38.1 GENERAL PRINCIPLES

- Sexuality is: “an integral part of personality which is developed over time through a mixture of physical, psychological, social, cultural and spiritual beliefs.”
- Sexual health is as important as physical, psychological and social well-being.
- An assessment of sexuality and sexual health should be part of every assessment. Sexual health issues matter to all patients, not just those with sexually related cancers.
- Over two thirds of respondents in a recent cancer survey said that cancer had affected their sexual relationship with their partner.
- Sexual health assessment may be a challenging area of patient care. Health care professionals need to recognise their own personal and professional limitations.

38.2 GUIDELINES

- A sexual health assessment should be part of the initial patient assessment (where appropriate) and it should be documented in the medical records.
- It is important that the environment for assessment is appropriate e.g. need to ensure privacy and confidentiality.
- Use open-ended questions to encourage exploration of sexual health issues.

Examples of appropriate questions include:
- Do you currently have a partner/close relationship?
- Has your illness/treatment affected how you feel about yourself?
- Has the illness affected your relationship in any way?
- The PLISSIT model may be useful in sexual health assessment. An outline of this model can be seen in Table 38.1.
- Health care professionals should be prepared to seek further help and advice if necessary. Useful contacts are listed in Table 38.2.
### Table 38.1 Outline of P-LI-SS-IT model [Level 3]

#### Level 1: Permission (P)
- Health care professionals need to create a comfortable environment that gives patients permission to discuss concerns and problems related to their sexuality and sexual health.
- Ensure a comfortable and private physical environment.
- Use of open questions, reflection and paraphrasing.
- Use of cue questions to allow the patient the opportunity to raise sexual health concerns.
- Give reassurance that patient’s current sexual practices are appropriate and healthy or that experimentation is appropriate.
- Have a range of information available that is educational and non-personal.
- Be aware of where to get further information and the routes for specialist referral if required.
- Acknowledge the needs of sexual partners. Spouses and partners of people with dementia, or partners of homosexuals or lesbians, may welcome specific supportive measures.
- Acknowledge the sexuality and sexual health needs of patients in relation to their cultural background.
- It should be remembered that patients may not wish to discuss intimate information with a health care professional.

#### Level 2: Limited Information (LI)
- Health care professionals may provide limited information e.g.
  - Pelvic radiotherapy may cause vaginal dryness and potential problems with future fertility.
  - Prostatectomy may result in retrograde ejaculation and cloudy urine.

#### Level 3: Specific Suggestions (SS)
- To be able to give specific support and help with sexual health issues, health care professionals will need further training e.g.
  - Advice for patients with COPD on how to minimise dyspnoea during sexual intercourse.
  - Advice on comfortable positions for sexual intercourse for patients with chronic arthritis or disability.
  - Advice on pharmacological interventions and mechanical aids.\(^\text{10}\)
- If a patient requires this level of help they may need specialist referral.

#### Level 4: Intensive Therapy (IT)
- This involves interpersonal and psychological issues and is used with patients who have specific sexual problems e.g. erectile dysfunction. This level also includes relationship counselling.
- Providing this level of care will require further training or referring the patient to an appropriate specialist.
Table 38.2 Useful addresses / contacts

<table>
<thead>
<tr>
<th>For a full range of reading material</th>
<th><a href="http://www.relate.org.uk">www.relate.org.uk</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>For a full list of recognised therapists contact</td>
<td>British Association for Counselling and Psychotherapy <a href="http://www.BACP.co.uk">www.BACP.co.uk</a></td>
</tr>
<tr>
<td>Sex and Disability Helpline Helpline open 11am-7pm</td>
<td>Dr Tuppy Owens BCM Box Lovely London WC1N 3XX Tel: 0707 4993527 <a href="mailto:sexdis@outsiders.org.uk">sexdis@outsiders.org.uk</a></td>
</tr>
<tr>
<td>Outsiders Club</td>
<td>The Outsiders 4S Levoy House 435 Essex Road London N1 3QP Tel: 02073548291 <a href="http://www.outsiders.org.uk">www.outsiders.org.uk</a></td>
</tr>
<tr>
<td>Counselling service for Merseyside</td>
<td>Dr Helen Wilkins Psychosexual Counsellor for Wirral St Catherine’s Hospital Birkenhead Tel: 0151 652 2901. Will need written referral</td>
</tr>
<tr>
<td>Psychosexual advice for women in Merseyside</td>
<td>Woman’s Health Directorate Central Abacus Ground and First Floor 40-46 Dale Street Liverpool LL2 5SK Tel: 0151 284 2500 NB: Written referral is essential</td>
</tr>
</tbody>
</table>

38.3 STANDARDS
1. All patients should have a sexual health assessment as part of their general assessment. 6 [Grade D]
2. The sexual health assessment should be documented in the medical records. 6 [Grade D]

38.4 REFERENCES


38.5 CONTRIBUTORS

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