

<https://doi.org/10.29289/25945394V36S10932>

## 932 – Sexual dysfunction and quality of life in breast cancer survivors: a cross-sectional study

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**Introduction:** Advances in breast cancer management have increased survivorship, shifting clinical priorities toward late effects of treatment. Sexual dysfunction, particularly symptoms consistent with the genitourinary syndrome of menopause (GSM), is a major and frequently overlooked determinant of impaired quality of life in this population. This study investigated the prevalence of sexual dysfunction and associated factors among breast cancer survivors in remission.

**Methods:** A cross-sectional study was conducted from March to December 2025 at the Januário Cicco Maternity School (MEJC/UFRN), Natal, Brazil. The protocol was approved by the institutional research ethics committee, and all participants provided written informed consent. Eligible participants were breast cancer survivors in remission, aged 40 to 65 years, sexually active, and reporting GSM symptoms. Exclusion criteria included metastatic disease, degenerative disorders, and cognitive impairment that could compromise questionnaire comprehension. Sexual function was assessed using the Female Sexual Function Index (FSFI), and quality of life was evaluated using the twelve-item Short Form Health Survey (SF-12). Data were collected in a single 45-minute session and recorded in Research Electronic Data Capture (REDCap) for subsequent analysis. Results were summarized using descriptive statistics, and bivariate associations were examined using Pearson's chi-square test or Fisher's exact test.

**Results:** A total of eighty-six women were included, with a mean age of 50.1 years, and mean age at breast cancer diagnosis of 44.3 years. Most participants had received chemotherapy (81.6%) and long-term endocrine therapy (89.7%), and mean age at menopause was 43.8 years. Sexual dysfunction was highly prevalent, affecting 89.2% of participants. Quality of life was frequently reduced, with physical and mental component scores <50 in 74.7% and 81.3% of participants, respectively.

**Conclusion:** Breast cancer survivors with GSM demonstrated a substantial burden of sexual morbidity and impaired physical and mental quality of life, supporting routine screening and proactive management of genitourinary and sexual health concerns during survivorship care.

**Ethics:** Research Ethics Committee Approval (CAAE 81973618.2.0000.5292).

**Keywords:** breast neoplasms; survivors; menopause; quality of life; psychosexual disorders.