

# THE MASTECTOMIZED WOMAN AND HER PERCEPTION OF SELF-IMAGE: AN INTEGRATIVE REVIEW

A MULHER MASTECTOMIZADA E SUA PERCEPÇÃO DE AUTOIMAGEM: UMA REVISÃO **INTEGRATIVA** 

LA MUJER MASTECTOMIZADA Y SU PERCEPCIÓN DE AUTOIMAGEN: UNA REVISIÓN INTEGRADORA Sarah Cristianny Dantas dos Santos<sup>1</sup>, Ana Paula Nunes de Lima Fernandes<sup>2</sup>, Jéssica Naiara de Medeiros Araújo³, Giovanna Karinny Pereira Cruz⁴, Vanessa Gabrielle Neves Câmara⁵, Allyne Fortes Vitor6

#### **ABSTRACT**

Objective: to characterize the perception on self-image of the mastectomized woman. Method: integrative review, conducted with the following databases: Lilacs, Pubmed/Medline, Cochrane, Cinahl and Scopus, during September 2014. Eight primary articles were selected, which responded the guiding question << What is the perception of the mastectomized woman on her self-image? >>. The interpretation of the results was based on the pertinent literature by the question and the study's objective. Results: the perception on the self-image of a mastectomized woman is a mutilated, deformed, weird, ugly, horrible, crooked person, a woman with no breast, no hair and disabled. However, positive perceptions were found in two articles. Conclusion: there is need to understand a little more the universe that composes the life and experiences of the many women fighting cancer and that need to undergo mastectomy, as well as how to better handle their feelings and perceptions. Descriptors: Self-image; Mastectomy; Breast Neoplasia; Perception.

#### RESUMO

Objetivo: caracterizar a percepção de autoimagem da mulher mastectomizada. Método: revisão integrativa, realizada nas bases de dados Lilacs, Pubmed/Medline, Cochrane, Cinahl e Scopus no mês de setembro de 2014 e selecionaram-se oito artigos primários, os quais responderam a questão norteadora << Qual a percepção da mulher mastectomizada sobre sua autoimagem? >>. A interpretação dos resultados foi alicerçada na literatura pertinente mediante o questionamento e objetivo da pesquisa. Resultados: os resultados traduzem a percepção de autoimagem da mulher mastectomizada como uma pessoa mutilada, deformada, estranha, feia, horrível, torta, uma mulher sem a mama, sem cabelo e deficiente, entretanto, foram encontradas formas positivas de percepção de autoimagem em dois artigos. Conclusão: há necessidade que se esclareça um pouco mais sobre o universo que constrói a vida e as experiências de inúmeras mulheres que se veem na luta contra o câncer e necessitam submeter-se à mastectomia, também, como lidar melhor com os sentimentos e percepções ao longo de sua experiência. Descritores: Autoimagem; Mastectomia; Neoplasias da Mama; Percepção.

## **RESUMEN**

Objetivo: caracterizar la percepción de la propia imagen de las mujeres mastectomizadas. Método: una revisión integradora, realizado con las bases de datos LILACS, PubMed/Medline, Cochrane, CINAHL y Scopus en septiembre de 2014. Se seleccionaron ocho artículos primarios, que respondieron a la pregunta de orientación << ¿Cuál es la percepción de las mujeres mastectomizadas de su propia imagen? >>. La interpretación de los resultados se basó en la literatura por el interrogatorio y objetivo de la investigación. Resultados: la percepción de la propia imagen de la mujer mastectomízada és una persona mutilada, deformada, extraño, feo, horrible, empanada, una mujer sin pecho, sin pelo y deficiente. Sin embargo, se han encontrado formas positivas de percepción de la propia imagen en dos artículos. Conclusión: hay una necesidad de aclarar un poco más sobre el universo que construye la vida y las experiencias de muchas mujeres que se encuentran en la lucha contra el cáncer y tienen que someterse a una mastectomía, así cómo tratar mejor con los sentimientos y percepciones. Descriptores: Autoimagen; Mastectomía; Neoplasias de la Mama; Percepción.

