Original Article

A Survey of the Body Image of Mastectomies Women Referring to Imam Khomeini and Imam Hussein Hospitals in Tehran, Iran

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ABSTRACT

Background: Breast cancer treatment may have severe effects on women body image. As a routine care, mastectomy may enhance the risks for anxiety, depression, low self-esteem, and fear of social relationships among women. An awareness of body image changes following mastectomy may promote adaptation among women. Aim: The present study has sought to determine body image levels following mastectomy among females referring to clinics at Imam Khomeini and Imam Hussein Hospitals in Tehran, Iran. Materials and Methods: In this descriptive study, 90 women, aged 30-50, who had undergone mastectomy in least 3 weeks before the study started participated. They had no history of any previous surgery, chronic or psychological diseases. The subjects only referred to the clinics for follow-up treatment procedures such as chemotherapy and radiotherapy. The study benefited from a questionnaire which was validated for content. The questionnaire reliability was qualified by Cronbach Procedure (α =0.8). The questionnaire included demographic information as well as information on surgery and body image. The data collected were analyzed by the SPSS software. Results: The study show that body image among most subjects (44.4%) 1-3 months after mastectomy was at the "medium" level showing that 43.3% of the subjects were in favorable conditions. The study also showed that body image for most subjects (40%) was at the "medium" level, the image of most subjects (51.1%) of their breasts was at: very favorable" level, the image of most subjects (31.1%) of sexual relation was at "unfavorable" level, the image of most subjects (34.4%) upon the feeling of what others thought of them was at "favorable" level, and the image of most subjects (40%) of their familial relationships was at "medium" level. Discussion and Conclusion: Generally speaking, body image among most subjects under study was at medium-favorable levels. Since the study was conducted 1-3 months following mastectomy, and as the patients were at the recovery stages, the feelings of conquest over cancer may have caused them not to worry much about the body images.

Key words: Body Image, breast cancer, mastectomy

INTRODUCTION

Breast cancer is the most prevalent cancer among women being the second mortality cause after cardiovascular diseases. Increasing age is a risk factor in its affliction.^[1] Based on the figures published by the American Cancer Association, there were 200 million women afflicted with breast cancer.^[2] Breast cancer was the most prevalent cancer among women (age range: 35-45) in Iran in the year 2000 with a prevalence rate of 10.8% (392 people). 70.8% of these cases underwent mastectomy.^[3]

Although there have been advances made in cancer diagnosis and treatment, surgery is still the most preferred treatment method, because the existing improvements in surgical techniques, better recognition of tumor metastasis pattern, and post-surgery intensive

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cares have all made tumor eradication from different body parts a clear possibility.^[2] Presently mastectomy is the most usual form of treatment.^[4] The statistics in Iran reveal that 85% of the treatment methods include mastectomy; in 1998, 230 women underwent mastectomy in Imam Khomeini Hospital in Tehran.

Mastectomy can affect patient's physical, psychological, and social life. Following mastectomy, the patient suffers from post-surgery pain, fatigue, changing of body image, mood disorders (e.g., anxiety and depression) along with losing self-esteem.^[5] Moreover, increasing dependence to others and changes in job patterns may occur, and patient's social and family relationships may be affected as well.^[6]

Body image is an image the patient may have from her appearance, and functional potentials which are all made based on an individual's belief. Body image includes two dimensions: (1) cognitive, including the patient's assessment from her body size and (2) emotional/ imaginative, including the patient's imagination of her body form.^[7,8] The change in the body image is a problem which is caused in most cancer cases due to a change in the body form followed by the disease or treatment.

Nurses play crucial roles in understanding and supporting the patients in their psychological, family, social, and even sexual lives after surgery as the patients need advice before and after mastectomy and accepting treatment procedures and adaptation to their new conditions. Considering the high breast cancer prevalence and mastectomy, the post-surgery consequences on psychological aspects of the patients have to be considered. The present study seeks to determine body images among women with breast cancer following mastectomy.

The relationship of body image with socio-familial relations of women with mastectomy in Tehran was also investigated.^[9] In this study, 100 women who had undergone mastectomy (the study group), and 100 women without mastectomy (the control group) were studied via a questionnaire. The subjects in the control group had a negative body image. All subjects in both groups had good family relationship, while following mastectomy they had unfavorable relationships. Most subjects in both groups showed unfavorable social relations, and after mastectomy, the number of subjects with unfavorable social relationships increased.

