FEELINGS OF WOMEN DIAGNOSED WITH BREAST CANCER

SENIMENTOS DE MULHERES COM DIAGNÓSTICO DE CÂNCER DE MAMA

LOS SENTIMIENTOS DE LAS MUJERES CON DIAGNÓSTICO DE CÁNCER DE MAMA

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ABSTRACT

Objective: to describe the feelings experienced by women diagnosed with breast cancer. Method: an exploratory study, descriptive, qualitative in nature. We interviewed 12 women admitted in a reference hospital in cancer in Teresina (PI), Brazil. We used the Technique of Content Analysis in the analysis of the information. Results: it was found that the feelings more evident were of sadness, anger, distress, anguish, denial and fear of death; there were also observed feelings of hope, peace and desire to live; it proved the importance of social support network for women. Conclusion: the knowledge of the feelings experienced by women with breast cancer enables health professionals planning a full assistance and directed. Descriptors: Nursing Care; Mastectomy; Breast Neoplasms.

RESUMO

Objetivo: descrever os sentimentos vivenciados por mulheres com diagnóstico de câncer de mama. Método: estudo exploratório, descritivo, de natureza qualitativa. Foram entrevistadas 12 mulheres internadas num hospital referência em câncer em Teresina (PI), Brasil. Utilizou-se da Técnica da Análise de Conteúdo na análise das informações. Resultados: constatou-se que os sentimentos mais evidenciados foram de tristeza, revolta, aflição, angústia, negação e medo da morte; também foram constatados sentimentos de esperança, paz e vontade de viver; revelou-se ainda a importância da rede social de apoio para as mulheres. Conclusão: o conhecimento dos sentimentos vivenciados por mulheres com câncer de mama possibilita aos profissionais de saúde o planejamento de uma assistência integral e direcionada. Descritores: Cuidados de Enfermagem; Mastectomia; Neoplasias da Mama.

RESUMEN

Objetivo: describir los sentimientos experimentados por las mujeres diagnosticadas con cáncer de mama. Método: este es un estudio exploratorio, descriptivo, cualitativo. Entrevistamos a 12 mujeres internadas en un hospital de referencia para el cáncer en Teresina (PI), Brasil. Se utilizó la Técnica de Análisis de Contenido para procesar la información. Resultados: se encontró que los sentimientos más evidentes fueron la tristeza, la ira, el dolor, la angustia, la negación y el miedo a la muerte; también se observaron sentimientos de esperanza, paz y voluntad de vivir; todavía se reveló la importancia de la red de apoyo social para las mujeres. Conclusión: el conocimiento de las sensaciones que experimentan las mujeres con cáncer de mama permite a los profesionales de la salud planear una asistencia integral y específica. Descriptores: Cuidados de Enfermería; Mastectomía; El Cáncer de Mama.

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INTRODUCTION

Society has the word cancer as a great evil, usually associated with death. For women, breast cancer is a great villain, because it interferes in a part of the female body of great significance. This type of cancer is classified as one of the most common malignancies in the world. It mainly affects women, rate of 22% of cases each year. The incidence rate in Brazil in 2014 was about 57,120 new cases. Piauí reached 31.12 cases for every 100,000 women, having estimated about 520 cases in the state, and gross rate of 27.23% in the capital Teresina (PI), an estimate of 210 cases in the year 2014.2

The main risk factors for the development of cancer are: family history of the disease (especially mother), diagnosis of atypical hyperplasia, increased breast density, early menarche and late menopause, obesity, use of oral contraceptives, hormone replacement orally (estrogen and progesterone) after menopause, nulliparity, late first pregnancy at age 30, and alcohol consumption.3

The most common symptoms of breast cancer are the presence of nodules that most often presents themselves painless, hard and sharp edges, and stiff consistency, but there are tumors that are soft consistency, globular and delimited, or the skin can present with similar to orange peel, forming skin edema, skin retraction, pain, nipple inversion, hyperemia, desquamation or ulceration of the nipple and papillary secretion and may also arise palpable lymph nodes in the axilla.2

