

Appendix1

Clinician to Complete: Vaginal Assessment Scale (VAS) <i>(Please check only one response/item)</i>		Vulvar Assessment Scale (VuAS) <i>(Please check only one response/item)</i>	
Dryness (0) <input type="checkbox"/> None (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe		Dryness (0) <input type="checkbox"/> None (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe	
Soreness (0) <input type="checkbox"/> None (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe		Soreness (0) <input type="checkbox"/> None (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe	
Irritation (0) <input type="checkbox"/> None (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe		Irritation (0) <input type="checkbox"/> None (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe	
Dyspareunia (Pain w/intercourse) (0) <input type="checkbox"/> None (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe (99) <input type="checkbox"/> No Attempt		Painful to Touch (0) <input type="checkbox"/> None (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe (99) <input type="checkbox"/> No Attempt	
To be computed by clinical team: Vaginal Total Score: _____ Vaginal Composite (Average) Score: _____		To be computed by clinical team: Vulvar Total Score: _____ Vulvar Composite (Average) Score: _____	
Health Promotion Strategies <i>(Please check appropriate response)</i>			
Vaginal Lubricant with Sexual Activity and/or Vaginal Health Promotion Strategy (dilator) (1) <input type="checkbox"/> Not Using (2) <input type="checkbox"/> Rarely (3) <input type="checkbox"/> Sometimes (4) <input type="checkbox"/> Always (5) <input type="checkbox"/> Not Active (6) <input type="checkbox"/> Not Applicable Type of Lubricant: _____		Recommendations (1) <input type="checkbox"/> Continue (2) <input type="checkbox"/> Recommended Today (3) <input type="checkbox"/> Increase Use (4) <input type="checkbox"/> Restart	
Pelvic Floor Exercises (1) <input type="checkbox"/> Never (2) <input type="checkbox"/> Rarely (3) <input type="checkbox"/> A few times per week (4) <input type="checkbox"/> Daily (5) <input type="checkbox"/> Not Applicable		Recommendations (1) <input type="checkbox"/> Continue (2) <input type="checkbox"/> Recommended Today (3) <input type="checkbox"/> Increase Use (4) <input type="checkbox"/> Restart	
Internal Vaginal Moisturizers Type (used internally): _____ (1) <input type="checkbox"/> Not Using (2) <input type="checkbox"/> 1x/wk (3) <input type="checkbox"/> 2-3x/wk (4) <input type="checkbox"/> 4-5x/wk (5) <input type="checkbox"/> 5+/wk (6) <input type="checkbox"/> Not Applicable External Moisturizer <input type="checkbox"/> Yes <input type="checkbox"/> No Type (used externally): _____ Frequency: _____		Recommendations (1) <input type="checkbox"/> Continue (2) <input type="checkbox"/> Recommended Today (3) <input type="checkbox"/> Increase Use (4) <input type="checkbox"/> Restart	
Dilator Therapy (1) <input type="checkbox"/> Never (2) <input type="checkbox"/> 1x/wk (3) <input type="checkbox"/> 2-3x/wk (4) <input type="checkbox"/> 4-5x/wk (5) <input type="checkbox"/> 5+/wk (6) <input type="checkbox"/> Not Applicable (7) <input type="checkbox"/> Other Frequency: _____ If using, size of dilator (1) <input type="checkbox"/> 1 (2) <input type="checkbox"/> 2 (3) <input type="checkbox"/> 3 (4) <input type="checkbox"/> 4 (5) <input type="checkbox"/> 5 If using, pain with dilator (0) <input type="checkbox"/> None (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe		Recommendations (1) <input type="checkbox"/> Continue (2) <input type="checkbox"/> Recommended Today (3) <input type="checkbox"/> Increase Use (4) <input type="checkbox"/> Restart	
Pain with gynecologic exam (0) <input type="checkbox"/> None (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe (4) <input type="checkbox"/> No Exam Between Appointments			
Clinician Signature: _____ Title: _____ Date: _____ Time: _____			

