



FEMMAX[®] Dilators / Trainers - THE SIMPLE EFFECTIVE SOLUTION
AN NHS INNOVATION

Enhancing safety and efficiency



MDTi, The Kace Building, Victoria Passage,
Wolverhampton, West Midlands WV1 4LG

Tel: +44 (0) 1902 778 380 Fax: +44 (0) 1902 421 360

Web: www.mdti.co.uk Email: info@mdti.co.uk

6a. SEXUAL INTERCOURSE

Sexual intercourse may continue throughout your radiotherapy treatment. If not, you can resume sexual intercourse when you feel ready, usually at about 2 weeks after the end of the radiotherapy treatment.

It is important to return to your normal level of sexual activity as soon as possible. However, some patients may not feel ready immediately and may feel afraid or even embarrassed, which is not unusual.

There are many different reasons why you may not feel ready for intercourse. You may have lost interest in sex completely, particularly if you feel anxious or tense regarding your health.

Some patients feel nervous about having sex either during or after treatment. It is important to understand that it is perfectly safe to do so. Cancer cannot be passed to your partner and sex will not make the cancer worse. You may also be concerned about the radiotherapy affecting your partner but radiation does not stay in the body so you will not harm them.

Take your time. Gentle and regular sex will allow you to relax and the vagina to stretch slowly. You may feel more comfortable to start with positions that allow you to be in control (i.e. sitting on top, astride your partner will not only let you set the pace, but will also allow for deep penetration that will assist with dilation). Discuss this with your partner. Show him this leaflet as he may not be aware of your concerns or needs.

If you feel any pain or discomfort and find you have to stop, do not be put off trying again in a few days, as you may simply need a little more time to heal inside. Sometimes if intercourse is difficult, or painful, you may feel tense or anxious. This may also make intercourse more difficult. It is important to try to relax.

If you feel drier than usual, you may need to use a lubricant. There are many vaginal lubricants available to buy from your local chemist.

You may notice slight bleeding on recommencing intercourse. This is due to the tissue stretching and should settle.

Continue using your dilator whether you are sexually active or not as sexual intercourse alone may not be sufficient to prevent adhesions forming.

If you are not sexually active at this time it is still advisable to use a dilator as this will assist with medical examination.

If you feel it would be helpful to talk about any of your concerns contact your doctor or nurse specialist.

6b. VAGINAL DISCHARGE

It is not unusual to have a vaginal discharge after treatment or for it to continue for some time after. However, should the discharge alter in any way, (i.e. become heavier, contains fresh blood or smells unpleasant) contact your nursing team or doctor.

6c. MENOPAUSAL SYMPTOMS

Some women may experience menopausal symptoms, which may be because you have had your ovaries removed during surgery or that you have received radiotherapy treatment.

Radiotherapy treatment may make you infertile. However, you may have a further two or three periods following treatment.

Therefore, there is still a risk of pregnancy and you should continue with your normal method of contraception until advised otherwise. You may be concerned about the effect of the menopause brought on by the treatment. Some patients experience hot flushes, feeling low in mood,

tension, anxiety, irritability, vaginal dryness, loss of sex drive and possible weight gain. Do talk to your GP or doctor at your hospital check-up, as treatment and help may be available.

6d. VAGINAL TENDERNESS AND DISCOMFORT

- Some women have redness, tenderness or discomfort to the skin around and inside the vagina during or after radiotherapy. This may be eased by several methods:
- Keep the area clean and dry.
- Wash only with water.
- Wear cotton underwear.
- Use only a recommended vaginal lubrication for intercourse and when using the dilator.
- If symptoms persist contact your doctor or nurse specialist.

6e. OTHER USES FOR THE FEMMAX DILATOR / TRAINER

FEMMAX[®] vaginal dilators / trainers can also be used during Psychosexual Therapy, after female gender reassignment surgery, by women with Lichen Sclerosus or Lichen Planus and for strengthening the pelvic floor, as advised by a clinician.