Given this set of changes present in women, it could be seen that women with the diagnosis of breast cancer, in most cases, have this diagnosis in a negative way, that is why it brings great changes in the life they receive, it is a remarkable and difficult time to be faced, because breast cancer is a disease that threatens the physical and emotional integrity and also requires the woman intensive care to a long treatment, invasive and possibly turbulent.4

The treatment has important implications with regard to female identity. In addition to breast loss due to mastectomy, or a part thereof, complementary treatments, such as chemotherapy, can bring the effect of alopecia, stop or irregular menstruation and infertility, further weakening the sense of feminine identity.5

The diagnosis of breast cancer can impact the lives of women in different ways. With news and the communication of the diagnosis both the patient and the family, as well as the staff of the patient network, initiate experiences that can occur in different ways, about the way to face the disease. In most cases diagnosed, the feelings of fear and shame make women try to hide the disease from the social environment, hiding the diagnosis or delaying the public exposure of their condition.6

The various changes that occur in a woman's life before the diagnosis of breast cancer presuppose be relevant to know the feelings that women experience when faced with this diagnosis, in order to expand the provision of care to women with breast cancer and promoting comprehensive care.

The feeling is a stable emotional condition and is related to intellectual capacity, the values, that is, something that builds up. For it, there is necessary to the existence of a language and culture of the people, and these are the culture and language encoding the affective states. The feeling can be classified into several types, such as feelings of sadness spheres, joy, compared to the other attraction, love, friendship and danger.7

In view of the many changes that occur in a woman's life and the various feelings that arise when faced with this diagnosis and during cancer treatment, highlights the need to expand studies and discussions in this area.

This study has the feelings object of study experienced by women diagnosed with breast cancer. To conduct the research it was elaborated the following question: What are the feelings experienced by women diagnosed with breast cancer? Thus, it aims to:

Discuss the feelings experienced by women diagnosed with breast cancer.

METHOD

This is an exploratory, descriptive, qualitative study, with 2 women diagnosed with breast cancer follow-up in a Philanthropic Hospital and reference in cancer treatment, located in the city of Teresina-PI.

For selection of the participants there were applied the following inclusion criteria: being a woman diagnosed with breast cancer, age greater than 18, regardless of the stage of evolution of the disease; be in detention regime at the time of participation in the study; in addition, be in physical and mental conditions to be submitted to interview and accept participate in the study after signing the Statement of Consent - informed consent. The study participants were identified by fictitious names to assure them of their anonymity.
The recommendation for women between 50 and 69 years old is to be made mammogram every two years, and clinical breast exam annually. This practice helps in showing for breast cancer to be diagnosed as early as possible, allowing better chances of survival and reduce mortality.7

The coverage of mammography is still low among Brazilian women. The authors say that the possible factors related to its realization we highlight the educational level, marital status, occupation and income of women as interfering in the prevalence of mammography.11

The previous hospital admissions related to breast cancer was reported by half of the interviewees and the presence of depression after a diagnosis of breast cancer was verbalized by four of the interviewees.

In what relates to depression in women with breast cancer, studies have shown that depression is common in people who have some clinical pathology. The symptoms are usually related to complications of the disease or the type of treatment that these people receive, or the new phase of adaptation to the disease that can threaten their life. The predominance of depressive manifestations in patients with breast cancer is discrepant in several studies vary according to the characteristics of the population. Depressed people express exacerbation of physical symptoms, functional loss, poor adherence to treatment, reduced self-care, worsening the quality of life and worse prognosis, increasing morbidity and mortality.12

It is emphasized that factors such as age, marital status, educational level, occupation, history of previous hospitalizations and even history of depression are extremely important data with regard to women with breast cancer as age, education level and occupation can interfere with the early diagnosis of this pathology, as well as a history of depression is a major factor because depressed people are more likely to develop diseases such as breast cancer, and it is of great value that professionals know to investigate the profile of these women, in order to implement strategies aimed at better prognosis and reduce mortality rates.

Feeling the woman with breast cancer diagnosis.

In this category there was presented the profile of the study participants, considering the variables: name, age, marital status, education, occupation, religion and time of diagnosis.

