rigidity?

RESPONSE FROM DR. JEFFREY ALBAUGH:
I think you are not alone in your feelings of frustration in dealing with a lack of an erection rigid enough for sex. It is very frustrating to not be able to do the sexual things you enjoy. I think it is most important for you and your partner to communicate and discuss sex (outside the bedroom and away from the times you are having sex together). What are your goals in terms of sex together? It will help to discuss the underlying goals of sex. Many enjoy the connectedness with their partner that occurs with intimacy and sex, as well as the pleasure of giving and receiving sexual stimulation together. Determining your mutual goals can help you determine necessary steps for the future in terms of treatments.

If you need to be rigid enough for penetration to reach your goals with sex, you need to consider the various treatment options carefully. The oral agents are not working for you, so you need to determine which of the other options you are willing to try given the pros and cons of each option. Local therapies, such as the vacuum device and penile injections, often work better than oral agents after prostate cancer treatment. The vacuum device is non-invasive and can work in up to 90% of patients with lots of practice and patience, but it is cumbersome and awkward, and you have to wear a ring during sex. The injections give you a more natural feeling erection without needing a ring to hold the hardness, but you have to inject the penis each time you want to have sex, and some people get side effects. Side effects of injections may include pain, bleeding/bruising, priapism (prolonged erection) and scarring. If medical treatments are not satisfactory and/or not something you want to do, and you have eventually completed any recovery of erectile function after surgery (which can take an average of 2 years and up to 5 years), the penile implant is a surgical option. The implant is completely internally placed in the operating room. It has pros and cons, as with any treatment, and you need to understand them completely. The main complaints I hear are pain (which does get better over time, but it is a sensitive place to have surgery) and shortening (they have to leave some tissue at the end of the penis as a cushion for the device, so it doesn’t erode through the end of the penis). There are many other things to consider, and the placement of the implant cylinders in the penis will permanently change the structures within the penis.

If you and your partner do not need to have a hard erection to enjoy connectedness, pleasure and orgasms together, you can continue to enjoy non-penetrative sex. Either way, I would highly encourage you to enjoy your intimate time together by being fully present with each other and embracing the connection you share along with the pleasure. You should be able to orgasm regardless of erection hardness through oral, manual or vibratory stimulation. It might be helpful for you and your partner to work with a sexuality counselor or therapist to further explore ways to maximize pleasure during sex.

You can access the new edition of my book or download a free copy of my original book at www.drjeffalbaugh.com.

Watch Dr. Albaugh’s presentation on sexual health and intimacy from the Prostate Cancer Pathways for Patients and Caregivers event recorded at NorthShore University HealthSystem in Skokie, IL on November 3, 2018 at https://www.youtube.com/watch?v=Hiq0dDEb1l0&t=4483s.

Read previous issues of Between the Sheets at www.ustoo.org/BTS.

Do you have a question about sexual health or intimacy? If so, we invite you to send it to Us TOO. We’ll select questions to feature in future Between the Sheets columns.

Please email your question to: ustoobTS@ustoo.org

Or mail your letter to:
Us TOO International
Between the Sheets
2720 S. River Road, Suite 112
Des Plaines, IL 0018