Clinician to Complete:				
Gynecologic Evaluation (Please check appropriate response)				<input type="checkbox"/> No Gynecologic Evaluation
Pelvic Pain with Exam	<input type="checkbox"/> Yes (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe	(0) <input type="checkbox"/> No	(99) <input type="checkbox"/> Not Assessed	
Vaginal Agglutination	<input type="checkbox"/> Yes (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe	(0) <input type="checkbox"/> No	(99) <input type="checkbox"/> Not Assessed	
Scarring/Adhesions	<input type="checkbox"/> Yes (1) <input type="checkbox"/> Mild (2) <input type="checkbox"/> Moderate (3) <input type="checkbox"/> Severe	(0) <input type="checkbox"/> No	(99) <input type="checkbox"/> Not Assessed	
Vaginal Health Assessment (Please check appropriate response)				
(0) / (99)	(1)	(2)	(3)	
pH	<input type="checkbox"/> <5	<input type="checkbox"/> 5-6.5	<input type="checkbox"/> >6.5	<input type="checkbox"/> Not Assessed
Moisture	<input type="checkbox"/> Normal moisture (with white flocculent fluid)	<input type="checkbox"/> Minimal moisture (with superficial layer of scanty thin white mucus)	<input type="checkbox"/> No moisture	<input type="checkbox"/> Not Assessed
Rugosity	<input type="checkbox"/> Good (thick rugated folds)	<input type="checkbox"/> Minimal (poorly rugated)	<input type="checkbox"/> None (loss of rugation, w/smooth vaginal walls)	<input type="checkbox"/> Not Assessed
Elasticity	<input type="checkbox"/> Excellent (fully distensible, with no or minimal tightness, for full speculum exam)	<input type="checkbox"/> Fair (moderate loss of distensibility, requiring modification in speculum exam [width and/or length])	<input type="checkbox"/> Poor (severe loss of distensibility, prohibiting speculum exam)	<input type="checkbox"/> Not Assessed
Length of Vagina	<input type="checkbox"/> >6cm	<input type="checkbox"/> 4-6cm	<input type="checkbox"/> <4cm	<input type="checkbox"/> Not Assessed
Thickness	<input type="checkbox"/> Normal (no signs of atrophy)	<input type="checkbox"/> Thin walls	<input type="checkbox"/> Papery thin, transparent, visible blood vessels	<input type="checkbox"/> Not Assessed
Epithelial Integrity	<input type="checkbox"/> Normal (no petechiae, non-friable)	<input type="checkbox"/> Petechiae after scraping/swabbing	<input type="checkbox"/> Petechiae present prior to contact, or bleeds w/contact	<input type="checkbox"/> Not Assessed
Vascularity	<input type="checkbox"/> Good (pink)	<input type="checkbox"/> Fair (pale)	<input type="checkbox"/> Minimal (no color)	<input type="checkbox"/> Not Assessed
Vulvar Atrophy	<input type="checkbox"/> Mild (dry, pale, thinning, and/or diminished fullness of tissue)	<input type="checkbox"/> Moderate (dry, pale, shiny, labial flattening and/or hair loss)	<input type="checkbox"/> Severe (loss of labial architecture, decrease size of clitoris, prominent or telescoping urethra)	<input type="checkbox"/> None <input type="checkbox"/> Not Assessed
Vulvar Irritation	<input type="checkbox"/> Mild (mild erythema, mild inflammation, non-tender to palpation)	<input type="checkbox"/> Moderate (erythema, inflammation, mild tenderness, skin intact)	<input type="checkbox"/> Severe (severe erythema, inflammation, tender to even light touch and/or fissures)	<input type="checkbox"/> None <input type="checkbox"/> Not Assessed
Vaginal Irritation	<input type="checkbox"/> Mild	<input type="checkbox"/> Moderate	<input type="checkbox"/> Severe	<input type="checkbox"/> None <input type="checkbox"/> Not Assessed
Vestibular Irritation			Vaginal Stenosis	
(1) <input type="checkbox"/> Yes (0) <input type="checkbox"/> Not Present			(1) <input type="checkbox"/> Yes (0) <input type="checkbox"/> Not Present	
Incontinence			Pad Use	
(1) <input type="checkbox"/> Fecal (0) <input type="checkbox"/> No Fecal (1) <input type="checkbox"/> Urinary (0) <input type="checkbox"/> No Urinary			(1) <input type="checkbox"/> Yes (0) <input type="checkbox"/> No	



PATIENT & CAREGIVER EDUCATION

Vulvovaginal Health

This information will help you improve your vulvar and vaginal health after your cancer treatment.