The age that most breast cancer occurs is between 40 and 69 years old. Other risk factors for development, such as reproductive life of women as early menarche, before age 11, nulliparity, late first pregnancy over 30 years of age, use of oral contraceptives, late menopause, and the use of hormonal therapy; however, with all of these risk factors age is still one of the most important factors, noting that the incidence of breast cancer increases rapidly to 50, and then it goes slower.9

Although breast cancer occurs more often in the perimenopausal stage, one cannot abandon the possibility to occur in women of reproductive age because this age is marked by the onset of menopause, when beginning the functional death of the female gonads and has its end after 65 years old. Concerning the poor prognosis of breast cancer in young women, there are several controversies. There is low index of suspicion of the disease, the difficulty during the examination of dense breasts and no realization of mammographic screening are the main factors that delay the diagnosis in these patients, which in turn worsens the prognosis, because studies show that the sooner the discovery of the cancer, the greater the chances of cure.9,10

RESULTS AND DISCUSSION

From the analysis of discourse the categories were named: 1. Recognizing the woman with breast cancer; 2. Revealing the feelings of women with breast cancer; and 3. Social network to support women with breast cancer diagnosis.

Knowing the woman with breast cancer

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The data production was conducted from March to April 2015, on time and previously scheduled time with the participants, in a location that ensured privacy, comfort and safety, which facilitated the procedure without generating losses for both parties. There was used a tape recorder and a semi-structured interview guide; the average duration of interviews was of 25 minutes; then fully transcribed and analyzed from the Analysis Technique of Content9. The analysis revealed three categories.

This study followed the ethical guidelines for research with human beings as recommended by the Ministry of Health Resolution 466/2012, and released to appear CAAE N° 4172215.0.0000.5210.

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Revealing the feelings of women with diagnostic of breast cancer

Cancer, since ancient times, is a great deal of negative meanings. The way people see the disease, compared with the past, changed a lot, but still it is clear that this disease involves several complications for the woman's life.
Carvalho CMS de, Amorim FCM, Silva RTS da et al.

There is the need to recognize the feelings that are experienced by women affected by breast cancer, as women when they discover that there is something wrong with their body, they experience various kinds of feelings and, when they find themselves facing the diagnosis of breast cancer, being a type of cancer that threatens the female identity, go to live with various feelings, such as anxiety, pain, suffering, sadness and guilt, and these feelings present also in the treatment phase.13

Such feelings are present in women with breast cancer lines, involved in this study, as follows testimonials:

Cancer is very sad, there is [...] sore, is very painful. She had feeling of joy? No. I cannot have this feeling of joy. Cancer is an evil, is a miserable evil. Cancer? It just goes down the person! It does not get you anywhere, only the cove! (Rosa).

In addition to the diagnosis of breast cancer have a major impact on the lives of women after the diagnosis, she is faced with several challenges, such as the wrong prognosis, the types of treatment that they will be submitted, the physical consequences that are generated from these treatments, changes in body image, the restrictions and the effects of treatment complementary to surgery

Everything changed physically in my life. Do not I look in the mirror way none! (Sunflower).

 [...] By removing the breast, I felt [...] terrified! (Cherry).

We can note that the consequences generated by treatment, such as changes in diet, weight loss, are factors that also modify the physical appearance of women and account for reasons of suffering and concern for women with breast cancer; we found that in lines described below:

The treatment I did not like not! I did not like because it has this business there's bound to make this chemical business, and has a great reaction. I lost weight too; I weighed more than sixty kilos. Look situation that I am! Forty-six kilograms. Only the chorus! I look at me and think I'm horrible! (Lily).

I do not want to eat, one cannot! [Silence]. Sometimes, so I drink water, I had to put my mouth with lemon to be able to have will. Everything is bad in the mouth of people (Lotus Flower).

The woman with breast cancer and the social support network

The social support network is one of the protective factors and recovery of the health of women with breast cancer, because it strengthens, making the same find these, reasons to face and cope with the disease, making it easier to be overcome. This social support shows positive effects on the immune system, making the strongest self-confidence, and enhances the ability of people to overcome the differences that happen in their lives; this support can come from family, friends, work, health services and from religion.13 In the records the following may be noted that it attaches great importance of social support in the lives of women affected by breast cancer. Such support has been shown in the accounts as a source of security and motivation to want to follow:

I have two daughters, only that one does not live here, only lives one with me, then only i, my husband and my daughter, the other lives in São Paulo. Only in three, but also the neighborhood, our helped me, helped me a lot too. I had all the support, were super nice, to me it seemed like I was just like a bird very strong that was taking a little longer to heal (Orchid).

