Breast cancer and its treatment may have a negative impact on the sexual function of patients. There is an overlap in nature of supportive medicine services provided by palliative medicine and oncology. However, there is limited knowledge about the sexuality of Egyptian patients with breast cancer. This may be due to the cultural background of the population and the lack of literature on the subject. Therefore, this study aimed to evaluate the sexual functioning of breast cancer patients following surgery and neoadjuvant/adjuvant chemotherapy.

Methods: This prospective cross-sectional observational study included married breast cancer patients following surgery and neoadjuvant/adjuvant chemotherapy. The Female Sexual Function Index (FSFI) was used to assess anxiety and depression. In addition, demographic and clinical data were collected.

Results: The study included 76 patients with a mean age of 48 ± 11 years. The FSFI total score had a significantly lower FSFI total score compared to those with normalFSFI total score. Also, a significant proportion of Egyptian patients who completed treatment for breast cancer suffered from anxiety and depression. It is suggested that a significant proportion of Egyptian patients who completed treatment for breast cancer may have a significant proportion of patients who are at risk for anxiety and depression. This may be due to the cultural background of the population and the lack of literature on the subject. Therefore, this study aimed to evaluate the sexual functioning of breast cancer patients following surgery and neoadjuvant/adjuvant chemotherapy.

Conclusion: This study provides a better understanding of the sexual functioning of breast cancer patients in Egypt. Further research is needed to explore the factors that contribute to the sexual dysfunction in breast cancer patients and to develop interventions to improve their sexual quality of life.
Conclusions: The Young Cancer Portal is unique throughout Germany and offers a new way for expert-patient-communication with high acceptance by long-term survivors. The portals basic structure is appropriate for a enables the modular addition of topics. Modules for long-term effects and integrative oncology will be established.

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