As women age, the vulva (outside of the vagina) and vagina become dryer and less elastic. This can happen sooner if a woman has had cancer treatments or cancer risk-reducing surgery. Some women can take the hormone estrogen to prevent these changes, but for many women who have had cancer, this may not be a safe choice.

Below are some suggestions to help you manage these symptoms. Review them with your doctor or nurse. Highlight the ones they think are best for you. If they don't work, ask your doctor or nurse for other suggestions.

Vaginal Moisturizers

Vaginal moisturizers are nonhormonal, over-the-counter products. They help to increase moisture in your vagina. They can be used several times a week for overall vaginal health and comfort, regardless of sexual activity. Some examples are:

- Vitamin E liquid capsules
 - Using a pin, puncture each end of a vitamin E capsule. Insert the capsule into your vagina. Or, you can empty the capsule onto your finger and wipe the vitamin E inside your vagina.
- Replens[®] Long-Lasting Vaginal Moisturizer; Hyalo GYN[®]
 - These are vaginal moisturizers that are inserted into your vagina with a disposable applicator. You may want to put lubricant on the tip of the applicator to make insertion more comfortable.
- Carlson[®] KEY-E Suppositories; K-Y[®] Brand LIQUIBEADS[™]
 - These are suppositories that are inserted into your vagina with a

disposable applicator. You may want to put lubricant on the tip of the applicator to make insertion more comfortable.

These products are available without a prescription in most drug stores or on the Internet. You can use any of these moisturizers 2 to 3 times a week. However, many women will need to moisturize more often (3 to 5 times per week) after cancer treatment or sudden menopause. Apply the moisturizer at bedtime for the best absorption.

You may need to wear a panty liner while you are using these moisturizers. If you wear a panty liner, you may want to apply Aquaphor[®] or a skin protectant cream such as Balmex[®] or Desitin, on your vulva, to help seal in moisture.

If you also use vaginal estrogen (see below), do not use it on the same nights you use these moisturizers.

Vulvar Moisturizers

Many women experience dryness or irritation of the vulva. Using a moisturizer can increase comfort. Natural oils such as vitamin E or coconut oil can be helpful. You can also use Replens Long-Lasting Vaginal Moisturizer, HyaloGyn, or both on your vulva. If you are using both, make sure to use them on different nights.

Vaginal Lubricants

Vaginal lubricants usually come in a liquid or gel form. They are used to supplement a woman's own lubrication and minimize dryness and pain during sexual activity. Use these lubricants to make sexual intercourse more comfortable and pleasurable. Examples of lubricants include:

- Astroglide[®]
- K-Y Jelly
- Good Clean Love (organic)
- Pjur[®] Original Bodyglide (a silicone-based lubricant)
- Almond oil
- Coconut oil

Apply the lubricant to the opening of your vagina and to whatever is being placed in or near your vagina, such as an applicator, dilator, finger, object, or your partner's penis.

Avoid colored, flavored, and warming lubricants, as well as those containing spermicides. Never use petroleum jelly (Vaseline[®]). It does not wash away easily and can increase your risk for vaginal infection or irritate your vagina.

Vaginal Estrogen

You can use vaginal estrogen if your doctor or surgeon says it is safe for you to do so. Be sure to discuss the products described below with your doctor or surgeon before using them.

