



Problem Faced by Post-Operative Modified Mastectomy Patients during their Hospital Stay

Heena Dabas, Teenu Xavier, Priyanka Varghese

*Nursing Officer, All India Institute of Medical Sciences, New Delhi

**Nursing Officer GIPMER, New Delhi

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Abstract:

Background: Globally, the incidence of breast cancer is on the rise and is one of the leading causes of death among women aged 35–50 years. The primary treatment of breast cancer remains the surgical removal of all gross evidence of cancer i.e. Mastectomy and has an adverse impact on physical, psychological, psycho-social and financial aspect of life.

Aim: The aim of the study was to assess the problems faced by postoperative modified mastectomy patients during their hospital stay.

Materials and methods: A descriptive study was conducted in among 30 post operative MRM patients who were admitted in the surgical wards of AIIMS. The subjects were conveniently selected and a questionnaire to assess the physical, psychological and financial problems was administered.

Results: Majority of the subjects was married (70%), (93.3%) were in their 2nd post-operative day of mastectomy and had moderate pain at the operated site during their hospital stay (76.7%). Most commonly reported physical problems included restrictions of movements in performing activity of daily living (90%), fatigue (90%) and decreased sleep(50%).Majority of them (80%) sometimes required analgesics to relieve pain, had felt that post mastectomy exercises were sometimes an extra burden on them (63.3%).Nearly half of them (46.7%) had depression and anxiety while facing other mastectomy patients.

Conclusion: Post operatively most of the patients experience physical and psychological problems. Hencenurses and other healthcare professionals should focus on the specific needs of post mastectomy patients.

Keywords: Problems, post operative mastectomy patients, hospital stay

INTRODUCTION

The breast plays a significant role in a woman's sexuality and identification of herself as female.

Although advances in the diagnosis and treatment of breast disorders are changing the prognosis of possible breast diseases, there is still a fear of disfigurement and loss of sexual attractiveness.

Breast cancer is the most frequently diagnosed cancer and the leading cause of cancer death among females worldwide, with an estimated 1.7 million cases and 521,900 deaths in 2012. Breast cancer alone accounts for 25% of all cancer cases and 15% of all cancer deaths among females.¹ Globally, the incidence of breast cancer is on the rise and occurring more rapidly in countries with a low incidence rate.¹ Data from developed countries indicate that one out of every eight women is likely to develop breast cancer.² According to Population Based Cancer Registry(PBCR)and Hospital Based Cancer Registry (HBCR), a rough estimation of 5 year survival rate for breast cancer is not even more than 60% in developing countries like India.^{3,4}

The primary treatment of breast cancer remains the surgical removal of all gross evidence of cancer. Mastectomy is the medical term for the surgical removal of one or both breasts, partially or completely for treating breast cancer. Mastectomy has adverse impact on physical, psychological, psycho-social and financial aspects of life. Specific type of psychological distress resulting from radical surgery include clinically significant mood disturbances, decreased sexual

interest and satisfaction, increased self-consciousness, negative changes in body image and fear about recurrence.^{1,2}

Although studies have been done related to quality of life after mastectomy, there is less evidence of problem faced by post-operative mastectomy patients during their hospitalization period.

MATERIALS AND METHODS

This descriptive study was conducted among thirty post operative MRM patients who were admitted in the surgical wards of AIIMS, New Delhi. The subjects who were in post operative day more than or equal to two days and who could understand either English or Hindi were conveniently selected. The study procedure and protocol were reviewed and approved by the Ethics Committee of the hospital.

A validated questionnaire was used to assess the physical, psychological and financial problems faced by the subjects. Physical domain had questions related to pain, restrictions of ADL, decreased sleep, fatigue etc. Psychological domain had questions related to mood changes, depression and decreased libido. Financial domain had questions related financial burden and crisis.

Written informed consent was taken from the subjects and average time taken to complete the questionnaire was 10 minutes. Confidentiality and anonymity of the subjects were maintained. Data was coded in excel and data analysis was done using SPSS IBM version 20.

RESULTS

The majority of the patients were married (70%), housewives (73.3%), and has spent less than 10,000 per month for treatment (40%), with the median age of 43 years (40 to 50). Most of the them (30%) had an educational level of 12th standard and below. The majority of the patients (93.3%) did not have a family history of breast cancer.

Most of them (93.3%) were in their 2nd post-operative day of mastectomy, had moderate pain at the operated site during their hospital stay (76.7%). About 50% of patients complained of always having restrictions of movements in performing activity of daily living and had to take help from others. Majority of them (90%) complained of fatigue sometimes after mastectomy. Half of them noticed to have decreased sleep after surgery i.e. 3 to 4 hours,

Majority of them (80%) sometimes required analgesics to relieve pain, had felt that post mastectomy exercises were sometimes an extra burden on them (63.3%). Majority of the them (70%) rarely felt phantom breast sensation and decreased sensation in the operated site, had no fear of recurrence of breast cancer (60%) and perceived no problems related to sexual relationships (70%). Nearly half of them (46.7%) had depression and anxiety after mastectomy. Most of them (90%) stated that expenditure for treatment had affected their family expenditure.

DISCUSSION

In present study majority of the subjects had moderate pain at the operated site during their hospital stay (76.7%). This may be because majority of the subjects were in the immediate post operative period.

In this study majority of subjects did not perceive any problems related to sexual relationships (70%). This may be because of the fact that most of them were in their immediate post operative period and physical problems like

pain restriction of movements etc were prioritized as the major problems

It was found in the present study that majority of the subjects had physical and financial problems during the immediate post operative period of hospitalization. The findings of the study were in congruence with the findings of study done by Gosselink R *et al* (2003). This may be because during the immediate post operative period patients have pain and restrictions of ADL and bear financial problems due to expenditure for surgery and treatment.

The findings of this study can be effectively used by nursing administrators and educators for nursing practice. More emphasis should be given on physical problems of patients during the immediate post operative period. The administrators should see to it that competencies among nursing personnel are developed for effective management and client oriented care.

The researcher recommends that a multicentre study can be replicated with large sample size so that the findings can be generalized.

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