

Patients often mispredict well-being after mastectomy

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(HealthDay)—Adult women undergoing mastectomy underestimate

future well-being after mastectomy alone and overestimate well-being after reconstruction, according to a study published online Feb. 7 in *JAMA Surgery*.

Clara Nan-hi Lee, M.D., M.P.P., from The Ohio State University in Columbus, and colleagues conducted a prospective cohort survey study involving adult women undergoing mastectomy for stage 1, 2, or 3 invasive ductal or lobular breast cancer; [ductal carcinoma](#) in situ; or prophylaxis. Data were included for a final cohort of 96 women: 42 had had [reconstruction](#) and 54 had not had reconstruction.

The researchers found that there was underestimation of future well-being in all domains for patients having mastectomy without reconstruction. Significant differences were seen for quality of life scores (mean predicted versus actual: 68 versus 74) and satisfaction with breasts-clothed (mean predicted versus actual: 2.4 versus 2.8). Future well-being was overestimated in all but one domain for patients undergoing mastectomy with reconstruction. Significant differences were seen for satisfaction with breasts-unclothed (mean predicted versus actual: 3.1 versus 2.6), sexual attractiveness-clothed (mean predicted versus actual: 3.7 versus 3.3), and sexual attractiveness-unclothed (mean predicted versus actual: 3.3 versus 2.3). More numbness than predicted was experienced by both groups. Greater regret was noted for patients who were less happy or had greater pain than predicted.

"Decision support for [breast reconstruction](#) should address expectations about well-being," the authors write.

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