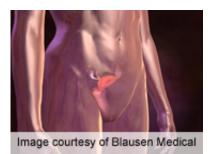


Nerve-sparing surgery for cervical CA may protect sex life

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"The NS approach impairs <u>sexual function</u> less, minimizing the effects of radical surgery," the authors write.

More information: <u>Abstract</u> <u>Full Text (subscription or payment may be required)</u>

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(HealthDay)—Nerve-sparing (NS) laparoscopic radical hysterectomy (LRH) impairs sexual function less than conventional LRH in cervical cancer patients, according to a study published in the December issue of the *Journal of Sexual Medicine*.

Giorgio Bogani, M.D., from the University of Insubria in Varese, Italy, and colleagues evaluated sexually active cervical <u>cancer patients</u> undergoing type C (class III) LRH (2004 to 2013). The authors sought to determine the impact of NS procedures on preoperative versus postoperative sexual function.

The researchers found that, of the 40 patients undergoing <u>radical hysterectomy</u> (20 conventional LRH versus 20 NS-LRH), there were no differences in preoperative Female Sexual Function Index (FSFI) scores (P > 0.05). While postoperative FSFI scores were worse in both groups (P postoperative domain scores showed that desire, arousal, orgasm, and pain scores were similar between groups (P > 0.05), while patients undergoing NS-LRH experienced higher lubrication (3.4 versus 1.7; P = 0.02) and satisfaction (4.6 versus 2.8; P = 0.004) scores, compared to patients undergoing conventional LRH. Survival outcomes were similar between the groups.



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