Few at the moment she is not stupid with her own life. But I thought in my children, and I decided to fight. My children, my parents are from my hand giving me strength. Victory, Victory (Sunflower).

There are many people who helped me, in terms of there at home even has a bit help there (Lily).

My family, they give me a lot of strength, confidence, although we know that they so very worried, but gave me a lot of strength, my husband, my son, my brothers (Violet).

Social network is the structural or institutional support that the person receives; it may be the neighborhood, religion, health care, school. This support has an individual dimension, and may include social network members that are connected to the person. We can understand it as a web of relationships, making connections between individuals who have a social relationship, allowing support resources being transmitted through these bounds.14

He always accompanied me in my entire spouse, since the first visit until today he came with, in my chemo, in my routine visit and he always said don't worry that if thou be bald will stay the same (Gardenia). Always with great force, much faith to finish everything well, thanks be to God with a lot of support from my family, my children, my husband, family all join with me. I have a lot of support from everyone, especially my husband who is a person much comprehensive (Gardenia).

I was sad, I was low [Silence], but after much discussion with my friends, my friends, my sons [Silence] I climbed the astral again (Furniture).
Feelings of women diagnosed with breast cancer

Faith is categorized as one of social support networks, and it can be noted that it, for women, acts as one of the main ways to get cope with the disease. For the study participants faith in God is the reason for not falter, it is what gives strength during all times, being that promotes mental relief of suffering and cure all diseases.

I needed a lot of support even, very supportive and to getting there. I have received support other of my sister my mother, my children, my husband also (Harpsichord).

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I that neither the story, I will give my God! Calling all day, praying asking God to give everything right. We have to always have faith in Jesus Christ, because He is all ours. Without faith we cannot anything! Because God has prepared man to be able to take care of us, right, with his help. So my goal is that, when I went into the operation room, since when I knew I say: Lord ta in your hands, guides me by thy way, that the person who is doing the treatment do everything correct, but is this to here with faith in Jesus Christ who will finish everything as well. It is a victory by God (Daisy)

Thank God overcame; I am fighting still (Sunflower).

Thank God i know i comply. I had a couple of days with depression, almost let down, but God gave me strength. (Lily).

When we serve God, at that moment there, I saw myself, I thought, I am not alone! Because I serve a living God. Everything that happens in our life is his permission. I have always said so: not everyone, really the strength is not mine; it is God who is in me. Because he was with me, then everything happened as well, but never had fear, never had concern (Zantedeschia).

The statements express hope and a lot of trust in God, one can see the lines that faith helps these women to restart their lives, and to understand this new phase we are experiencing. With the hope placed in God the same time comes to see this in a positive way. So it is of great importance to understand the meaning of religion for these women in the process of becoming ill, because then you can create health promotion strategies aimed at reducing the suffering caused by this disease.

Thank God it was good for me, as far as possible, you know, all the Holy peace of God. I've always had faith that I was going to win, in a way, have another life we can live, I could live another life (Lily).

I'm going to win that's what I thought. I'm not giving up! I had faith and now I'm here. God will bless me. I'm quiet and with hope, with faith. I wish all people had the faith that I have. God is my faith (Violet).

Devotion facilitates coping moments of anguish, depression and fear, providing a sense of protection. The concern experienced by the woman receiving this diagnosis is able to change according to the characteristics of each person who acquires this disease.13 The diagnosis can bring the feeling of uncertainty about the prognosis, generating fear of death, but before that they can also arise hope and faith as methods that help to beat the disease. As can be reflected in the following lines:

You have to adhere to God, have faith, look to cure, to heal. Strength and faith. [Silence] Who wins! I'm already won long ago [Silence] in the name of Jesus I'm healed! God is so good you feel like eating, eat all the time. Have faith and fight, fight, fight, fight (Lotus Flower).

I never thought of giving up, no time, always with a lot of strength, a lot of faith to finish everything fine, thank God! (Gardenia).