- Vagifem[®]
 - This medication comes in an applicator. Insert it into your vagina at bedtime for 14 days. After 14 days, insert it into your vagina twice a week at bedtime.
- Estrin[®]
 - This medication comes as a vaginal ring. Insert the ring into your vagina and push it as far back as possible. Remove it after 90 days.

Enhancing Sexuality

There are many products available for enhancing sexuality, such as lubricants and sex toys. These can be purchased over the phone, on the Internet, or from specialty stores. We have listed 2 stores below that are located in New York City, as well as a few websites. We are not endorsing these stores or websites. Check the Internet for more specialty stores.

Babeland (Soho location)

43 Mercer Street (near Broome Street)

New York, NY 10013

212-966-2120

www.babeland.com

Open Monday through Saturday, 11:00 AM to 10:00 PM; Sunday, 11:00 AM to 7:00 PM

Babeland (Lower East Side location)

94 Rivington Street (between Ludlow and Orchard Streets)

New York, New York 10002

212-375-1701

www.babeland.com

Open Sunday through Wednesday, 12:00 PM to 10:00 PM;

Thursday through Saturday, 12:00 PM to 11:00 PM

Babeland (Brooklyn location)

462 Bergen St (between 5th and 6th Avenues)

Brooklyn, New York 11217

718-638-3820

www.babeland.com

Open Monday through Saturday, noon to 10:00 PM; Sunday, noon to 7:00 PM

Eve's Garden

119 West 57th Street (between 6th and 7th Avenues), Suite 1201

New York, NY 10019

212-757-8651

www.evesgarden.com

Open Monday through Saturday, 11:00 AM to 7:00 PM

www.hyalogyn.com

www.boudoir.com

www.pureromance.com

www.sinclairinstitute.com

www.bettersex.com

More Support and Information about Sexual Health and Intimacy

If you need more support and information about these issues, please talk with your doctor or nurse about Memorial Sloan Kettering's (MSK) Female Sexual Medicine & Women's Health Program. For more information or to make an appointment, please call 646-888-5076.

The Female Sexual Medicine & Women's Health Program provides services at the following locations:

- 300 East 66th Street: Evelyn H. Lauder Breast Center
- 160 East 53rd Street: Rockefeller Outpatient Pavilion

If you have any questions or concerns, talk with a member of your healthcare team. You can reach them Monday through Friday from 9:00 AM to 5:00 PM at _____. After 5:00 PM, during the weekend, and on holidays, please call _____. If there's no number listed, or you're not sure, call 212-639-2000.

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PATIENT & CAREGIVER EDUCATION

Pelvic Floor Muscle (Kegel) Exercises for Women to Improve Sexual Health

This information will help you learn how to perform pelvic floor muscle (Kegel) exercises to improve your sexual health and pleasure.

Many women do Kegel exercises to strengthen their pelvic floor muscles. This can help manage or prevent physical problems such as the leakage of urine. Kegel exercises can also help improve women's sexual health and pleasure by:

- Relaxing the vaginal muscles, which allows the vagina to be more open. This is helpful for women who are experiencing pain during sexual intercourse and/or with pelvic exams
- Increasing sexual arousal
- Improving a women's ability to reach orgasm
- Improving blood circulation to the vagina
- Increasing vaginal tone and lubrication

How do I identify my pelvic floor muscles?

Your pelvic floor muscles form the bottom of your pelvis and support your pelvic organs. These are the muscles that you would use when urinating to stop the stream of urine or that you would use to hold back or prevent you from passing gas.

Here are some ways you can identify them:

1. Imagine you are urinating and contract the muscles you would need to stop the stream of urine. Do not actually practice stopping the urine stream, especially if your bladder is full. This can actually weaken the muscles and lead to incomplete emptying of the bladder, which increases your risk for a urinary tract infection (UTI).

2. Tighten the muscles that are used to hold back or prevent you from passing gas, but don't tighten your buttock or inner thigh muscles. If you're doing it correctly, there should be no visible movement of your body lifting. If you are tightening the muscles of your buttocks or abdomen, or notice that your body lifts slightly, you are most likely using the wrong muscles.
3. Try inserting a finger or vaginal dilator inside your vagina and tighten or contract your pelvic floor muscles. When performing pelvic floor muscles exercises, you should feel your vagina tighten and your pelvic floor move upward.