¹Nurse. Federal University of Rio Grande do Norte. Natal (RN), Brazil. Brazil. E-mail: <a href="mailto:sarahcds123@gmail.com">sarahcds123@gmail.com</a>; ²Nurse, MSc Student, Post-Graduate Program in Nursing, Federal University of Rio Grande Norte/PPGENF/UFRN. Natal (RN), Brazil. E-mail: <a href="mailto:anapaulanlf@yahoo.com.br">anapaulanlf@yahoo.com.br</a>; ²Nurse, MSc Student, Post-Graduate Program in Nursing, Federal University of Rio Grande Norte/PPGENF/UFRN. Natal (RN), Brazil. E-mail: <a href="mailto:jessicanaiara\_rn@hotmail.com">jessicanaiara\_rn@hotmail.com</a>; ³Nurse, MSc Student, Post-Graduate Program in Nursing, Federal University of Rio Grande Norte/PPGENF/UFRN. Natal (RN), Brazil. E-mail: <a href="mailto:yanessagabriellenc@hotmail.com">jessicanaiara\_rn@hotmail.com</a>; ⁴Student, Graduate Course in Nursing, Federal University of Rio Grande do Norte/PPGENF/UFRN. Natal (RN), Brazil. E-mail: <a href="mailto:yanessagabriellenc@hotmail.com">yanessagabriellenc@hotmail.com</a>; ⁶Nurse, PhD Professor in Nursing, Graduate/Post-Graduate Program in Nursing, Federal University of Rio Grande do Norte/PPGENF/UFRN. Natal (RN), Brazil. E-mail: <a href="mailto:yanessagabriellenc@hotmail.com">yanessagabriellenc@hotmail.com</a>; ⁶Nurse, PhD Professor in Nursing, Graduate/Post-Graduate Program in Nursing, Federal University of Rio Grande do Norte/PPGENF/UFRN. Natal (RN), Brazil. E-mail: <a href="mailto:yanessagabriellenc@hotmail.com">yanessagabriellenc@hotmail.com</a>; ⁶Nurse, PhD Brazil. E-mail: allynefortes@yahoo.com.br

INTRODUCTION

The breast cancer is the second most frequent cancer worldwide, and the most common between women. It represents roughly 20.8% of new cases each year, but, when early diagnosed and treated, the prognosis is considered satisfactory.<sup>1</sup>

The breast cancer mortality rates are still high, probably for the fact that the disease is diagnosed in advanced stages. Only in Brazil, the number of new cases, in 2014, was appraised in 57.120.1 Comparing to 2008, when the incidence was estimated at 49.000 new cases, it shows the increasing number of this disease.2

The appearance of breast cancer is relatively rare before 35 years old, but above this age, the incidence increases progressively and quickly. Statistics show the interesting fact that this increase occurs both in developing as developed countries.<sup>1</sup>

According to the Mortality Information System (SIM), the number of deaths by breast cancer in 2011, in Brazil, was 13.345, being 120 men and 13.225 women.<sup>1</sup>

The breast cancer is the first cause of death among Brazilian women, with women between 40 and 69 years old being the most affected. In Western countries, the death by breast cancer is more common in women under 50 years old.<sup>3</sup>

The appearance of breast cancer is related to triggering risk factors. Among them, the age is the most important, since the incidence rates increase significantly until 50 years old. <sup>4</sup>

Besides age, other factors must also be observed in the appearance of the disease, namely: female gender, premature menarche, nulliparity, first pregnancy older than 30 years old, oral contraceptive, late menopause, hormone replacement therapy, previous breast cancer in family, idleness, and even depressive personality.<sup>4</sup>

Once the breast cancer is diagnosed, depending on the clinical and hystogical stage, the treatment may be surgically performed with numerous techniques: mastectomy, mastectomy with reconstruction, quadrantectomy and lumpectomy. <sup>5</sup>

The mastectomy consists in partially or completely removing the breast(s) and axillary lympho nodes in order to extract a tumor. Such surgical procedure, although very effective, reveals to be mutilating for the woman, for it is an organ that represents the womanhood and sexuality, negatively affecting her quality of life.<sup>6,7</sup>

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The mastectomy and parallel therapies contribute for the development of physical and psychological complications, affecting negatively the woman's quality of life and resulting in important emotional problems that damage not only the physical integrity, but also the psychological image of the woman, her sexuality and self-image. <sup>8</sup>

This type of surgery is full of excessively painful experiences related to the feeling of internal loss, and such procedure changes the established relationship between body and mind. Therefore, the breast mutilation produces feelings that change the body's perception and cause difficulties in visualizing the new body, once the womanhood is threatened.<sup>9</sup>

The ongoing increase in breast cancer incidence among women, and their need to undergo mastectomy is becoming a problem that affects thousands of women every year, and the psychological consequences from this procedure and parallel treatment justify this the health intending to clarify study, professionals about the self-image mastectomized woman demonstrates. Thus, this study's objective is to characterize the perception of self-image the mastectomized woman.

