



FEELINGS OF WOMEN WITH BREAST CANCER AFTER MASTECTOMY
SENTIMENTOS DE MULHERES COM CÂNCER DE MAMA APÓS MASTECTOMIA
SENTIMIENTOS DE MUJERES CON CÁNCER DE MAMA DESPUÉS DE LA MASTECTOMIA

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ABSTRACT

Objective: to know the feelings of women with breast cancer after a mastectomy. **Method:** this is a descriptive study with a qualitative approach, conducted with five women linked to the Family Health Units. Data were collected through a semi-structured interview and analyzed using the Content Analysis technique in the Categorical Analysis modality. **Results:** two categories have been defined << Experiencing the diagnosis of breast cancer: knowledge and feminine resilience >> and << Unveiling the feelings of women against mastectomy >>. **Conclusion:** it has been shown that the feelings experienced by the participants at first are of surprise and despair when faced with the disease, and when faced with mastectomy as a form of treatment, arising sadness, denial, depression, anxiety and finally acceptance. **Descriptors:** Breast Neoplasms; Mastectomy; Emotions; Sexuality.

RESUMO

Objetivo: conhecer os sentimentos de mulheres com câncer de mama após mastectomia. **Método:** estudo descritivo, com abordagem qualitativa, conduzido junto a cinco mulheres vinculadas às Unidades de Saúde da Família. Os dados foram coletados mediante entrevista semiestruturada e analisados por meio da técnica de Análise de conteúdo na modalidade Análise Categorical. **Resultados:** foram definidas duas categorias << Vivenciando o diagnóstico de câncer de mama: saberes e resiliência feminina >> e << Desvelando os sentimentos de mulheres perante a mastectomia >>. **Conclusão:** o estudo demonstrou que os sentimentos vivenciados pelas participantes a princípio são de surpresa e de desespero diante da doença, e quando se deparam com a mastectomia como forma de tratamento, surgem tristeza, negação, depressão, ansiedade e, por fim, a aceitação. **Descritores:** Câncer de Mama; Mastectomia; Sentimentos; Sexualidade.

RESUMEN

Objetivo: conocer los sentimientos de mujeres con cáncer de mama después de una mastectomia. **Método:** estudio descriptivo con enfoque cualitativo, conducido junto a cinco mujeres vinculadas a las Unidades de Salud de la Familia. Los datos fueron recogidos mediante entrevista semi-estructurada y analizados por medio de la técnica de Análisis de contenido en la modalidad Análisis Categorical. **Resultados:** fueron definidas dos categorías << Viviendo el diagnóstico de cáncer de mama: saberes y resiliencia femenina >> y << Desvelando los sentimientos de mujeres frente a la mastectomia >>. **Conclusión:** demostró que los sentimientos vividos por las participantes al principio son de sorpresa y de desespero frente a la enfermedad, y cuando se deparan con la mastectomia como forma de tratamiento, surgen tristeza, negación, depresión, ansiedad y por fin la aceptación. **Descriptor:** Cáncer de Mama; Mastectomía; Sentimientos; Sexualidad.

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INTRODUCTION

Breast cancer is a disease from the multiplication of abnormal cells in the breast tissue, forming a tumor with a potential to invade other organs. It is presented in multiple clinical and morphological forms.¹ Considered the most common type of neoplasm among Brazilian and worldwide women, it accounts for about 25.2% of new cases of cancer each year and the estimating incidence for the 2016 biennium - 2017 is 58,000 cases. Mortality from breast cancer shows an upward curve, being the fifth leading cause of cancer death.²

A tropism is highlighted by the women, most of them 50 years old or older. However, in the last few decades, there has been an increase in the incidence of younger age groups worldwide.³ Age is one of the main risk factors for development of breast cancer. There are other considerable, such as the lifestyle, environmental and genetic factors.

The experience with breast cancer involves the passage through three overlapping stages: the receipt of the diagnosis, the accomplishment of a long and aggressive treatment and the acceptance of a body marked by a new image.⁴

The discovery of cancer significantly changes women's lives. Many feelings emerge from the suffering they experience, such as despair, anxiety, sadness, panic, anguish, crying, fear and disturbances in self-concept, especially self-esteem and body image.⁵

Several reactions and feelings are observed throughout the treatment, compromising the physical, emotional and functional well-being of the woman.⁶ Therapeutic modalities used in breast cancer intervention include conservative surgery, mastectomy, chemotherapy, radiation therapy and hormone therapy. However, the general clinical conditions and tumor characteristics are essential in choosing the appropriate treatment.⁷

It should be noted that mastectomy is most often unavoidable in advanced stages of the disease requiring the complete removal of the mammary gland, with the aim of reducing relapse and improving life expectancy.⁸ Mastectomy, as mutilation, implies other emotional, social and especially psychological transformations. The acceptance of a body culturally considered as natural, undergoes a process of difficult adaptation. She tries to feel "different" leaving her distressed and vulnerable, with feelings of rejection and insecurity that interfere with her personal relationships and self-perception.⁷