Karus conducts a descriptive-comparative study entitled "Body image: decision making and treatment of breast cancer".^[10] In this prospective study 31 women with breast cancer (the study group), and 30 healthy women (the control group) underwent investigation. Data procedures included questionnaires being handed over to the subjects in the study group (i.e. the women who had undergone mastectomy) two times: once 4 weeks before the operation and once 4 weeks after mastectomy. The questionnaires for the control group were filled out in 8 weeks. The results showed that the body image did not change among the subjects in the control group, while it became unfavorable among the subjects in the study group. In the control group, some women had chosen mastectomy in contrast to breast conserving survey. These subjects had a more favorable body image; for, in this group life expectancy was more important than preserving the appearance and physical form of the breast. On the other hand, the women who had chosen breast conserving surgery had a lower life expectancy due to fear of cancer recurrence.

MATERIALS AND METHODS

In the present study, body image among patients with mastectomy is investigated. 90 women who had undergone mastectomy due to breast cancer were selected through non-probability sampling. The subjects were 30-55 years of age, they had no chronic physical and psychological diseases except the breast cancer, and reported no previous history of surgery. They had undergone mastectomy 21 days before the study started, and had not started their chemotherapy or radiotherapy. A questionnaire was handed over to the subjects. The questionnaire included demographic information and information regarding mastectomy and body image scale. In order to prepare the questionnaire, the literature was reviewed to determine different aspects of body image. The body image scale was prepared following interviews with seven patients with mastectomy as well as recognizing the major cases occurring for the women following mastectomy, body image dimensions were determined, plus using the body satisfaction scale.^[11-13] The mental image was questioned concerning: (1) body appearance and fitness; (2) breast function; (3) sexual relation; (4) other people's attitude; and (5) family relationships. The questions were organized using multiple choices (including Very much, Never). The questionnaire was validated by content. To achieve statistical validity, the method of internal consistency was used which emphasizes on the consistency of the questionnaire items. Its reliability was qualified by the Cronbach Procedure (α =0.8).

The questionnaire was taken to Mereaj Clinic in Imam Khomeini Hospital as well as Jorjani Clinic in Imam Hussein Hospital in Tehran for filling it out. After the subjects were selected, a written consent was obtained and the questionnaires were filled out. The data collected were analyzed using the SPSS software.

RESULTS

The present study was conducted on 90 patients with mastectomy (age range: 30-55; mean age: 43). Most subjects (82.2%) were married. 33.3% of the subjects were holding high school diplomas. A majority of the subjects (26.7%) had two children; 82.2% of them were housewives. Most of the cases (43.3%) had had their mastectomy 10-12 weeks (mean post surgery time: 8 weeks) before the onset of the study. In 51.1% of the cases surgery was performed on the left breast, and the majority of the cases (37.8%) were satisfied with their mastectomy.

Most subjects in the study mentioned that their husbands (35.6%); their children (46.7%); and their families (31.1%) supported them. The findings show that 35.5% of the subjects did not wish to have a second corrective breast surgery, while 45.6% of the subjects used artificial breasts, cotton pieces, and handkerchief for filling the operated area and to have a better view of their body image.

The findings on the women emotions after mastectomy are shown in Table 1. The satisfaction with their body was medium in 40% of the cases, while most of them (52.3%) noted they felt "much happy of the form and size" of their previous breasts.

Table 2 shows the other aspects of body image (e.g., breast function and role; sexual relation; family relationships; and other people's attitudes). As it can be seen in Table 2, after mastectomy, most subjects (51.1%) were satisfied with their breast functions.

Correlations results show that there was a significant difference between being married (P<0.03). There was also a significant difference between left breast mastectomy and body image (P<0.02).

