



DATE

PATIENT ADDRESS

*Assessment of knowledge and satisfaction with education regarding genitourinary syndrome of menopause in a population of breast cancer patients*

**Your Unique STUDY NUMBER:**

Dear

You are being invited to complete this questionnaire because you have a history of breast cancer.

I am part of a research team trying to find out if breast cancer patients know about Genitourinary Syndrome of Menopause (GSM). We also want to know if breast cancer patients are happy with the education they get from healthcare providers about GSM. Dr. Caitlin Davis is a resident in Obstetrics and Gynaecology and is leading this project.

GSM is a new term that describes different signs and symptoms that can happen at menopause. These can also happen as a result of some cancer treatments. These changes affect your vulva, vagina, bladder and sexual health. People can experience different symptoms such as:

Vaginal dryness/burning/irritation  
Urge to go pee  
Pain with peeing  
Pain or bleeding during sex  
Frequent urinary tract infections

These symptoms are separate from other menopause symptoms such as hot flashes. Results from this survey will help our team understand the overall patient experience and make improvements.

The goal is to provide the best information, so patients are comfortable talking to their healthcare providers about GSM symptoms. This will lead to earlier diagnosis of GSM and improved quality of life.

**Study Purpose:** There are two main goals of this study. We hope to evaluate breast cancer patient knowledge of GSM and level of satisfaction with the type and amount of education they receive about GSM in their healthcare visits.

**Participation:** You will not receive any direct benefit from being in this research study. Your participation is voluntary. If you choose to participate, you can always change your mind later and leave the study at any time without affecting your medical care in any way.

In order to receive this letter of invitation, your name was either included in a list of patients seen in the Nova Scotia Cancer Centre or you were identified as a member of the ReThink Breast Cancer community.

Consent to participate in the study is implied by completing and returning this questionnaire. **Returned questionnaires will be de-identified** (you will not be named) but your answers will be included in the study analysis

All information obtained will be entirely confidential. We have obtained Research Ethics Approval from the Nova Scotia Health Authority and they may review our study to ensure all information is collected in the appropriate manner. This information will not be shared with anyone outside of our study team. You will not be named in any data analysis, reports, publications or presentations that may come from this study.

**Question/Concerns:** if you have any questions or concerns, or if you would like to speak a member of the study team you can call Obstetrics and Gynaecology at the IWK at 902-470-6464.

If you would like to complete the questionnaire online please go to the following link:



Thank you for considering taking part in this study. We hope many people chose to participate so we can help improve the education and counselling for all people undergoing treatment and at risk for GSM.

Sincerely,

Dr D. Rayson MD, FRCPC  
Medical Oncologist  
Cancer Care Program  
Nova Scotia Health Authority