#### **METHOD**

Integrative review conducted in accordance to the following stages: elaboration of the guiding question of the review, formulation of the inclusion and exclusion criteria of the articles, definition of the information to be extracted from the selected research data, evaluation of the included studies, interpretation of the results, presentation of the review, and summary of the results.<sup>10</sup>

The following question was used for developing this study: what is the perception of the mastectomized woman of her self-image?

The inclusion criteria applied in this study were: complete articles and available for free in the selected databases, articles in Portuguese, English or Spanish, and articles about the addressed theme. The exclusion criteria were: editorial, letters to the editor, abstracts, expert's opinion and reviews.

The information extracted from the selected surveys were filled from a data collection instrument built containing: the article title, indexed database, author, origin country, language, year of publication, research site, type of scientific magazine, method aspects, response to the study's objective, and main conclusions.

The research was conducted in the first half of September 2014, in the following databases: Lilacs (Latin American and Caribbean Literature in Health Science), Pubmed/MEDLINE (National Library of Medicine), Cochrane, Cinahl (Cumulative Index to Nursing and Allied Health Literature) and Scopus.

The indexed keywords in MeSH used for selecting the studies were: mastectomy, self-concept, breast neoplasms and perception. Similarly, equivalent indexed keywords were applied to DeCS for the research in Lilacs database: mastectomy, self-image, breast neoplasias and perception.

The following cross-over were employed: mastectomy AND self-concept, mastectomy AND perception, breast neoplasms AND perception, breast neoplasms AND self-concept. The articles search was conducted in a controlled way, except for the Lilacs and Cochrane databases. Eight articles were

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selected for they responded the study's question and fulfilled all inclusion criteria.

The first evaluation for selecting the studies occurred in the following manner: firstly, the title of the articles obtained from the cross-over was read and, when words or terms suggesting the possibility of containing the study's theme were evidenced, the preliminary acceptance was made. Next, the abstracts were read and, in case the article answered the study's question, it was fully read and selected, or not.

The interpretation of the results was based on the pertinent literature, by the study's questioning and objective. The summary of the cross-overs in the databases were organized in Figure 1 to clarify such stage.

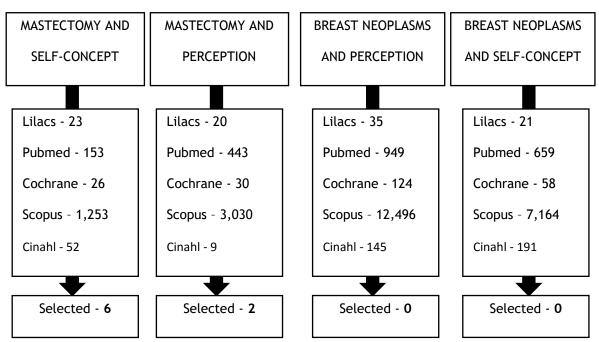


Figure 1. Summary of the databases' cross-over.

The synthesis of the selected articles was developed from a figure, in which the journal, year, authors, methods and results of the research for better understanding and visualizing the found results.

#### **RESULTS**

After the thorough research in the chosen databases, the results obtained from the

produced knowledge about the analyzed theme in this integrative review were compiled in Table 1, in which it is possible to visualize the journal, year, author and synthesis of the results that characterize the perception of self-image of a mastectomized woman in each study.

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Journal (Year of publication)	Authors	Summary of the results
Support Care Cancer (1994)	Yilmazer, Aydiner, Ozkan, Aslay, Bilge <sup>11</sup>	<ul><li>They feel they are disabled</li><li>They feel ugly</li><li>They feel incomplete</li></ul>
Psychology Studies (2003)	Duarte, Andrade <sup>6</sup>	<ul><li> "There is a breast and the other, not"</li><li> "You are disabled"</li></ul>
European Journal of Cancer Care (2013)	Mckean, Newman, Adair <sup>12</sup>	<ul><li> "Horrible body"</li><li> Normal appearance, better selfimage</li></ul>
Health Science Files (2007)	Talhaferro, Lemos, Oliveira <sup>13</sup>	<ul> <li>"I see myself with the half of a breast and no hair"</li> <li>"The same I was before"</li> <li>They represent a mutilated body</li> </ul>
Oncology Nursing Forum (2012)	Freysteison, Deutsch, Lewis, Sisk, Wuest, Cesario <sup>14</sup>	<ul><li>"I feel deformed when I look at the mirror"</li><li>She feels mutilated</li></ul>
Latin-American Journal of Nursing (2003)	Ferreira, Mamede <sup>15</sup>	<ul><li> "I feel crooked"</li><li> "I feel strange"</li><li> She feels mutilated</li></ul>
Anna Nery School (2010)	Moura, Silva, Oliveira, Moura <sup>16</sup>	- "It gets weird, different from other people"
Latin-American Journal of Nursing (2010)	Silva, Santos <sup>17</sup>	- "I know I don't have a breast" - "Ah, it's a mutilation"

Table 1. Summary of the selected articles from the databases.

