Background: Cervical carcinoma is frequently diagnosis of young, sexually active women. Radical hysterectomy, as a basic therapeutic modality of early stages of cervical cancer, has very positive oncogynaecologic results. On the opposite site it has it’s significant morbidity including bladder and rectal dysfunctions, lymphedemas, and deterioration in patient’s sexual life.

Methods: Data of forty one patients undergoing radical hysterectomy for cervical cancer were used for analysis, as well as data of forty nine patients undergoing simple hysterectomy for benign gynacologic disease and fifty three healthy controls Participants filled out sexual function and quality of life questionnaires before surgery and three and six months postoperatively.

Results: The most important finding was statistically significant worsening in objective arousal in cervical cancer patients (p = 0.041). Also decrease in libido and higher frequency of dyspareunia was registered. Patients undergoing simple hysterectomy showed decreasing trend in sexual dysfunctions, mainly in severe dyspareunia.

Conclusions: Radical hysterectomy for cervical carcinoma has a risk of arousal disorder, libido decrease and worsening of dyspareunia. Psychosexual counselling decreases frequency of early postoperative sexual dysfunctions.