SEXUAL DYSFUNCTION (FSD) FOLLOWING FEMALE RADICAL CYSTECTOMY (RC): IFSF-10 ANALYSIS
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Baseline and F/U data from 27 (mean age 54.79 ± 12.7 years) sexually active female patients (frequency: every 3 days to 1 mo.) undergoing RC from 1997-2002 for TCC of the bladder [16/27 (T1-2); 11/27 (T3-4)] were obtained. 13 women were pre-menopausal. 10/27 patients (37%) had an orthotopic (Studor), 10/27 patients (37%) had a cutaneous continent (Indiana), and 7/27 (26%) had an ileal conduit diversions. The Index of Female Sexual Function (IFSF-10) questionnaire was used to assess sexual dysfunction. With a mean F/U of 24.2 months (range 1.5-65.1), the total mean baseline IFSF-10 score decreased from 17.4 ± 7.23 to 10.6 ± 6.62 after RC (p ≤0.05). The most common symptoms reported were: decreased sexual desire, 37% (10/27); decreased lubrication, 41% (11/27); diminished ability or inability to achieve orgasm, 45% (12/27); dyspareunia, 22% (6/27). Only 48% (13/27) were able to have successful vaginal intercourse with 56% (15/27) reporting decreased satisfaction in overall sex life. The type of urinary diversion did not correlate with sexual function. Our early results suggest that sexual dysfunction is a prevalent problem following RC and surgical modifications, i.e., urethral and nerve sparing, may improve FSD.