

BODY IMAGE OF PATENTES WHO UNDERWENT **MESTECTOMY**

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Introduction: The oncological breast disease is a reality existent in medical practice, leaving profound marks on the woman, as well as on her family and social network. Pain and death are often associated with this disease; thereby it is faced by the great number of women affected as a life event placed in a determined time which is a generator of anguish and suffering (Mendes,1994). Breast cancer is the greatest cause of death among malign neoplasia in Brazil (INCA,2002). Each year, approximately 22% of the new cases of cancer in Brazilian women are mammary. Its incidence has progressively increased within the last years, in both developed and developing countries. The number of new cases expected for the year of 2010 in Brazil is 49.240 (INCA,2008). The therapy used for breast cancer depends on the extension of the disease and its characteristics. The relationship between body image and sexuality has been studied previously (Kornblith,2003), and a change in self body image is observed more frequently in cases which require mastectomy than in those that allow a more conservative surgical approach (Schover,1995) , although there is, from the patients, a greater fear of disease recurrence when part of the breast is preserved (Kraus,1999). These surgeries, specially the mastectomy, lead to transformations in the lives of the women treated, such as changes in self-image, self-esteem and compromising of the sexuality and maternity. When thinking of mammary reconstruction, instruments of body image evaluation

become of extreme importance on these patients, not only to specify the complaint of the patient and evaluate the outcome of the surgical procedure, but also to detect possible problems with self body image and indicate the specific treatment for each case (Sampaio,2006).

Objective: To evaluate the self body image of women who underwent mastectomy due to breast cancer.

Methods: This is a transversal observational study. Women ranging from 18 to 65 years of age were included, who underwent mastectomy for breast cancer up to one year earlier, subjected (reconstruction group) or not (mastectomy group) to a mammary reconstruction procedure, and women without diagnosis or history of breast cancer (control group). The casuistry was formed by 41 women who underwent mastectomy due to breast cancer (mastectomy and reconstruction groups) and by a control group of 25 women with the same social and demographic characteristics, which were not diagnosed with mammary neoplasia, but were patients of the Mastology ambulatories of the Samuel Libânio Clinical Hospital (Universidade do Vale do Sapucaí – UNIVÁS). The interviews were performed by the researchers, after reading the letter of information and consent, in a private room. A protocol was filled by the researcher in order to collect the demographic and social data. To evaluate the self body image, the Brazilian version of the *Body Dysmorphic Disorder Examination* (BDDE) was used (Alagoz,2003). For data analysis, descriptive statistics with measurements of median and average were used for the numerical values, and proportion (percentage) for the categorical variables. The test of Kruskal-Wallis was used to compare the three independent groups, with non-parametric behavior. The design of this study was evaluated and approved

by the Ethics and Research Committee of the UNIVAS, under the protocol #1024/08.

Results: There was no statistical difference in demographic and social characteristics between the groups. The age median of the control group was 48 years, as well as for the mastectomy group, and 47 years for the reconstruction group. The median of body mass index was 23.9kg/m² for the control group; 23.9kg/m² for the mastectomy group, and 25.3Kg/m² for the reconstruction group. The prevalent ethnicity was white, with 70.83% in the control group, 90.42% in the mastectomy group, and 78.94% in the reconstruction group. When comparing the use of birth control pills between the groups, a statistical significance was observed ($p=0.0276$; $\chi^2=7.181$). In the mastectomy group 95.45% of the patients did not use such method, and 73.68% of the reconstruction group did not use it, whereas 62.5% of the control group did not use the birth control pills. According to literature, this is yet a controversial issue, with a wide range of results, dependent on the subgroups of the women researched, time of use of estrogen, its concentration and the age at which the use was initiated (Gaffield,2009). 58.53% of patients who underwent mastectomy had not ever breastfed, while 83.33% of the patients of the control group had already done it ($p=0.04$). These data are concordant to literature (Collaborative Group on Hormonal Factors in Breast Cancer,2002). According to a study performed the the Health Services of California, the incidence of breast cancer in smoking women is 30% greater than in women that had never smoked. The research lasted 4 years and involved over 116 thousand women. The women who present the greater risk of developing the disease are the ones who began smoking before the age of 20 years and those who smoke at least

five years before the first pregnancy (Inca,2010). Differently from the data observed in literature, the present study showed that 58.33% of the patients from the control group had smoked tobacco, while only 26.82% of the patients who were diagnosed with breast cancer did so, with statistical significance in the study ($p=0,01$). Literature about the results of change in quality of life of patients who underwent surgical treatment of breast cancer is very controversial, although previous studies had demonstrated that patients subjected to mastectomy tend to present a worse self body image than the ones subjected to a conservative surgical treatment (Warm,2008). Other studies also demonstrated the positive impact of mammary reconstruction over the quality of life and self-esteem of patients who underwent mastectomy as well as on patients who underwent conservative surgical approaches (Veiga,2010). In the present study, when using the BDDE, a statistical difference was not observed between the groups ($p=0.826$). However, the sample size of this study does not allow to conclude that the mastectomy (with or without mammary reconstruction) does not have an impact over the self body image of the patients. Future studies, with greater casuistries, are necessary in order to evaluate the real influence of mastectomy on the self body image of patients with breast cancer.

Conclusion: In the studied casuistry, no statistical significance was observed between patients subjected to mastectomy (with or without mammary reconstruction), when compared to women who were not diagnosed with the disease and had the same social and demographic characteristics.

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