Eight articles were obtained from primary sources, whose years of publication range from 1994 to 2013, with predominance of two studies in 2003 (25%) and in 2010 (25%), each one. Regarding the journals in which the articles were published, two (25%) were in the Latin American Journal of Nursing. The other articles were published in different journals.

Five studies from the selected ones were Brazilian (62.5%), whereas the others were conducted in Turkey (12.5%), Russia (12.5%) and United States (12.5%), presuming that the self-image of the mastectomized woman is discussed mostly in Brazil.

The selected studies report the stressors of the post-treatment of breast cancer. consequences of mastectomy, facing mastectomy in sexuality, post-mastectomy representation feelings, of the postmastectomy body, the role of breast reconstruction in self-image, looking at the mirror for the first time after the mastectomy and comparison between body image, selfsupport in and social esteem mastectomy and breast conserving therapy.

All eight articles dealt with the theme mastectomized woman and her perception of self-image. Is spite of the type of mastectomy, the type of the used method in the study and the way the results were analyzed, the representation of the mastectomized woman's perception of self-image is negatively described in all articles, highlighted by the individual or group responses.

Nevertheless, it is important to notice that, in two studies, apart from revealing a negative perception of the woman's self-

image, positive feelings were also described regarding this issue.

Each study obtained in this research evidences more than one response to the problem and, thereby, in order to make the comprehension easier, similar responses were grouped, that is, each article is reported more than once.

In four studies (50%), the mastectomized woman describes her self-image as mutilated. In four studies (50%), the woman describes her self-image as weird, ugly, horrible, incomplete and crooked.

In three studies (37.5%), the woman describes her perception of self-image as a breastless person, or with half of a breast. The perception of a disabled self-image is reported by women in two studies (25%). In one study (12.5%), the woman sees herself as deformed.

Two studies (25%), however, apart from negative responses, reported positive forms of self-image, in which one of them demonstrates that, after the breast reconstruction, the woman perceives a better self-image and a normal appearance, whereas the other one describes a perception identical to the one the woman had before the mastectomy.

#### **DISCUSSION**

The selected articles in this research report different aspects of the mastectomized woman and several responses were found, describing from the perception of a mutilated body, to responses as deformed, weird, ugly, horrible, crooked, a woman without a breast, disabled, the same as before and normal appearance. Some studies discuss the

perception the mastectomized woman's perception of self-image and bring pertinent reflections that encourage a deep analysis of this theme, given its importance.

The most common treatment for malignant neoplasms is mastectomy, which generates a complete change in the appearance of women and, therefore, is responsible for a series of feelings and perceptions regarding themselves and their self-image. It originates consequences that change not only the physical perception, but also the mental image that women have of themselves and their femininity.<sup>9</sup>

The changes faced by mastectomized women reflect the fact they have a body with a new image and, therefore, their whole being is threatened by an existential perspective that, for the self-image, is an outrage. The perception of a mutilated self-image is fairly frequent in the studies, since women identify their self-image as strange and different. This evidenced when looking at the mirror and desiring to recover the lost body space by plastic, as they recognize that the perfect body no longer exists.<sup>14</sup>

One of the studies states that, when looking at themselves of the first time after the mastectomy, the woman brings to the mirror an image built in their minds full of fear and expectation. 12 Ratifying this point of view, the perception of self-image identified in other study is a mutilated woman. 17 The decision of looking at the mirror after the mastectomy is based on personal motives such as discovering what it looks like and the need for taking care of the surgical wound and drains. Other reason that leads the woman to look at the mirror is taking care of her appearance when doing the makeup, adjusting the wig and, thereby, ensuring a symmetrical appearance. Therefore, looking at the mirror after the mastectomy involves numerous meanings and among them is the perception of mutilation. 14

One of the studies shows that the loss of a part of the body is experienced as damage to the self-image and the consequences of this process go beyond the psychological universe and bring favorable conditions for a mourning process. By leaving a visible scar on the body, the mastectomy is related to the permanent loss of an organ deeply connected to the female identity and full of personal meanings. Therefore, the perception of self-image is a woman without her breast and ugly when dressing up. The participants also revealed the fear of losing autonomy and the possibility of being a terminal illness. <sup>17</sup>

