

Most breast cancer patients who had healthy breast removed at peace with decision

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More women with cancer in one breast are opting to have both breasts removed to reduce their risk of future cancer. New research shows that in the long term, most have no regrets. Mayo Clinic surveyed hundreds of women with breast cancer who had double mastectomies between 1960 and 1993 and found that nearly all would make the same choice again. The findings are published in the journal *Annals of Surgical*



Oncology.

The study made a surprising finding: While most women were satisfied with their decision whether they followed it with <u>breast</u> reconstruction or not, patients who decided against reconstructive surgery were likelier to say they would choose to have both breasts removed again. In the reconstructive surgery group, women who needed additional operations due to complications, breast implant-related issues or other reasons were likelier to regret their prophylactic mastectomy, though overall, most women with breast reconstructions were satisfied with their choices.

"I think what this study does is adds some literature to the hands of the people counseling patients to say, 'Whatever decision you make, you're very likely to be happy with that in the long run, so listen to yourself, and make the decision that's best for you,'" says lead author Judy Boughey, M.D., a Mayo breast surgeon.

Most of those who skipped reconstruction said they felt the same about themselves and their femininity in the long run as they did before their mastectomies and would make the same choices today. Many of those with reconstructive surgery also felt the same about themselves as they did before their mastectomies, but some reported more satisfaction with their appearance, higher self-esteem and feeling more feminine.

Mayo physicians are studying the personal consequences of contralateral prophylactic mastectomies to help future patients. Women with <u>breast</u> <u>cancer</u> have many decisions to make about their treatment, including the degree of surgery to have. Options include lumpectomy, followed by radiation; having one or both breasts removed; and if the choice is mastectomy, whether to have breast reconstruction.

While double mastectomy substantially reduces the risk of cancer developing in the other breast, past studies have found that many women



who pursued it didn't actually have a high risk of cancer in their other breast. There is mixed data on whether <u>breast cancer patients</u> with a double mastectomy live longer than those who do not choose that option, though most studies show they do not. Physician advice and a desire for peace of mind tend to play key roles in mastectomy patients' decision, the Mayo researchers noted.

"When we're counseling women considering having the other breast removed, it's a very complex and multilayered discussion," Dr. Boughey says. "Obviously the risk of developing a new cancer in that breast has to be part of that discussion, but the literature shows that the risk for the other breast is really not that high, and that from a medical standpoint we don't need to recommend that approach."

"But it's also important to note that much of what drives removal of the other breast is patient anxiety, which feeds into patient quality of life, and it also important to consider breast symmetry from a cosmetic standpoint," Dr. Boughey adds.

In the new study, Mayo researchers surveyed 621 women who had cancer in one breast and had family histories of breast cancer and chose double mastectomies. At two time points—roughly 10 years and 20 years after their mastectomies—they were asked about their quality of life and their satisfaction with their decision. The first questionnaire was returned by 583 women. The results:

*A decade later, 83 percent were satisfied with their decision to have double mastectomies, and 84 percent said they would make the same choice again. Roughly two-thirds had breast reconstruction, and one-third did not.

• Seventy-three percent said they would make the same decision about whether to have breast reconstruction surgery or not.



- Those who chose plastic surgery to reconstruct their breasts tended to be married and younger. Their mean age was 47, compared to 53 for those who did not have the plastic surgery. Eighty-five percent of those who chose breast reconstruction were married, compared to 78 percent who did not have reconstructive surgery.
- Thirty-nine percent of those who had reconstruction needed an unplanned reoperation, and those with reoperations were likelier to regret the decision to have a <u>double mastectomy</u>. The follow-up surgeries were needed for a variety of reasons, including post-mastectomy complications and implant-related issues.

Ninety-two percent of the <u>women</u> who responded to the second questionnaire, given to them roughly 20 years after their mastectomies, said they were still satisfied with their choice.

Provided by Mayo Clinic

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