

# Breast cancer patients benefit physically from mental health support

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The words no one wants to hear: "You have breast cancer." Unfortunately, close to 300,000 American women are expected to receive that diagnosis each year. For many, their early reactions are fear, anger, and denial. Those feelings may escalate. Dealing with the psychological fallout of such a diagnosis can be crucial to patients' physical recovery. As they weigh their medical options, patients also should consider their emotional and mental options.

"Breast cancer is more than skin deep. It's not just about your external [body image](#). It's not just about [secondary sexual characteristics](#). It's not just about breasts. It's more than that. The psyche and the physical body are interconnected, so you really can't address one and not the other," said Dr. Georita Frierson, associate professor of psychology and director of Clinical Training for the Clinical Psychology Ph.D. Program at Rowan University, Glassboro, New Jersey.

Prior to joining the Rowan faculty last year, Frierson was an associate professor and director of Clinical Training in the Clinical Psychology Ph.D. Program at Howard University and an assistant professor at Southern Methodist University. She also served as an adjunct at the Miriam Hospital/Alpert Medical School at Brown University and as executive director of the Diversity Programs and Research Initiatives at the Cooper Institute (Dallas).

She believes [breast cancer](#) patients should consider the following, based on research she and others have conducted, as they fight their illness:

1. Severe and acute stress may occur at the time of cancer diagnosis.
2. Physical activity can improve mood and other outcomes in breast cancer patients following diagnosis.
3. The acute distress accompanying diagnosis can lead to lower quality of life for cancer patients.
4. Patients with poorer coping at time of diagnosis may report lower meaning in life in the year following the end of cancer treatments.
5. Cancer treatments have the potential to impact intimate relationships.
6. Patients may have body image distress following breast cancer surgeries.
7. Treatment or recovery can disrupt one's employment, including job loss for some.
8. Distressed individuals can have appetite disturbances and/or dietary changes.
9. The taste of foods may change with stress.
10. Disturbances of taste or eating habits (e.g., food restriction or taste aversions from chemotherapy) can occur in breast cancer patients.
11. Disturbed sleep can occur in breast cancer patients, too.

Frierson is a member of the American Psychological Association and Division 38 (Health Psychology), Society of Behavioral Medicine and American College of Sports Medicine.

She has conducted a range of research related to breast cancer and other medical topics. The Discovery Foundation funded her pilot study of the psychosocial and behavioral outcomes in triple negative [breast cancer patients](#) during the first year of treatment. The National Institutes of Health, United States Department of Education, Cancer Prevention and Research Institute of Texas and Department of Defense, among other

organizations, funded her research on topics that include biobehavioral intervention, diversity, behavior strategies and exercise intervention.

She has been published in peer-reviewed journals on topics that include evidence-based treatment for cancer patients, emotional and psychosocial consequences of cancer, and physical activity among women treated for breast cancer. She has contributed chapters to books on racial/ethnic minority health (Encyclopedia of Behavioral Medicine) and on other health-related topics. She has presented extensively across the country on breast cancer, minority health and similar subjects. Among numerous awards, she received an honor from the City of Dallas for her [breast cancer research](#).

Provided by Rowan University

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