At the end of the questionnaire, the subjects were asked to give their opinion on losing a breast. The results show that 21.1% of the subjects believed that being alive is very sweet, though they have lost a body part. 17.2% of the subjects were worried about cancer recurrence. Comparing body image and fitness after mastectomy, all cases believed that being alive is more important. Salter *et al*, state that patient's acceptance of body changes is primarily affected by other people's view and touch. In this respect, in treatment area, the other peoples' reactions, and specifically those of the nurses have to be considered. The nurses should understand that their behavior and approach can affect their clients' emotions and acceptance of the changes. Other people's facial

Table 1: The frequency of emotions in post-mastectomy
women presenting at clinics in Imam Khomeini and
Imam Hussein Hospitals in Tehran

Emotions after mastectomy	Very much	Much	Medium	Little	Not at all
I feel happy with my	4	10	36	15	25
body	(4.4)	(11.1)	(40)	(16.7)	(27.8)
Generally I find myself	9	15	38	14	14
attractive	(10)	(16.6)	(42.2)	(15.6)	(15.6)
Surgery incisions have	24	19	23	19	5
caused ugly body image	(26.6)	(21.1)	(25.6)	(21.1)	(5.6)
I feel loss of breast in	34	13	15	15	13
my body	(37.8)	(14.4)	(16.7)	(16.7)	(14.4)
Surgery has caused	24	19	19	15	13
imbalance in my upper body part	(26.7)	(21.1)	(21.1)	(16.7)	(14.4)
Mastectomy creates	27	22	18	12	11
deformed body	(30)	(24.4)	(20)	(13.3)	(12.3)
I feel as if I have lost	34	10	16	11	19
an important part of my body	(37.8)	(11.1)	(17.8)	(12.2)	(21.1)
I feel bad when I look at	26	19	15	19	11
the operated area	(28.9)	(21.1)	(16.7)	(21.1)	(12.2)
I feel uncomfortable	28	20	15	18	9
when I touch the operated area	(31.1)	(22.2)	(16.7)	(20)	(10)
Mastectomy has	25	21	14	18	12
occupied my mind all over	(27.8)	(23.3)	(15.6)	(20)	(13.3)
I felt happy with the size	47	22	17	2	2
and form of my original breast	(52.3)	(24.4)	(18.9)	(2.2)	(2.2)

Table 2: Frequency and ranking of different aspects of women body image after mastectomy, referring to the clinics at Imam Khomeini and Imam Hussein Hospitals in Tehran

Emotions after mastectomy	Very favorable	Favorable	Medium	Unfavorable	Very unfavorable
Breast	46	29	10	4	1
function	(51.1)	(23.3)	(11.1)	(4.4)	(1.1)
Sexual relations	46	26	16	28	7
	(4.4)	(28.9)	(17.8)	(31.1)	(7.8)
Other people's attitudes	22	31	29	8	0
	(24.4)	(34.4)	(32.3)	(8.9)	(0)
Family	5	30	36	17	2
relationships	(5.6)	(33.3)	(40)	(18.9)	(2.2)

expressions, language tone, touch, and behavior may enhance an acceptable body image.^[14]

DISCUSSION AND CONCLUSION

The present study was performed to study women body image among women with breast cancer. The study intends to determine patient problems following mastectomy as well as showing ways to reduce or eradicate those problems. Based on the findings of the study, 40% of the cases were satisfied with their appearance at a medium level, while 42.2% considered themselves attractive at an average level. Still 51.5% of the cases were very satisfied with their breast function. The findings of the present study are in contrast with the findings of Margosean that claimed that body image would be different. This might be due to the time of the study on body image. In her study, the interval between mastectomy and study was much longer.^[9]

Karus showed that body image following breast conserving surgery compared to women with mastectomy was at a more unfavorable level as they had thought that mastectomy had been the only lifesaving operation against breast cancer.^[10] Although the appearance of their breast was conserved, their fear of cancer recurrence had lowered their life expectancy. In his/her study, Novar learned that the patients who choose mastectomy are those who are very worried about their future as they feel that cancer might leave them completely.^[15]

As the present study was performed shortly after mastectomy, the subjects might have been more concerned with cancer destruction and treatment than with the importance of their body images. The authors believe that as the time goes by, the subjects may have more chances to think more deeply on the consequences on their changes of appearance and their impacts on their social, sexual, and family relationships in the future. Therefore, the nurse, as a member of the treatment team should seek to help the patient adjust herself with the new changes and save the favorable body image.

ACKNOWLEDGMENTS

The authors should like to thank the directors of the clinics in Imam Khomeini and Imam Hussein Hospitals.

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Source of Support: Nil Conflict of Interest: None.