

# More women choosing preventive double mastectomies

October 23 2009, By Laura Casey

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When health care worker Kathy Hajopoulos decided in 2006 to remove both her breasts when she was diagnosed with cancer in one, she became part of a growing class of women making that same decision.

Hajopoulos, 44, had what doctors call a contralateral prophylactic [mastectomy](#), or, in laymen's terms, a preventive mastectomy in a breast not yet determined to have cancer. She did it, she says, because she was afraid that she may get cancer in the second breast after having removed just one.

"I tested positive for the BRCA1 gene (a gene that is related to a significant risk of breast cancer)," she says. "I had an 85 percent chance of getting breast cancer, which meant I had a higher risk of the cancer coming back in the other breast."

The decision to remove both breasts, she says, was easier than handling the emotions of simply having cancer. And advances in [reconstructive surgery](#) -- she chose to have a procedure better done on two breasts at once -- helped push the decision.

Several studies in the last few years have pointed to this phenomenon -- women are choosing to have the more aggressive treatment of double mastectomy when they are diagnosed with breast cancer.

"Research has shown there has been a 5 to 10 percent increase in a five-year period," says Dr. Allison Kurian, an oncologist and assistant

professor of medicine at Stanford University who is also the associate director of the Stanford cancer genetics program. "A 10 percent growth over a five-year period is pretty significant."

The studies, most of which are penned by oncologist Todd M. Tuttle for the Journal of Oncology, suggest three theories for the growth in preventive double mastectomy.

First, magnetic resonance imaging (MRI) is being used more and more to look at the breast. MRI, Kurian says, has more of a chance than other types of breast exams to find possible problems that may need to be investigated further.

"That often requires more biopsies and increases anxiety," she says.

Second, genetic testing is becoming more common in women diagnosed with breast cancer. Tests that show a high-risk of getting cancer prompt many women, as in Hajopoulos' case, to choose a contralateral prophylactic mastectomy.

Finally, Kurian says, there have been advances in reconstructive surgery that make it easier for women to make that very difficult decision.

Kurian warns, however, that there is no definitive answer as to why women are choosing preventive mastectomy.

"Further study is needed to understand if this raise in mastectomy is going to yield better outcomes for patients in terms of survival and quality of life," she says.

Dr. Laura Esserman, professor of radiology and director of the Carol Franc Buck Breast Care Center at the University of California, San Francisco, says she thinks many women can't get over the idea that they

have breast cancer, and they are going to worry about it coming back even after treatment unless they remove their breasts.

"They don't want to worry about it, they just want it out of their lives and want to be done with it," she says.

Esserman stresses that breast conservation is still a good option for many [women](#) and only a small minority cannot have a lumpectomy.

Still, for breast cancer survivors like Donna St. Jean Conti of Morgan Hill, Calif., a double mastectomy was the only way to go, even though there was a lump in only one breast.

St. Jean Conti was a 34-year-old mother of two young children when she found a lump in her breast during a routine breast self-examination she did in the shower.

She removed the breast with a lump in it and about a year later did genetic testing to determine her risk for another bout in her other breast.

The test showed she was positive for the BRCA2 gene, which also carries a high risk for [breast cancer](#).

Unsure if she should have a contralateral prophylactic mastectomy, she talked with her surgeon about it.

"He literally got in my face and said 'If you were my wife, you'd be on my table today,'" St. Jean Conti says.

So she scheduled the mastectomy.

Nearly nine years later, St. Jean Conti is happy with her decision. Her reconstructive surgery has made her breasts look normal in clothing and

relatively normal nude. She doesn't have any feeling in them, which she misses, but she's happy to report being declared cancer free for eight years.

"I acknowledge it is scary and no one wants to cut off their breasts," she says, "but it's better than the alternative. I am just so thankful to be alive and be given the chance to fight."

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