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Negative impact of adjuvant endocrine therapy on sexual function in breast cancer survivors

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Objective: The objectives of this study were to evaluate the sexual function of postmenopausal breast cancer survivors compared with women without breast cancer and assess the impact of adjuvant breast cancer treatment on sexual function. **Methodology:** A cross-sectional study was conducted on 178 breast cancer survivors, stages I–III, age 45–70 years, amenorrhea for ³12 months, and sexually active, compared with 178 women with the same inclusion criteria, but without breast cancer. The groups were paired by age and menopause time, ratio 1:1. Sexual function was assessed using the Female Sexual Function Index (FSFI), consisting of six domains (desire, arousal, lubrication, orgasm, satisfaction, and pain), in which a total score ≤ 26.5 indicates sexual dysfunction. For statistical analysis, the Student’s t-test, the chi-square test, and logistic regression (odds ratio (OR)) were used. **Results:** Women with breast cancer had poorer sexual function in the desire domain ($p=0.002$). There were no significant differences between groups in the other FSFI domains and in the total score ($p>0.05$). Breast cancer survivors had a higher occurrence of sexual dysfunction (64.6% with a total score ≤ 26.5) when compared to the control group (51.6%) ($p=0.010$). Risk analysis adjusted for age and time since menopause showed a higher risk of sexual dysfunction in breast cancer survivors than women without cancer (OR 1.98, 95%CI 1.29–2.96, $p=0.007$). Among breast cancer survivors, the use of endocrine therapy was associated with a higher risk of sexual dysfunction (OR 3.46, 95%CI 1.59–7.51, $p=0.002$). **Conclusion:** Postmenopausal breast cancer survivors had a higher risk of sexual dysfunction when compared with women without breast cancer, impacted by the use of endocrine therapy for the treatment of breast cancer.

Keywords: breast cancer; menopause.