If you are having trouble identifying these muscles, contact your doctor or nurse.

How do I know if I am using the wrong muscles?

To find out if you are also contracting your stomach muscles, place your hand on your stomach. Squeeze your pelvic floor muscles. If you feel your abdomen move, you are using the wrong muscles. Avoid using your stomach, leg, or buttock muscles. Exercising these muscles will not help you regain pelvic floor muscle tone.

How do I perform Kegel exercises?

For each Kegel exercise session, tighten your pelvic floor muscles (as described above) and hold for 3 to 6 seconds; then, relax your muscles completely for 3 to 6 seconds. Repeat this exercise 10 to 20 times per session.

If your pelvic floor muscles do not start to tire using a 3 to 6 seconds contraction, or you have to repeat the exercise 20 to 25 times to feel pelvic floor fatigue, then start over and hold them for 6 to 10 seconds; then, relax your muscles completely for 6 to 10 seconds. It is important that you always spend the same amount of time relaxing your muscles as you did to contract them.

How often should I perform Kegel exercises?

Once you have learned to correctly to contract your pelvic floor muscles using one of the suggestions above, exercise these muscles a few times throughout the day. Do several Kegel exercise sessions a day.

For sexual health rehabilitation, the goal is to tire out (or fatigue) the pelvic

floor muscles so that they relax and are more flexible. This is important when doing dilator therapy or if you're having pain with vaginal intercourse. If your vaginal muscles are tired, they will open or stretch more easily.

Research has found that toning the pelvic floor muscles can benefit sexual health and arousal. If you challenge yourself while practicing Kegel exercises, you can increase pelvic floor muscle strength. You can also draw blood flow to the pelvic floor, which is important for arousal.

Where should I do Kegel exercises?

Most people prefer doing Kegel exercises when lying down on a bed or sitting in a chair, but you should be able to do them in any position and in any place.

Follow these simple steps:

1. Sit or lie down in a comfortable position so that your body is relaxed.
2. Breathe in deeply through your nose, allowing your abdomen to rise as your belly fills with air. Your pelvic floor muscles should remain relaxed as you breathe in.
3. Breathe out slowly and smoothly through your mouth as you tighten your pelvic floor muscles. Maintain the contraction while you exhale.
4. Breathe in again and release your contraction, which relaxes your muscles.

It is very important that you relax fully between each contraction and that you do not hold your breath.

Can Kegel exercises harm me?

These exercises can't harm you in any way. Most people find them relaxing and easy. This exercise should not be painful. If you feel pain while performing this exercise or afterward, you may not be performing the exercise correctly, or this exercise may not be appropriate for you. Contact your doctor or nurse to discuss this.

What if I need more support or information about sexual health and intimacy?

If you need more support and information about these issues, talk to your doctor or nurse about MSK's Female Sexual Medicine & Women's Health Program. For more information or to make an appointment, please call 646-

888-5076.

The Female Sexual Medicine & Women's Health Program provides services at the following locations:

- Rockefeller Outpatient Pavilion, 160 East 53rd Street, New York, NY
- Evelyn H. Lauder Breast Center and MSKCC Imaging Center, 300 East 66th Street, New York, NY

What if I have severe pain or continued incontinence?

MSK has physical therapists who specialize in women's health and can address the causes of pain or problems in your pelvic floor muscle area. If you are experiencing these problems, ask your doctor or nurse for a referral. Our physical therapists will see you at MSK's Sillerman Center for Rehabilitation, 515 Madison Avenue, New York, NY. You can call the Sillerman Center at 646-888-1900.

If you have any questions or concerns, talk with a member of your healthcare team. You can reach them Monday through Friday from 9:00 AM to 5:00 PM at _____. After 5:00 PM, during the weekend, and on holidays, please call _____. If there's no number listed, or you're not sure, call 212-639-2000.

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