Sexual Well-Being Among Survivors of Non-Hodgkin Lymphoma

Ellen Burke Beckjord, PhD, MPH, Neeraj K. Arora, PhD, Keith Bellizzi, PhD, MPH, Ann S. Hamilton, PhD, and Julia H. Rowland, PhD

Non-Hodgkin lymphoma (NHL) ranks sixth in cancer incidence among women and seventh among men (American Cancer Society, 2011), with rising incidence rates documented since 1973 (Fisher & Fisher, 2004). Adult NHLs are divided into two main groups: indolent (low-grade lymphomas, which grow slowly) and aggressive (intermediate- and high-grade lymphomas, which grow quickly). Without intervention, aggressive NHL can be fatal within months (Johnston, 1999; Sehn & Connors, 2005). Individuals diagnosed with aggressive NHL undergo extensive treatment for the disease, including multi-agent chemotherapy regimens (with or without radiation) and, potentially, bone marrow or stem cell transplantation (Sehn & Connors, 2005). Although advances in NHL treatment have led to a rise in survival rates (Jemal et al., 2004; Mahadevan & Fisher, 2011; Sehn & Connors, 2005; Shipp et al., 1993) by months and even years postdiagnosis, survivors are at risk for significant adverse effects of their treatment, such as secondary cancers and cardiovascular complications (Andre et al., 2004; Brennan et al., 2005). In this way, aggressive treatment among NHL survivors may result in long-term complications that require both medical and psychosocial interventions. One such area that may be affected is survivors’ sexual well-being (Hewitt, Greenfield, & Stovall, 2006; Institute of Medicine, 2008; Monga, 2002; Rowland & Bellizzi, 2008).

Sexual well-being includes factors associated with sexual experience (Taylor & Davis, 2007), such as participation in sexual activity, satisfaction with sexual experiences, and sexual function. Sexual well-being has been identified as a common concern among survivors (Baker, Denniston, Smith, & West, 2005) and as an area in need of continued attention in research (Hewitt et al., 2006). Previous studies have addressed sexual outcomes for cancer survivors, mainly among individuals diagnosed with breast, gynecologic, or prostate cancers (Andersen, Anderson, & deProsse, 1989; Beckjord & Campas, 2007; Can et al., 2008; Carmack Taylor, Basen-Engquist, Shinn, & Bodurka, 2004; Ganz, Desmond, Belin, Meyerowitz, & Rowland, 1999; Henson, 2002; Incrocci, 2006; Kao, Jani,