6f. BIBLIOGRAPHY

- Understanding cancer of the womb (endometrium) Cancer Backup booklet series.
- Richards S and Hiratzka S (1986) Vaginal Dilatation Post Pelvic Irradiation: A Patient Education Tool. NF Vol 13, No 4, July/Aug.
- Robinson J et al (1999) Psychoeducational group increases vaginal dilation for younger women and reduces sexual fears for women of all ages with gynaecological carcinoma treated with radiotherapy. Int J Radiation Oncology Biol. Phys, Vol 44, No 3, pp.497 – 506.
- Thomas J (2003) The use of vaginal dilators. Cancer Bacup issue 47, p10, Summer 2003.
- Thomas J (2000) Pelvic Irradiation – Are there consequences for women? A thesis submitted for the Degree of Masters in Medical Science in Clinical Oncology. Institute of Cancer studies. University of Birmingham.

FEMMAX[®] Dilators / Trainers



Providing feminine care
for women of all ages



CONTENTS

1. Instructions for use.
2. Assembling the FEMMAX[®] Dilators / Trainers.
3. Inserting your Dilator / Trainer.
4. Caring for your FEMMAX[®] Dilators / Trainers.
5. Do's and Don'ts when using a Dilator / Trainer.
6. Additional Notes for radiotherapy patients.
- 6a. Sexual Intercourse.
- 6b. Vaginal Discharge.
- 6c. Menopausal Symptoms.
- 6d. Vaginal tenderness and discomfort.
- 6e. Other Uses for the FEMMAX[®] Dilator / Trainer
- 6f. Bibliography.

1. INSTRUCTIONS FOR USE

FEMMAX[®] vaginal dilators are designed to be safe, easy and convenient to use whilst being able to be stored in a discreet and easily manageable case, which also includes space for a small lubricant bottle to be accommodated.

Vaginal dilators / trainers may be used as part of the care and treatment of women for a number of reasons including treatment following radiotherapy or surgery; difficulties with sexual intercourse; vaginismus; dyspareunia; or following childbirth.

FEMMAX[®] dilators are designed to be inserted into the vagina to help to keep it healthy and supple and to reduce the risk of adhesions (soft tissue fusion) following radiotherapy or surgery. This may help to reduce discomfort during follow up examinations, further treatments and sexual intercourse.

The dilator set consist of 4 dilators, which are graduated in size and length to allow a natural progression during treatment.

This leaflet and the DVD provided in your pack offer advice on the use and care of your FEMMAX[®] dilator set. The DVD supplied can be played on a standard DVD player and provides you with step by step instructions for use.

IMPORTANT: These instructions are intended as a guide and you should seek the advice of your doctor, nurse specialist or therapist before using these dilators.

2. ASSEMBLING THE FEMMAX[®] DILATORS / TRAINERS

FEMMAX[®] dilators / trainers are supplied as a set of 4 dilators stored by sliding them into each other and placing them in the accompanying case.

To open the case, press down on the flat area on the front of the case.

To assemble the dilators, lay all 4 dilators down in front of you. At one end of the smallest dilator is a screw thread, which fits into the open end of the next size dilator, allowing the dilators to screw together to become a double ended dilator (see Fig 1).

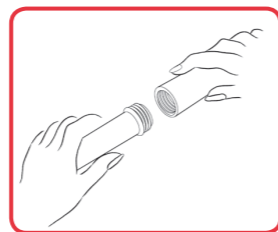


Fig. 1

The two largest dilators also fit together to form a pair (see Fig 1).

One dilator inserts into the vagina and the other becomes a handle to provide support and stability during insertion (see Fig 2).

3. INSERTING YOUR DILATOR / TRAINER

If using the dilators / trainers for the first time, wash them thoroughly in hot soapy water then rinse and dry them to remove all traces of soap (to avoid possible irritation).

Use the dilators in a place that is comfortable, private and allows you to relax as much as possible.

Begin dilation with the smallest size dilator and gradually increase in size over time. Remember you need to stretch the vagina to keep it healthy and supple and you should aim to eventually be using the largest dilator comfortable for you.

To insert the dilator apply a small amount of a vaginal lubricant to the end of the dilator. Lie on your back with your knees bent and slightly apart. If this is not comfortable for you, try standing with one foot on a chair or squatting (similar to inserting a tampon). Try to relax whilst using the dilator (some people find this easier after a bath).

