

Tips and hints about sexuality and intimacy for patients after surgery

No matter your sexual identity, the things I mention below are relevant to all people who have a stoma formed. Whether you are in a relationship or not.

Communication – This is so important and number one for many reasons. No one is a mind reader! Talking about what you are feeling or would like sexually may feel hard to do, and if that's the case write down your thoughts about your sexual self and how you are feeling. If in a relationship you may want to show your partner what you have written, especially if you feel it's difficult to talk to them about it. They could do the same for you. It's not unusual to feel awkward to talk about sexuality and intimacy, even when in long term relationships! Humour can break the ice and make it feel easier to manage. If you are single, write down your thoughts (negative and positive) to clear them from your head. Changes can occur overtime and looking back at what you wrote can be helpful to see progression or what you are getting 'stuck on'. This list can be helpful for you to share with the healthcare professionals in the team looking after you. They may be able to give you some guidance or refer you to someone who can. Self-esteem is often wrapped up with sexuality and sexual confidence. Yes, there have been changes since surgery, fear and shame can be part of that. But please remember there also remains many other attributes of your body not changed, hands, feet, face, hair, back, neck as your whole body is there to be explored by yourself or others.

Time - after surgery allow yourself time for your **body** and **mind** to heal and recover. That does not mean you need to avoid sexual intimacy. This maybe the time you do want to feel the touch of your partners' hand on your body, a hug, a kiss, an arm around you or if single explore yourself. Touch and play to see how you are feeling sexually. The brain is the biggest sex organ and be kind to yourself, the surgery has caused physical and often psychological changes. The skin is a huge erogenous zone and touch is nurturing. Intimacy comes in many ways, outercourse is sexual connection and it's not swinging from the chandeliers (as if it ever was)! Rekindling intimacy with kissing or intimate touch is the start of your new chapter in life. Think of it as recovery and discovery of the new you. It may end up being better than before! Be considerate if in a relationship, think or ask your partner what time of day they feel most aroused or sexual. Factor that in for the benefit of the two of you. Set boundaries

such as switching off from work emails. Too much screen time, (does that sound familiar!) switch off and be intimate! Prioritise the time to be sexual, make time for it higher on the daily agenda. Don't put it at the bottom of the list, a last resort being squeezed in late at night because you think you should be doing it!

Relaxation – it can be difficult to have a sex drive and feel relaxed and aroused when racing along with the speed of life! Be kind to yourself and allow time to 'switch off' and relax in life to 'switch on' and relax for sex, whether single for solo play or partnered play. Our sex drives depend on several things working together which include physiological and psychological responses. This means your brain as well as your body so they can respond alongside each other. Busy lives whether work or play can impact our sex lives, relationship changes, altered hormone levels and ill health can all have an impact. Pain can also prevent this, if needed don't be afraid to use painkillers, they are there for that reason. Be sexually active at the time of day you feel least tired which can help you relax and sexually respond.

Sex – the definition of what is meant by 'sex' will vary hugely from person to person as it's very individual. As mentioned earlier it's not just about intercourse, Intimacy and non-penetrative sex can be erotic and rewarding. If you don't already do so, fantasy thoughts can be really helpful. It's what is within your head and no shame or taboo should exist to allow this to happen. You don't have to tell anyone about them if you don't want to, it's your choice. Let the thoughts come in as fantasy can help with desire and arousal. It can also help you get in tune and know how your body responds since surgery.

Fertility - issues can occur, and then sex becomes more about procreation than pleasure and fun, this can then diminish drive and libido. Keep in mind what each of you enjoy when being intimate, it is often far more than penetration. Touching, kissing, not just in bed but at other times of the day, when leaving the house or coming back into the home. Thinking about what the other person likes makes people feel nurtured and 'together' as a couple. Talk to each other about this, it may help to relieve that stress of built up emotional and physical tension that can often develop when trying to conceive.

Bathe or shower - being mindful of how your body responds. You may feel more comfortable being aroused and sexual in water, give it a try to see. Drying yourself when you get out, are there parts of your body you touch that make you feel good. The skin is a huge erogenous zone and stoma surgery does not affect arms, back, neck, nipples, inside of thighs, all erogenous zones. If with a partner take time to dry each other. A partner is attracted to the whole of you and not your stoma! When attracted to someone your stoma is part of you as other body parts are. For some the formation of the stoma makes sensuality and sexuality so much better because you don't feel so unwell!