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The difficulties when dealing with their own body after the mastectomy are reported from the moment the woman faces the first contact with her reflected image on the mirror, causing such feelings as weirdness and pain when seeing no breast. For her, overcoming this experience is hard, for she can't stand observing her body, much less touching herself. Her perception of self-image, according to the speeches, is a woman with only one breast.<sup>6</sup>

All the negativity built during the mastectomy post-operative becomes clear as her self-image is of a disabled woman. It is noteworthy that, in this study, one of the participants, different from others, mentions her major concern with hair loss because of chemotherapy, since being bald represents a more evident sign of the disease.<sup>6</sup>

Many negative feelings are generated by physical perception after mastectomy and reflect a terrified view of the disease according one of the to researches. Frustration, depression, shame, devaluation of self-image, non-acceptance of the current condition and weakness in facing the situation were emotions represented in this study, pointing out the disruption of biopsychosocial aspect. "It's weird, different from other people" and "it's missing a part of us" are feelings of self-image perception that women describe after the surgery. Therefore, the woman fears not being physically accepted ad losing the capacity of going back to her normal social life. 16

The rate of patients who reported negative emotions regarding the body image after mastectomy in one study was 82.5% (see themselves as incomplete and disabled people), whereas other group of 80% of women responded that they were ugly, making it clear, once again, the negative perception of self-image. 11

Another relevant issue to be discussed in this study is related to a self-esteem questionnaire among mastectomized women and women undergoing breast conserving therapy. Mastectomized women revealed not having a negative effect on the self-esteem when compared to women who underwent breast conserving therapy, since both groups had very similar scores of self-esteem, 71.9 and 71.6, respectively. This fact suggests that mastectomized women develop strategies for dealing with the surgery and may face their self-esteem under an optimistic outlook.

Still, regarding the physical result of the surgical procedure, for one of the women that underwent full mastectomy, this was so distressing that her self-image was perceived

as horrible and she felt absolute disgust of her whole body. 11 On the other hand, in the same study, the group of women who underwent immediate breast reconstruction managed to keep a positive self-image throughout the cancer treatment. They reported they realized a better self-image and normal appearance, unlike women who delayed breast reconstruction surgery, whose restoration of self-image took longer to happen. 11

A study<sup>18</sup> that assessed the degree of satisfaction of patients that underwent breast reconstruction demonstrated that the objective of the immediate reconstruction is to restore the quality of life and to improve the body image, using tissue retails, prosthesis or both of them, being aesthetically less aggressive and easier to deal with than the radical mastectomy. Consequently, it is a positive factor for the self-image to be perceived in a more confident and less traumatic way by the point of view of mastectomized women.

One of the studies shows that regarding dissatisfaction and rejection of breast loss, the woman realizes the current body is different and strange, generating negative feelings of self-deprecation, pain, limitation and weakness, as she realizes her self-image without hair and with half of a breast.<sup>6</sup> Moreover, it presents a major change in the body image when associating with the psychological, social and cultural factors.<sup>19</sup>

On one hand, most women express negative feelings; on the other, in this study, some of them reported acceptance of their new body condition, while reporting their self-image is the same as before, and feeling well. It is noticed, in this study, that most women face mastectomy well and develop strategies that give new meaning to their lives.<sup>6</sup>

# CONCLUSION

Breast cancer is the second most common type all over the world, and the first one in incidence rate in women in Brazil. The mastectomy is one of the forms of treatment, which consists of the removal of the affected breast and it is seen by most women as mutilating.

By leaving scars on the body and changing the greatest symbol of the woman's sexuality, the mastectomy originates consequences that are beyond the physical universe and go through the psychological barrier. Furthermore, it generates such feelings as anguish, frustration and impotency in the women that underwent this procedure, creating a negative self-image.

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At the end of this integrative review, the conclusion is that the mastectomized woman sees herself in a negative way according to the mentioned statements. Her perception of self-image is a mutilated, deformed, weird, ugly, horrible, crooked woman; a woman without her breast, bald and disabled. However, there were positive perceptions of the self-image of the mastectomized woman; one of the speeches showed that, after the breast reconstruction, the woman saw herself better and with a normal appearance; whereas other one presented that the perception of self-image by some woman was the same as before the mastectomy.

This study intended to contribute to the knowledge produced and published in journals so that there is a major understanding about the universe that composes the life and the experiences of the many women fighting cancer and that need to undergo mastectomy. This includes understanding such universe in order to better handle the feelings and perceptions that the mastectomized woman has during her experience.

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## **Corresponding Address**

Jéssica Naiara de Medeiros Araújo Rua Dom Joaquim de Almeida, 2076 Bairro Lagoa Nova CEP 59056140 - Natal (RN), Brazil