

INTRODUCTION

- Prostate cancer is one of the most common cancers in men, with an estimated 1 in 8 men diagnosed during their lifetime.¹
- Pre-operative counseling for prostatectomies in gay and bisexual men (GBM) presents unique challenges and needs that are often unmet by current healthcare practices.
- GBM face significant barriers in receiving appropriate sexual and psychological support following prostate cancer treatment.
- Healthcare professionals (HCPs) often assume heterosexuality, leading to inadequate communication about sexual health tailored to GBM.²
- Studies found that GBM experience worse psychosocial outcomes compared to their heterosexual counterparts, partly due to the dismissal of their concerns by clinicians.³
- They also reported that erectile dysfunction and other sexual changes post-prostatectomy have profound implications for GBM, affecting their sexual identity and community belonging.⁴

METHODS

- Patients (n=6) were recruited from a single academic center, with inclusion criteria being GBM who received pre-operative prostatectomy counseling from 2021–2025.
- Patients were surveyed using a standardized interview-style format measuring prostatectomy's impact on their sexual health, including open-ended questions to identify gaps in care.
- Interviews were transcribed and assessed for themes using NVivo software into 28 different process categories
- Word commonalities produced deliverables.

Pt #	1	2	3	4	5	6
Age	60	60	78	73	70	67
Tx Year	2023	2022	2024	2022	2025	2025
Radiation	No	Yes	No	Yes	No	No
Ethnicity	White	White	White	White	White	White

Table 1: Patient demographics

RESULTS

- The transcribed interviews were parsed into several sections to determine prevalence of certain provider counseling behavior and perceived patient support.
- Analysis revealed several recurring themes across interviews, including unaddressed topic surrounding gay sexual health counseling, variable patient comprehension of post-operative changes, and decreased sexual health self-ratings (below):

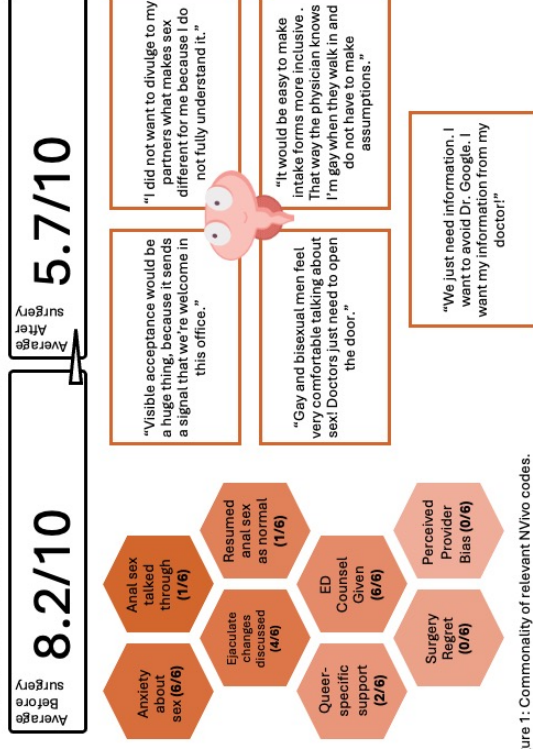
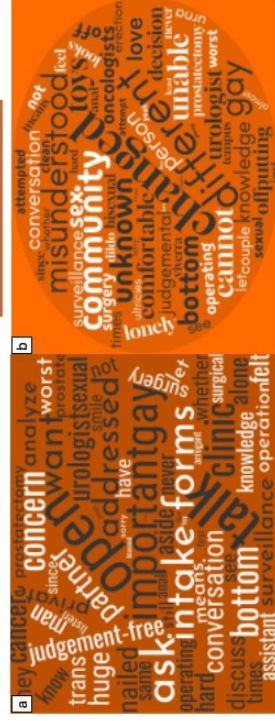


Figure 1: Commonality of relevant NVivo codes.



Figures 2a and 2b: NVivo-generated word clouds regarding recommendations for providers (a) and impact on sex life (b).

DISCUSSION

- The resulting commonalities and inconsistencies revealed several areas for improvement in pre-operative counseling to set post-operative sexual health expectations.
- These fell into a series of themes:

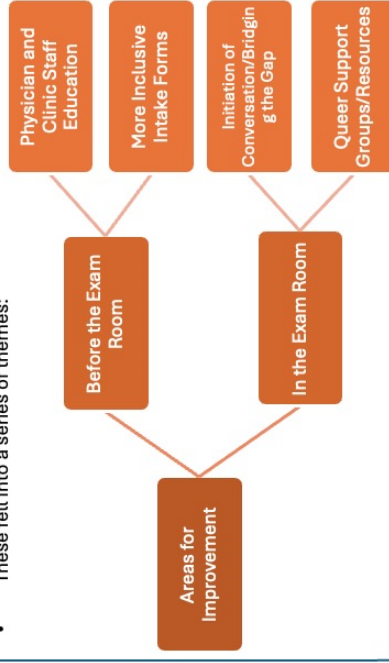


Figure 3: Mind Map of Themes for Improvement of Pre-operative counseling.

- Ultimately, advances will be made upon improved education on what makes queer sexual health unique amongst surgical candidates as well as active efforts to encourage a sense of belonging for queer patients to feel comfortable sharing their concerns with their providers.
- Patients do not regret their surgeries, but efforts can be taken to improve their pre-operative and post-operative experiences.

REFERENCES

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4. Ussher JM, Perz J, Rose D, et al. Threat of Sexual Disqualification: The Consequences of Erectile Dysfunction and Other Sexual Changes for Gay and Bisexual Men With Prostate Cancer. *Archives of Sexual Behavior*. 2016;46(7):2043-2057.