The impact that illness causes is linked to the culturally constructed symbology around the social representations of the feminine, the construction of a sculptural body mainly having the breasts as an appreciated part of the masculine universe, in some contexts, seems like a desired standard and when not achieved, it can lead to frustration.⁹

In a study aimed at describing women's feelings about the disease and discussing the changes that occurred after the diagnosis of breast cancer, performed with 13 women with mastectomy in a gynecology outpatient clinic of a public hospital in Teresina, Brazil, there was a woman's frightened view of the disease, in which physical perception leads to "negative feelings" the lack of "a piece of the body" generating a sense of incompleteness, feelings of frustration, discouragement, shame, devaluation of body image, non-acceptance of the current condition and changes in sexuality.¹⁰

From these considerations, it is plausible to consider the need for a holistic view by the professionals involved in the process of caring for women with breast cancer. It is also important to highlight the importance of this approach in nursing care practices, in which the feelings and experiences suffered by these women can be contemplated and used as references for the construction of a treatment that is not limited to a biologist view. In this context, the following concerns emerged: how do women with breast cancer after mastectomy reveal their feelings?

OBJECTIVE

- To know the feelings of women with breast cancer after a mastectomy.

METHOD

This is descriptive study with a qualitative approach, conducted with women diagnosed with breast cancer mastectomy linked to the Family Health Units of the Municipality of Ibiassucê, Bahia, Brazil. The eligibility criteria for inclusion in the study were women submitted to mastectomy, over 18 years old and who agreed to participate in the study signing the Free and Informed Consent Term (TCLE). There were 05 women participating and interviews were conducted at home from September to October 2015.

The data were produced through a semi-structured interview script. The interviews were recorded and transcribed in full, as well as the participants were guaranteed the secrecy of the information and access to the results obtained. Data analysis was performed

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using the Bardin method¹¹. At this stage, it was sought to preserve the ideas of the participants as much as possible to maintain greater trust in the study.

The ethical aspects were preserved during the construction of this study, which is a branch of the project entitled: "Feelings and Perceptions of Caregivers and Caregivers Involved in the Implementation of Home Hospitalization", approved by the Ethics and Research Committee (CEP) of State University of Bahia (UNEB), under number 558,697. Seeking to ensure anonymity, they were designated by Arabic numerals from 01 to 05 representing the total of interviewees.

RESULTS AND DISCUSSION

Foram definidas duas categorias de análise, a saber: Categoria 01 - Vivenciando o diagnóstico de câncer de mama: saberes e resiliência feminina, Categoria 02 - Desvelando os sentimentos de mulheres frente à mastectomia.

Among the participants, there were 5 (100%) over 30 years old, 4 (80%) declaring as brown and white and 1 (20%) were yellow, all of whom were married. Regarding the religion, 3 (60%) were Catholic and 2 (40%) were Protestant. Regarding the education, 2 (40%) had completed high school, 2 (40%) completed elementary education and 1 (20%) could read and write. All 5 (100%) were retired and had home care, 4 (80%) were residents of the urban area and 1 (20%) of the rural area.

Two categories of analysis were defined: Category 01 - Experiencing the diagnosis of breast cancer: knowledge and feminine resilience, Category 02 - Unveiling the feelings of women in the face of mastectomy.

• Category 1. Experiencing the diagnosis of breast cancer: knowledge and feminine resilience

According to the interviews, there was a mixture of feelings and emotions expressed by women in the diagnosis, as well as a strong link of religion as a support tool for coping with the suffering that the experience of breast cancer causes, according to the speeches below:

[...] but I did not think it could happen to me, but I was never afraid, thank God, right? I was a person like that, that I fought, for something that we have to fight, but loving my life. And that God was never going to let happen to anyone, but I'm not afraid and anything to me of life is profit (Participant 02).

When I saw the result it was, I was, well the world ended up for me at that time, I went

home. Because I picked it up my sister's house. I arrived here crying and I told my husband that I had this disease. Then my son arrives, the eldest, there already began to cry "my mother no, why my mother God?" Then I also created strength there and finished (Participant 03)

Studies have shown that, when receiving the diagnosis of breast cancer, the psychological reactions of fear, denial, and sadness, usually demonstrated by crying, despair and mental reactions such as anxiety and depression are common.^{12,13,14} However, all participants in this research have used an optimistic discourse in coping with the disease through belief in God. Religious discourse is culturally used in life-threatening situations, in cases of breast cancer, it is capable of providing emotional balance, hope and certainty in the face of healing.^{15,16}

Regarding the clarification about the disease, it influences at the time of diagnosis, treatment and prognosis. A study of 58 women in the city of Aracaju, Brazil, with a descriptive-exploratory character, found that only 34 (58%) had some type of information about breast cancer.¹⁷

It was observed that the participants presented an incipient discourse of knowledge about the disease when asked about what they understood about breast cancer when receiving the diagnosis.

