

Blood and Marrow Transplant: Sexual Activity

Men: Your sexual desire may be decreased following transplant. In most cases, this is only temporary, and normal desire should return. If your platelet count is less than 50,000, be gentle during intercourse to avoid any bleeding. It may be helpful to use a lubricant during sexual activity. Practice cleanliness and safe sex. You should wear a condom and avoid oral or anal sex during the time that you are on immunosuppressive therapy (Cyclosporine[®], Tacrolimus[®], steroids). Although infertility is likely, birth control should be practiced.

Chemotherapy and radiation therapy can cause your semen to appear brown or orange with the first few ejaculates. You may also experience pain in the testicles after orgasm the first few times that you resume sexual activity. Report any continued brown discharge, pain, inability to obtain or sustain an erection, or any other abnormal findings to your healthcare team.

In four to six months after transplant if you find that your interest in sexual activity has not returned to normal, consult your healthcare team. It is possible that your testosterone level is low due to the radiation or chemotherapy. Your testosterone level can be checked by a blood test and, if it is low, it can be replaced. This may help to return your sexual desire to normal.

Sexual expression is a function of both the mind and the body; both take time to heal following treatment. Open communication with your partner is an important part of resuming sexual activity.

Women: Your sexual desire may be decreased following transplant. In most cases, this is only temporary and normal desire will return. If your platelet count is less than 50,000, be gentle during intercourse to avoid any bleeding. Practice cleanliness and safe sex. Urinate after sex. This rinses out bacteria that may cause infection in the urinary tract. Your partner should wear a condom, and we recommend avoiding oral or anal sex during the time that you are on immunosuppressive drugs (Cyclosporine[®], Tacrolimus[®], steroids).

Although infertility is likely, birth control should be practiced. Three months after transplant, you should visit your gynecologist. Keep track of any menstrual cycles you've had and any menopause symptoms. Menopause symptoms include hot flashes, vaginal dryness, flushing, and occasionally difficulty sleeping. When you visit your gynecologist, you should discuss the pros and cons of hormone replacement therapy. If you are experiencing menopause symptoms and you cannot take hormone replacement therapy an endocrinologist may be able to help relieve some menopausal symptoms using non-hormonal therapy.

Chemotherapy and radiation therapy can cause vaginal dryness and narrowing. To prevent trauma to temporarily dry tissue, use a water-soluble lubricating jelly (Replens[®], KY Jelly[®]). All of these products may be purchased at a drug store. Never use Vaseline[®] because it can cause infections. Report any problems to your physician.

Graft-versus-host disease can also sometimes affect the vagina, causing dryness and loss of elasticity. This can lead to painful intercourse and also make you more vulnerable to infection. If you notice these problems, report them to your physician or nurse.

Sexual expression is a function of both the mind and the body; both take time to heal following treatment. Open communication with your partner is an important part of resuming sexual activity.

If you are in need of immediate assistance, please call 732-235-2465 and select the option that best meets your needs.