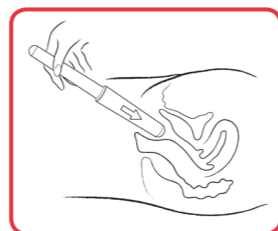


Fig. 2

Put the end of the dilator into your vagina gently and as deeply as possible. Apply a little pressure so that you feel the top of the vagina but without causing discomfort.

Hold the dilator firmly and move in a small circular motion (Fig 3).

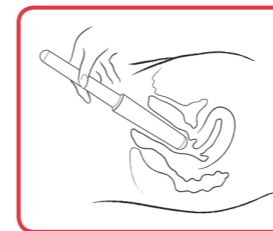


Fig. 3

Do not simply turn (i.e. rotate) the dilator as this may not be sufficient to break down adhesions.

Some patients may be advised to hold the dilator firmly in place from 5 minutes to 15 minutes, or you may be advised to insert, remove and reinsert, repeating this process several times. Your doctor, nurse or radiographer will advise you fully on this.

Should some spotting or slight bleeding occur after use, this is considered normal because of the breakdown of any adhesions. However, should heavy or prolonged bleeding occur contact your doctor or nurse specialist immediately.

If you cannot insert the dilator into the vagina easily do not force it. Remove the dilator and try again later when you feel a little more relaxed. If after attempting several times you still cannot insert the dilator, stop use and contact your doctor or nurse specialist.

There may be some discomfort when you first start using the dilator. If pain or discomfort continues with use, inform your doctor, nurse specialist or therapist.

Use the dilator twice every day for a period of 6 weeks (i.e. morning and night, or whenever convenient to you). Then use the dilator 3 times per week for 6 months and once weekly thereafter for as long as advised to do so by your doctor or nurse specialist.

Weekly use is most important even if you continue to have sexual intercourse as it helps to keep the vagina supple and reduces the chances of discomfort during sexual intercourse.

If you are not sexually active it is still advisable to use the dilator as this will assist with medical examination.

4. CARING FOR YOUR FEMMAX[®] DILATOR / TRAINER

Wash your dilator with hot soapy water after use, rinsing it well. Wipe dry or leave to air dry, standing the open ended dilators upright to ensure adequate drainage. Store in the case provided in order to prevent damage.

You should check your dilator before each use to ensure there are no cracks or rough edges. If there are then it must not be used.

It is recommended that dilators are replaced every 3 years

5. DO'S AND DON'TS WHEN USING A DILATOR

DO

- Check your dilator for any breaks or cracks or sharp edges before use.
- Contact your doctor or nurse specialist if you have any questions regarding the dilator.
- Try to relax when using the dilator; this will help with insertion.
- Clean your dilator with warm soapy water after each use, checking it carefully.
- Store your dilator in the case provided, this will protect it from damage.
- Use lubrication with the dilator, this will help to ease insertion.
- Find a technique for insertion that is comfort-able to you.
- Persevere with using your dilator.
- Warm your dilator in warm water before use if required.

DON'T

- Use your dilator if there are any breaks, cracks, or sharp edges.
- Use your dilator if you experience severe pain or excessive bleeding with use. Contact your doctor or nurse specialist.
- Use any electrical appliances to wash your dilator.
- Store sharp objects in the dilator case as these may damage the dilator.
- Use chemicals or household cleaners on your dilator as these may damage the surface or cause cracking.

6. ADDITIONAL NOTES FOR RADIOTHERAPY PATIENTS

Radiotherapy treatment may have an effect on the lining of the vagina and cause scar tissue (adhesions) to develop and shortening (atrophy) of the vagina to occur. If this happens you may find it difficult or uncomfortable when future internal examination is carried out or when having sexual intercourse.

To help prevent this occurring there are several steps you can take to keep the vagina healthy and supple. Dilation means the stretching and opening of the vagina and sexual intercourse and/or using a dilator can do this.

If you are using your dilator following radiotherapy treatment, it is generally advisable to start using your dilator 2 weeks after your treatment has finished (but please seek the advice of your doctor or nurse specialist).