Intimacy doesn’t have to be a dirty word after cancer

A workshop tackles post-prostate cancer intimacy and helps couples find their way back to basics

It was the summer of 2012 and 58-year-old Kim Armstrong, a retiree from the Edmonton area, was going for what he thought was a routine annual checkup. But when a digital exam was suspect and his prostate specific antigen (PSA) numbers “spiked dramatically” from his last exam, he knew his life was changing.

A biopsy confirmed the worst. He had prostate cancer and surgery was booked for March 2013 to remove the tiny, walnut-shaped gland, which wraps around the urethra and impacts urine and semen flow.

The six-month waiting period before surgery was traumatic for Kim, now 60, who’d never dealt with a major health issue. But the da Vinci (robotic-assisted) prostatectomy was successful and virtually pain-free.

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As well, the cancer was confined to the prostate. Although he and his wife, Bonnie, 59, were quite overwhelmed (she was just completing her own treatment for breast cancer), they were looking forward to moving on and facing a future beyond their cancer experiences.

Kim is not alone in facing prostate cancer. In the province of Alberta, one in seven men will be diagnosed in his lifetime. When caught early, it is one of the most successfully treated cancers.

But although optimistic about the prognosis, what Kim and Bonnie discovered next (which was not a total surprise; they’d jumped on the Internet early on) was a common, yet upsetting, side effect to prostate cancer treatment. “You can’t get an erection,” explains Kim.

“It is a dramatic life change. You feel less like a man.” There are drugs and devices to use, but their efficacy is variable and they can interfere with that link between arousal and fulfilment. Nerve function, which surgery damages, can come back over a two-year period, but there are no guarantees. “You need to take time to heal, to be patient, to look at sex differently. We’re still trying to figure all this out.”

Fortunately, there is help. A specialized workshop, designed by Dr. John Robinson – psychologist at the Tom Baker Cancer Centre in Calgary – now helps prostate cancer patients and their partners deal with this “new normal.” Called “Intimacy After Prostate Cancer,” the three-hour seminar is held regularly in Calgary and is now being piloted in Edmonton. The seminar explains what prostate cancer is, what the treatments are, what the impacts of treatment are on the man and on a relationship and how to manage troubling repercussions.

“All men will have some degree of sexual dysfunction following treatment for prostate cancer,” says Kevin Wallace, pre-doctoral psychology resident in the psychosocial and spiritual resources department at the Cross Cancer Institute in Edmonton who, along with psychologist Dr. Andrea Beck
and urologist Dr. Derek Bochinski, facilitates the Edmonton groups. “It is the most troubling side effect.”

As well as the physiology of erectile dysfunction (ED), there is also its psychological impact. Loss of self-esteem, depression or anxiety are all common responses to the sudden loss of sexual function and not knowing if the situation is permanent or temporary. “Our goal is to help people adapt so those stressors are not so profound.”

And it is not just about sex. The key goal of the workshop is to maintain, or even increase intimacy, which if left alone to fade away, can be disastrous for a couple. “It is hard,” admits Bonnie. “When diagnosed, you think about – do we want to do this and do we even want to stay together? There is no other way to describe it.

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One of the biggest benefits of the workshop, and a key ingredient in intimacy, is communication. “I learned even more about how Kim was feeling and he learned how I was feeling,” says Bonnie. And the talking continued once the couple got home. It is not always easy to talk about such personal things, even to a partner.

“I call it the John Wayne syndrome,” says Kim. “Guys think they have to be tough. But you need to reach out to your spouse and consider whatever supports that are offered.” The Armstrngs, for example, have also attended counselling and will consider prostate support groups down the road.

To help with ED, they are currently trying medication to increase blood flow to the penis and a vacuum therapy pump. More invasive options include injections or surgical implants.

But there are also recommendations for non-traditional sex, called outercourse (masturbation, mutual masturbation, oral sex, sensual touching), and/or the use of devices like vibrators or dildos. “People are often uncomfortable at first, but are generally very open to learning,” says Wallace. “We want to dispel the myth that different sex is inferior sex.”

A private couple, Kim and Bonnie have agreed to come forward because they feel it is important to get the message out about early screening, the reality of treatment and its aftermath and the tremendous support that exists in Alberta. “We are fully committed to being outed,” Kim says with a laugh. “If it helps someone else, it will be worth it.”

For more information about Edmonton groups (funded by the Alberta Cancer Foundation), call 780-643-4303. For information about Calgary groups (funded by the Prostate Cancer Centre), call 403-943-8958.