

Quality of Life Outcomes in Patients with Breast Cancer in an Amazon City: The Impact of Breast Reconstruction

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Abstract

Introduction: Malignant neoplasms are considered a public health problem due to the high rates of morbidity and mortality presented worldwide, particularly those associated with breast cancer.

Methods: This is a qualitative exploratory study that included 32 volunteers affected by breast cancer who were followed up at a public Brazilian hospital in Macapá city. The volunteers were divided into two groups: group 1 (n=16) consisting of mastectomized volunteers and group 2 (n=16) by mastectomized volunteers with breast reconstruction; both groups were evaluated using the SF-36 (Medical Outcomes Study 36).

Results: The results showed that mastectomized women without breast reconstruction presented a very low level of quality of life and those who did breast reconstruction presented better mean scores in all aspects evaluated when compared to the group without reconstruction (except in the social aspect, $p > 0.05$). However, the

Variables	General	Reconstruction		p
		No (n=16)	Yes (n=16)	
Age	51.81 ± 10.24	53.25 ± 13.1	50.38 ± 6.39	

The groups do not show significant difference in the other variables showed in this table.

In Table 2 we show the descriptive values of the Quality of Life domains of SF-36

The percentages for the assessed domains vary between 21.77% and 75.75%, with Physical Aspect being the most compromised domain among the patients, with and without breast reconstruction. The domains that showed the lowest scores were: Physical Aspect (21.77%), Emotional Aspect (35.48%) and Pain (49.61%) regardless of breast reconstruction, while the domains that showed the best scores were: Mental Health (75.75%), Social Aspect (71.77%) and Vitality (62.81%).

In Table 3 we show the descriptive values of the Quality of Life domains of SF-36 according to the reconstruction group. We observed in Table 3 that there is significant difference between the reconstruction groups in the Mental Health domain. The group with reconstruction shows significantly higher score in this domain when compared to the group without reconstruction.

Domain	n	Mean	sd	Median	Minimum	Maximum
Functional Capacity	31	56.61	28.06	65	5	100
Physical Aspect	31	21.77	34	0	0	100
Pain	31	49.61	24.99	51	0	100
General Health Status	31	62.29	26.29	67	10	97
Vitality	32	62.81	20.55	67.5	20	100
Social Aspect	31	71.77	23.71	75	25	100
Emotional Aspect	31	35.48	37.45	33.33	0	100
Mental Health	32	75.75	24.15	80	0	100

Table 2 Mean, standard deviation, median, minimum and maximum of the SF36 domains

Domain	Reconstruction	n	Mean	sd	Median	Minimum	Maximum	p*
Functional Capacity	No	16	54.38	26.07	65	5	90	0.404
	Yes	15	59	30.78	75	10	100	
Physical Aspect	No	16	18.75	26.61	0	0	75	0.910
	Yes	15	25	41.19	0	0	100	
Pain	No	16	45.94	25.37	41	0	100	0.242
	Yes	15	53.53	24.83	62	10	100	
General Health Status	No	16	56.19	21.14	56	17	92	0.096
	Yes	15	68.8	30.24	77	10	97	
Vitality	No	16	60	16.73	65	25	85	0.289
	Yes	16	65.63	24.01	72.5	20	100	
Social Aspect	No	16	73.44	23.66	81.25	25	100	0.628
	Yes	15	70	24.46	75	25	100	
Emotional Aspect	No	16	35.42	37.45	33.33	0	100	0.967
	Yes	15	35.55	38.76				

breast cancer [33], a data that differs from what was found in this study.

Conclusion

Maintaining an aesthetic state closer to normality is determinant for the quality of life of these women. The analysis of the domains made it possible to understand the impact on quality of life, on the analyzed dimensions, that mastectomy and breast reconstruction bring to the woman's life. However, new studies should be performed to obtain statistically more relevant values.

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