For me it was a disease, I imagine so I was worried at first with the fall of the hair when the hair would fall and that for me had no cure. I thought I was going to be weak, thin, ending up until I got to death (Participant 03).

I did not know anything. It was difficult at the time. I knew what the disease was because a lot of people [...] had operated, but other things I do not know, no. I knew more or less what I had to take, and so, so did Mom. Taking out the breast, it is not easy our breast (Participant 05).

A cross-sectional study carried out with 393 women aged 40-69 years old using Family Health Units in the city of Dourados, Brazil, pointed out that 86.5% received some information about breast cancer. However, the knowledge was concentrated especially in the self-examination of the breasts, with the risk factors as well as the therapeutic modalities little known by them,⁸ differently from another Brazilian study that punctuates the media as one of the main sources of information, followed by lectures.¹⁹

It should be pointed out that the actions of health professionals, especially nursing

professionals, are essential for the diagnosis, coping and treatment of the disease, aiming to propose strategies based on Nursing Care Systematization, highlighting the reception and qualified listening, proposing shared consultations, reducing stressors, and contributing to overcoming the feelings arising from the cancer context, sharing all pertinent information about the disease in proposing to improve the physical and emotional well-being of the woman.

Thus, a feeling of nihilism and later the search for support represented by religiosity was perceived in the analysis of the initial speeches, which can be seen as a reference of resilience.

• Unveiling the feelings of women in the face of mastectomy

When the woman loses her breast, she experiences feelings of sadness, strangeness, and concern about the commitment to self-image.²⁰ The acceptance of this new image, now differentiated by surgery, is not only experienced by the woman, but by her family and her environment, when they have a partner, the other's look is decisive for this process, the more natural the look, the more she will feel welcomed, reducing the inconvenient feelings.

It should be noted that a Brazilian descriptive and exploratory study carried out with 6 women with a mastectomy with the purpose of identifying the time of acceptance of the surgery and the feelings of these women, found that most of them reported fear and insecurity throughout the treatment, besides shame, embarrassment, and isolation.²¹

It can be observed in the transcriptions below that the experience of having a mastectomy can lead to ambivalent feelings: either rejection or acceptance.

Then at the time, at first she told me that if it was the cancer, she had to be removed, then when I find out even though it was there I thought, oh my God, how will I be without the breast, I wondered what it would be like. But after it was removed I accepted it good (Participant 03)

When I knew, no, I did not want to at the time, before I did not know what it was after my cousin confessed me. But I did not want to leave, I did not want to, then my nephew convinced me, he explained to me, because nobody was forced. I did not want to take it out, you think it's easy to stay without the breast, it's difficult, it is difficult (Participant 05).

Although studies²²⁻⁴ affirm that the suffering of the loss of the breast associated to the low self-esteem, not feeling as a

woman and the absence of meaning in the life as a consequence of the mutilation, contained in women with a mastectomy, the participants of this study demonstrated acceptance.

Normal, my head is open if it was a while ago it would move a lot more, but when I discovered, it did not shake me. Many women were shaken, but I was not. A lot of faith in God has helped me (Participant 01)
I feel the same person, the kind people because the age is touching so we are getting, right, but I do not feel different, thank God (Participant 02).

It is pointed out that the age factor is significant in accepting the procedure.²⁵ Young women express greater concerns regarding self-image, sexuality, femininity, "being a mother" and "being a woman"²⁶, concerns not very evident in the most mature women²⁷.

Changes of sexuality is common in women who performed breast removal as previously mentioned. However, only one woman in this group reported changes concerning sexuality:

I had and it was a lot. We never have, no more anxiety, that thing, anxiety. I see myself different [...] (Participant 05).

After surgery, some women report a feeling of incompleteness due to loss of the breast, an organ of the female body loaded with symbologies. Many of them accept it, while others treat the situation as traumatic that may interfere with the acceptance of the new image.^{28,29}

[...] Even after the surgery you can not wear anything you have only a filler bra, but no one ever noticed you always hunted ways not to show that you were without a breast. So no one has ever seen me with one breast, to feel good (Participant 03).

These changes in the life of women imply the need for a readaptation and a personal reorganization.³⁰ Thus, it is imperative that those who live with these women be available to take seriously the role of supporting and understanding them in the various feelings manifested.

CONCLUSION

The study demonstrated that the feelings experienced by the participants at first are surprising and despair in the face of illness, and when faced with mastectomy, as a form of treatment, there are sadness, denial, depression, anxiety and, finally, acceptance.

In this sense, it is necessary the integral action of the health professionals, in what concerns to a holistic and quality assistance to these women, encouraging the creation of public policies of health that provide a quality attention to the women who live or lived with

the breast cancer, emphasizing the specificities related to the process of illness, adaptation and the reconstruction trajectory of their lives.

The study presented a small number of women with mastectomy in the researched locus as a limitation. It is believed that a greater number of participants would allow a more comprehensive knowledge of the feelings they experienced when facing cancer.

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