Lingerie - can empower you, it's not just about someone else seeing you in it but how YOU feel wearing it. Wear clothing that boosts your mood and that you feel comfortable wearing and why not start with your underwear! There are several brands of lingerie and companies that accommodate stoma bags as well as personalised covers. The feel of the fabric against your skin, the colour, pattern and styles are important for you to feel comfortable about your confidence and sexual self. Some people may choose not to wear specialised underwear but to think about buying regular underwear styles or light undergarments.

Mood – think about what will help your mood. Slouching around in a baggy T-shirt or jogging pants often doesn't trigger feeling sexy. Perfume, aftershave and making an effort with clothing can make a difference. It can feel difficult to do soon after surgery but remember time is a healer and can change things including your mindset. Small steps can make a big difference. Smells are evocative and can bring a feel good factor, very much like music! Whether you are intimate with yourself or partner(s) listening to music and using feel good nurturing smells around you can help you feel more relaxed, and certainly helpful when exploring the new sexual you.

Lubrication - during the sexual response cycle, when we are sexually excited, become aroused, and most of all relaxed our genitalia naturally lubricates. The vagina lengthens and widens and becomes wetter and the glans penis often leaks pre cum (clear sticky liquid). Vaginal dryness can occur when not aroused and as a consequence of hormonal changes. In fact, whatever age you are the 'wetter the better' and lubrication can enhance sexual pleasure by making penetration or touch feel good and different. Lube can be silicone, oil,

water based and moisturising. Each has their own role and you will have your own preference. You should only use silicone or water based lubes with condoms, dental dams, latex diaphragm and latex sex toys as oil can make them tear and stop working as well as damaging sex toys.

Sex toys – there are a huge variety around for all persons to use, either alone or partnered play. It is often assumed they are for penetration and makes a sexual partner redundant, but NO this is absolutely not the case at all. Human touch, a voice, the warmth of another person do not make a partner redundant at all. Toys can be made of silicone, latex, glass (toughened), vibrate, suck, use air pressure or be static. Sex play is adult consensual fun and variation can add to that. We don't eat the same food every day and variety can be the spice of life! When fatigued they can help with arousal. They can help with arousal and orgasm, especially if ill health has had an impact on nerve supply in different areas of the body.

Sexual difficulties -There are many sexual difficulties that can develop for anyone at any time in in their life, this also includes after surgery, especially after stoma formation. Difficulties can occur at various parts of the sexual response cycle which can cause issues with desire, arousal, orgasm and pain. Erectile dysfunction, rapid ejaculation (premature ejaculation), anorgasmia, vaginismus, low desire are some particularly common ones. You may have already been experiencing sexual difficulties prior to your stoma surgery. Our upbringing, including what we did or did not learn about sex can also have a part to play in how comfortable we may feel about our own sexuality and behaviour. Both prescribed and recreational drugs can cause sexual difficulties. Remember tobacco and alcohol are two commonly used that have an impact!

Erectile dysfunction is very common and there are lots of treatments to help with it. Don't be embarrassed asking for help if your healthcare professional has not already asked. There are a variety of tablets, topical cream, urethral pellets, penile injections and a vacuum constriction device.

Rapid ejaculation (premature ejaculation) is also common. This is when ejaculation occurs before you or your partner want it to and you may therefore feel dissatisfied.

Vaginismus – is when the lower third of the vagina goes into spasm and suddenly tightens. It then becomes difficult for anything to go inside such as a tampon, finger or penis.

Vaginal penetration can be restricted with perianal disease, or may feel different, especially if the rectum is removed as this alters the angle. There are silicone rings that can buffer between the vagina and penis, you can put however many rings on so that penetration is comfortable. Condoms can be worn over them as they are stretchy to put on. They can also be used on the base of the penis with oral sex to help reduce penetration depth.

Ask for help – yes, yes and yes. As I mentioned at the beginning, communication is so important. This guide I hope helps you realise why we should be normalising talking about sexuality and intimacy in the care you receive. Write down on a piece of paper or on your phone, the sentence you will say to start the conversation with or questions you may have. It stops you freezing on the spot or forgetting to ask. It could be you saying, ‘I feel now is the right time for me to talk about how having my surgery / stoma has affected me sexually, can you help with this?’. If the clinician you speak to is unable to help, then ask if they can refer you to someone who can. If in a relationship, I encourage you to take your partner with you to any consultation. They may have their own worries or sexual difficulties that they feel may not be important to mention, but sex is a together thing after all! If not in a relationship thinking about how to mention you have a stoma when getting together with someone can be really helpful. Remember it’s your personality, looks, and other attributes they will be connecting with and your stoma is only one aspect of you. Recovery and discovery are words worth remembering and having an open mind to explore the new sexual you.

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