

High levels of satisfaction and low levels of regret after gender-affirming mastectomy

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Gender-affirming mastectomies for transmasculine and nonbinary individuals can be life changing. Recent research from the University of Michigan finds that in addition to changing lives, most patients are

highly satisfied with their decision to undergo surgery long-term.

A recent study published in *JAMA Surgery* aimed to determine how [patients](#) who received a gender-affirming [mastectomy](#) at a single major health system felt about their decision years afterward.

The [research](#) showed an overwhelmingly positive response—the median [satisfaction](#) score was a 5 on a 5-point scale, the highest possible rating. The median decision regret score was 0.0 on a 100-point scale where lower scores mean less regret.

In another indirect measure of satisfaction, none of the patients in the study pursued a reversal of their mastectomy.

The study's authors analyzed records for 235 patients and sent a survey to all of them; 139 responded. The 139 participants were between two to 20 years out from their procedure and the median age was 27 years old.

The participants were asked a series of questions that have been validated for their ability to measure satisfaction and regret in other medical and surgical conditions.

"We wanted to make sure that our questions would produce quality data that could be compared to other conditions when looking at satisfaction and regret levels for gender-affirming care," said Megan Lane, MD, a plastic [surgery](#) resident at Michigan Medicine and co-lead author of the paper.

Due to low dissatisfaction numbers, it was not possible to look at any for or factors related to dissatisfaction with gender-affirming mastectomy. Lane and her co-authors say new survey tools are needed to explore this more thoroughly.

More information: Lauren Bruce et al, Long-Term Regret and Satisfaction With Decision Following Gender-Affirming Mastectomy, *JAMA Surgery* (2023). [DOI: 10.1001/jamasurg.2023.3352](https://doi.org/10.1001/jamasurg.2023.3352)

Provided by University of Michigan

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