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Biography

Omar Al-Qaisi, from Al-Zaytoonah University is a nursing expert in oncology and emergency medicine. He holds a master's degree in emergency and disaster medicine from Al-Zaytoonah University. He currently works as a part-time clinical instructor at Al-Zaytoonah University and also at the Military Oncology Center. He has experience using Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) and the Mixed Methods Appraisal Tool (MMAT) for research. His recent research focuses on sexual healthcare, selenium, orthopedics, sleep quality, pain management and patient satisfaction in oncology patients.

Managing Sexual Issues In Melanoma Patients: A Scoping Review

Abstract:

Background: Managing sexual issues in melanoma patients involves addressing both physical and psychological changes that may arise during or after treatment. Although melanoma itself may not directly affect sexual function, treatments such as radiotherapy, immunotherapy, targeted therapy, and surgery can lead to fatigue, change in body image/hormone levels and psychological issues, which can affect sexual health of patients.

Methods: A focused literature review was performed on this topic from 2020 to 2025, including case reports, case series, guidelines and other full research publications.

Results: We found 9 publications on this topic. Effective treatment begins with open dialog by encouraging patients and partners to discuss sexual concerns with their health-care providers, though studies show both doctors and nurses often neglect to do this unless prompted and hence delay timely intervention. Health-care providers should be alert to subtle signs of relationship problems among patients.

Psychosocial support plays a vital role. Counseling, either individual or couples-based, can help patients navigate changes in desire, self-esteem, and relationship dynamics. Cognitive behavioral therapy (CBT) and sex therapy may be beneficial for addressing anxiety, depression, or trauma.

Medical interventions may include lubricants for vaginal dryness, medications/local injections/penile prostheses for erectile dysfunction, or hormone replacement therapy when appropriate. For patients experiencing premature menopause or hormonal shifts due to treatment, endocrine consult should be arranged.

Body image rehabilitation, especially after visible changes like surgical scars, can be supported through physical therapy, peer support groups, and reconstructive plastic surgery when feasible. The Look Good Feel Better programs in Can-

ada teaches ladies to wear cosmetics/wigs. They meet regularly in all major cancer centers like a support group.

Conclusion: A multidisciplinary approach involving oncologists, psychologists, psychiatrists, advanced nurses, sexual medicine specialists, and patient advocates ensures comprehensive care. Addressing sexual health is the key for a good quality of life among melanoma patients.