

O-02

PREVALENCE OF SEXUAL DISORDERS IN WOMEN WITH GYNECOLOGICAL CANCER, IN THE DEPARTMENT OF QUINDÍO



*Espitia De La Hoz, F.J.*

**Introduction:** Sexuality is one of the indicators of quality of life. It influences thoughts, feelings, actions, social integration and, therefore, physical and mental health. Epidemiological studies indicate that sexual disorders are common in men and women of all ages and societies; but they are more common in older people and those with chronic diseases, including depression and cancer.

**Materials and methods:** Observational, transversal, analytical study between January 2011 and December 2016. We included 207 women, between 24 and 87 years old, with a diagnosis of gynecological cancer. The women were grouped according to the type of cancer (breast, endometrium, cervix, ovary and vulva), and the standardized questionnaire was applied: "Index of Female Sexual Function" (IFSF), which includes the evaluation of desire, lubrication, orgasm, satisfaction and pain. The cut of the total score is 26.55, to differentiate the women with and without sexual dysfunction, the lower the value the greater the sexual dysfunction.

**Objective:** To know the prevalence of sexual disorders related to gynecological cancer in a population of women in Quindío.

**Results:** We found a total of 207 cases. Breast cancer represented 36.23% of the total, the endometrium 18.84%, the cervix 26.08%, the ovary 11.59% and the vulva a 7.24%. 94.2% of the women presented an IFSF with values below 26.55, compatible with some degree of sexual disorder. Desire disorder manifested in 81.3%, excitation in 79.2%, lubrication in 66.3%, difficulty with orgasm 57.9%, satisfaction in 51.9% and pain was present in 48.6% of women.

**Conclusions:** The prevalence of sexual disorders rises among women with gynecologic cancer. Anxiety about sexual disorders is more than twice as prevalent among women with cancer of the vulva or cervix, and those with breast cancer have the lowest rates of sexual difficulties, but that is no longer important, because the numbers continue being higher to those of the non-cancer community.

**Financing:** No conflict

O-03

"USE OF ESTRIOL AT DISTAL THIRD OF THE VAGINAL WALL IMPROVING COITAL PAIN IN WOMEN AFTER MENOPAUSE: A RANDOMIZED, BLINDED, AND CONTROLLED TRIAL"



*Okano, S.H.P.<sup>1</sup>; Damaso, Ê.L.<sup>1</sup>; Franceschini, S.<sup>1</sup>; Ferriani, R.A.<sup>1</sup>; Lara, L.Ad.S.<sup>1</sup>*

<sup>1</sup>*Ginecologia e Obstetrícia, Faculdade de Medicina de Ribeirão Preto - USP, Ribeirão Preto, Brazil*

**Introduction:** Hypoestrogenism leads to vaginal wall changes resulting in diminished vaginal lubrication and, consequently, causing pain during the intercourse. Topical estrogen therapy (THT) shows good results controlling this complaint, but there are some limitations on its use, especially in patients with a history of breast and endometrial cancer. This clinical trial proposes to assess the impact of THT in coital pain and serum concentrations of estrogens in postmenopausal women comparing the application of estriol in the proximal and distal third of vagina.

**Methods:** Clinical trial, blinded and randomized protocol. 132 women in postmenopausal between 40 and 65 years old, will be allocated and randomized into three groups: Women in use of estriol 1 mg / 1g at proximal third of vagina, on alternate nights; Women in use of estriol 1 mg / 1g at distal third of vagina, and the control group, women in use of water-based vaginal lubricant during sexual intercourse. Questionnaires will be applied for assessment of coital pain as well as laboratory dosage of estriol before and after intervention. The McGill

questionnaire and the Visual Analog Pain Scale will be used to assess pain. The patient's state of anxiety and depression will be assessed through the Hospital Anxiety and Depression Scale. To assess sexual function the FSFI will be used. **Results:** This protocol was approved by the Department of Gynecology and Obstetrics of the Medical School of Ribeirão Preto of the University of São Paulo and by the Ethics in Research Council and it is registered at "Registro Brasileiro de Ensaio Clínicos" number RBR-3y8v57 and at "ClinicalTrial.gov" Unique Protocol ID: 62443916.5.0000.5440.

**Financing:** No conflict

O-05

WHAT DO MEN IN THE AMAZON REGION KNOW ABOUT THE TREATMENT OF FEMALE SEXUAL DYSFUNCTIONS?



*Baydoun, M.<sup>1,2</sup>; Patriota Ferreira, C.<sup>3,4</sup>; Marra de Araujo, P.R.<sup>3</sup>*

<sup>1</sup>*Mestrado Acadêmico em Psicologia, Fundação Universidade Federal de Rondônia, Porto Velho, Brazil;* <sup>2</sup>*Especialização em Sexualidade Humana, Faculdade de Medicina da Universidade de São Paulo, São Paulo, Brazil;* <sup>3</sup>*Departamento de Fisioterapia, Universidade Interamericana de Rondonia UNIRON, Porto Velho, Brazil;* <sup>4</sup>*Especialização em fisioterapia aplicada à saúde da mulher, Universidade de Campinas, Campinas, Brazil*

**Introduction and Purpose:** Women are more susceptible to experience sexual dysfunctions due to several biological, psychological and sociocultural factors. Approximately 51% of Brazilian women experience sexual dysfunctions. According to DSM-5, partnership is one of the most important factors to be analyzed before diagnosing sexual dysfunctions in women. A multidisciplinary approach, including contributions from gynecology, psychotherapy and urogynecological physiotherapy, is indispensable to recover the patients' sexual function. However, such approach is neglected by many practitioners and unknown to many heterosexual women and their partners in the Western Amazon Region. This study aimed to assess the knowledge of heterosexual men about the treatment of female sexual dysfunctions and the role of urogynecological physiotherapy in the multidisciplinary approach. **Population Sample:** 71 heterosexual men (28± 8 years) participated in the research, all of whom were in a relationship for at least 1 year.

**Method:** The men filled in two questionnaires and participated in semi-structured interviews, as part of a cross-sectional mixed-methodology research. **Findings:** Approximately 61% of the participants have never heard about any treatment for female sexual dysfunctions. Only 30% of the participants were aware that the treatment was based on a multidisciplinary approach and 73% had no knowledge about which professionals composed the multidisciplinary team. Only 40% of the participants were aware that urogynecological physiotherapists were involved in the multidisciplinary approach to sexual dysfunction, but 81.7% paradoxically believe that these professionals play an important role in the treatment of female sexual dysfunctions.

**Conclusion:** Although most participants could identify various female sexual difficulties, they demonstrated little knowledge about the available treatments for female sexual dysfunctions.

**Financing:** No conflict

O-06

EVALUATION OF QUALITY OF LIFE IN CLIMACTERIC WOMEN WITH GENITAL PROLAPSE AFTER THE USE OF PESSARY



*Espitia De La Hoz, F.J.*

**Introduction:** The prolapse of the pelvic organs is the descent of one or more pelvic organs (uterus, vagina, bladder or intestines) through the wall and