I have faith in God, that he is good! I'm with faith that I'm going to be good (Cherry).

We must understand that the social support network is a way of treatment, or better, coping, which assists women in this difficult time. The family, religion, friends, help to understand the reasons for being alive, are greater than the side effects of cancer and treatment.

It is important to emphasize religion as one of the main ways, or why not say the main way of coping encountered by women during the disease process, as can be seen in the statements of the participants that they put their trust in God, which surpasses the confidence that they put at all, comes often to overcome the confidence that they deposit in doctors in surgical and pharmacological treatments are God force greater than that found in their family; however, even though the social support network, especially religion helps a lot in the recovery process of these women, there is some of the testimony that the same feels the need for family support, it was found that there are still gaps in the support networks, often for lack of understanding of what part of the same, and in some cases instead of women with cancer receive support, this is who has to support the family as seen in the next testimonials:

My daughter started crying, my granddaughter, I said: there's no use crying. Let's act and help me won't cure cancer with crying! (Rose).

And when I got home I got the news to my daughter she cried too much, and I was calm...
Feelings of women diagnosed with breast cancer

they are understood as the determinants of health / disease process.16
For me a changed, so did was improving more and still I find very good. I think very good support I have, I really admire the guys in my family, husband, my daughter and I think I performed on this side, I have nothing to complain about (Gardenia).

It is emphasized that it is extremely important that all family members are together during the disease process, and it is essential to woman that her family be incorporated during the process of treatment and recovery of the same, as this provides a great confidence not you feel alone right now. It is clear that clarifications about the pathology and the type of treatment to be followed favor health promotion, causing patients to seek greater independence to care for themselves and for carrying out other family-related activities.16

My daughters, but they are two very different from teenagers right? It's like that, they're in the house with me, everything, but it's not that thing, you know? The notion, therefore, only if you're really seeking, studying, or even living it because if you don't [Silence] and still have time we're living it and do not know the size of gravity (Lotus Flower).
The girls took, wanted [Silence] came girl go to the doctor there were [Silence] here that up I'd be late here [Silence] was riding on the bike and came away [Silence] and alone I go to doctor (Lotus Flower).

It is important that nurses incorporate family planning care to women affected by breast cancer, and focus attention on social relationships established between the family members of the patient in the process of adaptation to the new family life condition can be a strategy important care and will have good results, helping to minimize negative feelings generated after the diagnosis.16
Concerning the reports of participants, it can be seen that these require a broader assistance where their physical and psychological needs can be met, for breast cancer it is a disease that affects both physically and emotionally the woman, generating various feelings.

Nursing professionals can plan assistance, with goals in reducing difficulties faced by these women, where they are evaluated and assisted as a whole.17
Both physically and psychologically. Much difficulty because life transforms, you understand? Difficulty of work to take care of my children, [Silence] pretty hard, but God is greater (Sunflower).
Before the knowledge of feelings experienced by women affected by breast cancer, it was found that these require broader assistance where their needs can be met. The study also highlights the necessary interventions that health professionals can incorporate into their practice as an individual and targeted assistance, such as inclusion of family planning care to the customer to contribute to the social support strategy; promote global and humanized care emphasizing both the physical care as the biopsychosocial; clarification of the treatment of breast cancer as well as demystify the idea of what the disease is and to focus on guidance and information to health education strategies applied in the environment in which it operates.

Nursing care for women with mastectomies must be guided in prevention, control, order to promote body integrity, mind and spirit that path difficult.
diagnostic assessment, treatment, rehabilitation and care to family members. In this sense, it is the role of nursing to promote strategies that mitigate the negative effects of cancer, considering the woman in its various aspects, be they physical or emotional, ensuring reliably individualized and humane treatment. Thus, it is expected that this study will contribute to the care of nurses, especially about the importance of holistic care to women with mastectomies, in which all human aspects are considered.

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14. Pisoni AC, Kolankiewicz ACB, Scarton. Difficulties experienced by women undergoing treatment for breast cancer. J res fundam care cancer, considering the woman in its various aspects, be they physical or emotional, ensuring reliably individualized and humane treatment. Thus, it is expected that this study to women with mastectomies, in which all human aspects are considered.

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