Helping Women Thrive after Cancer

Noa Benjamini’s natural optimism didn’t flag when she was diagnosed with uterine cancer. “I knew it was treatable,” she recalled. She was home recovering from surgery when she got her first hot flash. “That’s when I cried,” she said. Nobody had warned her that she would experience hot flashes after her ovaries were removed. She suddenly saw herself on a fast track to old age. “I thought I’d shrivel up,” she explained.

Three years later, Noa, 48, describes herself as “in a good place,” as a combination of herbs, prescriptions, and diet and exercise have tamed her menopausal symptoms. She attributes that turnaround to The Sexuality, Intimacy, Menopause, and Survivorship (SIMS) Clinic at Smilow Cancer Hospital at Yale-New Haven, one of a few programs of its kind in the country. The clinic is the brainchild of gynecologists Dr. Mary Jane Minkin, who specializes in menopause, and Dr. Elena Ratner, who specializes in oncology. They partner with psychologist Dr. Dwain Fehon to provide interdisciplinary care to cancer survivors. After a thorough evaluation, they offer women a variety of services, including medical and herbal remedies, Reiki, acupuncture, and individual or couples counseling.

More than 6 million American women are cancer survivors. The treatments that saved many of them can cause life-altering symptoms that go untreated for various reasons. The problems can be embarrassing for women to discuss with their doctors, or they can be dismissed as unimportant in the face of cancer. “I think many cancer specialists are of the belief that the patients sort of adopt: You’re a survivor; you should be happy,” said Dr. Minkin, who is also not a big fan of settling. “This is what you’re surviving for, to have quality of life.”

Dr. Ratner got the idea for the clinic when she was a resident working with Dr. Minkin. “Patients have lives that get so rudely interrupted by us and by their cancer and their treatment,” she explained. Her very first patient was a great example of that. After Dr. Ratner had been seeing the woman for years following treatment for cervical cancer, the patient was going through her second divorce and quite unhappy. With some gentle questioning, the patient revealed that she hadn’t had sex in eight years. Dr. Ratner was amazed the woman had not brought up the problem earlier. “I thought that this is how things are after this kind of surgery,” she replied.

Dr. Ratner helped her find solutions to the physical pain intercourse brought on as a result of the surgery. Dr. Ratner also connected the woman to a therapist to address the horrible fear of recurrence that hung over her relationships. Often the physical solution is far more straightforward than the psychological issues around intimacy. “These women have been through so much,” Dr. Ratner said.

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The medical and psychological health providers work as a team through the SIMS Clinic to create a suggested course of treatment. Women may see a psychologist for a brief course of cognitive behavioral therapy or couples counseling. The cancer experience can also bring up past traumas that need to be addressed through longer-term treatment, explained Dr. Fehon. In those cases, patients can be connected to community providers. 

“As a provider, it’s very rewarding because you’re able to help someone who’s in a very vulnerable phase of their life,” Dr. Fehon said. His goal is to help cancer survivors realize they can “still lead a meaningful, good life.”

Increasingly, the clinic serves women who have a genetic predisposition for breast and ovarian cancer and are choosing to have mastectomies and oophorectomies in their twenties or thirties to prevent cancer. Counseling these women ahead of their treatment about the menopausal symptoms they will experience is critical. Many can be helped by estrogen, a remedy that is often underused because of misconceptions about its use. “There are definitely women who shouldn’t be taking it, but there are women who can take it with very good effect,” Dr. Minkin explained.

Drs. Ratner and Minkin both publish articles and speak about their work in hopes that more doctors will develop a comfort level with these issues and that more cancer centers will offer this kind of care to survivors. “We’re making sexuality and intimacy OK for providers to talk about,” said Dr. Ratner. “We’re making it OK for women to talk about.”

Nevertheless, Yale is currently the only center offering this kind of comprehensive, interdisciplinary care in the region. That is why Noa, who now lives in Massachusetts, makes regular trips back to New Haven. The clinic has helped her address a number of menopausal symptoms, often through lifestyle changes. “They helped me stay young,” she said. “They helped me not to feel defeated.”

Elena Ratner, MD, Director of the SIMS Clinic