



Everything Michigan

## Mr. Fix-It needs new tools to help spouse dealing with cancer

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By **Sue Schroder** | **The Grand Rapids Press**

*Editor's note: Sue Schroder, former features editor for The Grand Rapids Press, was diagnosed with non-Hodgkin's lymphoma in late 2009.*

Jeffrey F. Porter sat reading an excerpt from a conversation I had with a breast-cancer survivor of more than 10 years:

"Men particularly have a hard time (dealing with cancer in the important woman in their life).

"They struggle with that, and they don't want to get close to it because it cuts into two areas that are weird for them: They want to fix it and they can't, and problems that they can't fix they do run away from.

"The other thing is they don't want to tie into their emotions. Cancer is pretty terrifying and pulls emotions to the surface. ... Men weren't created to be nurturers. That leaves the women to find support elsewhere."

True or false? I asked Porter.

Generally true, answered the director of Behavioral Oncology at Cancer & Hematology Centers of Western Michigan.

### RESOURCES

As part of a medical practice, Porter works with the hidden side of cancer: the emotional and psychological side effects that drive us just as surely as the physical realities. He talked about his experience at Gilda's Club Grand Rapids leading a group for husbands on supporting their wives through cancer.

- Resources for information on intimacy, sex and cancer: **cancer.org**

- **"Let's Get Personal: Intimacy And Sexuality After Breast Cancer,"** Text of national teleference in 2007

- "The Human Side of Cancer — Living with Hope, Coping with Uncertainty," by Jimmie C. Holland, M.D., and Sheldon Lewis.

"We're wired to fix things, so my role was helping them understand that trying to fix this can make the situation worse," Porter said.

"For example, if a wife shares something difficult — 'I'm scared about what I'll look like after surgery' — the husband chimes in, 'You'll have reconstruction, and you'll be fine.'

"He offers what he thinks is a practical solution to 'solve her problem,' which translates to her as, "You shouldn't feel this way.'

"Women have a recognized core need to feel understood.

"What is helpful is either saying nothing, simply listening or indicating you heard the anxiety and fear.

"The logical part of the man's brain says, 'If there's a problem and I fix it, she should feel better,' but she doesn't need you to fix it. She needs you to be there with her and comfort her."

The men in the Gilda's group had a lot of questions about sex and intimacy.

Porter's message to them: "Things have changed. Sometimes it's temporary, sometimes it's permanent, but things have changed."

### **Elephant in the room**

Couples tend to avoid talking about sex and intimacy with each other and with their doctors, he said. The elephant moves into the room and, unchallenged, becomes the star of an invisible three-ring circus.

"For most people, interest in sex changes because they are under stress and there are physical changes: She might not feel attractive after surgery; drugs can depress interest."

"My sex drive is in the freezer, and I don't even feel attractive enough to take it out to defrost," one woman told Shera Dubitsky, clinical supervisor at Sharsheret, a national organization supporting Jewish women facing breast cancer.

"In this brief statement, this caller captured the physical and emotional issues facing many women who have faced or are facing breast cancer," Dubitsky said during a 2007 national teleconference on "Let's Get Personal: Intimacy And Sexuality After Breast Cancer."

A diagnosis of cancer means "redefining intimacy," Porter said. "Maybe before, intimacy meant intercourse; now it may mean holding, caressing, something with which the spouse is comfortable."

"There are different levels of physical contact, but you can have intimate contact."

Anxiety, depression, fatigue and treatment side effects can make sexual intimacy difficult for both men and women who have been treated for cancer.

If you need more advice than your doctor can offer, ask for a referral to a sexual or couples counselor.

"Remember, sex is not the only form of intimacy. Patience and a sense of humor are an absolute must," social worker Sage Bolte said during the "Let's Get Personal" teleconference.

"The one thing I really want you to hear is that skin is the largest sex organ and the brain is the most important sex organ," she said. "The possibilities are limitless. ... The biggest keys could be patience, communication and asking for help if you need it."

*Share your experiences. E-mail Sue Schroder at [livenow.ss@gmail.com](mailto:livenow.ss@gmail.com).*

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