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The Surgery Decision-Making Process in Women Who Suffer from Breast Cancer



As statistics offered by the American Cancer Society state, one in eight United States` women is going to be diagnosed with breast cancer. After finding out this cruel diagnosis, the patients will have to decide upon the upcoming treatment to counteract this disease. The treatments include either a lumpectomy or a mastectomy, which represents the total resection of the breast.

The majority of the researches made to find out the guidelines in deciding which of the two choices to take observed women from months up to few years after they made up their mind regarding the undergone breast cancer treatment. In addition to these surveys, the University at Buffalo released a new investigation which is

one of the few of its kind. This research investigates the time span ranging from the moment the breast cancer diagnose was made and the moment of surgery. This accurately observes the decision making and analyzing of options patterns that women use when they have to decide to get either a mastectomy or a lumpectomy.

The University at Buffalo`s research was released in the Oncology Nursing Forum in the September edition. This comprised interviews with females suffering from malign breast tumors in their early stages of development. The inquiries took place during the period the women were diagnosed with this type of cancer, immediately after their consultation about the upcoming surgery, but before the actual operation. By taking these inquiries, the investigators managed to understand better and in a time-effective manner the patterns of thinking and decision making from the women`s behalf. After concluding an interview, the scientist would transcribe it, encode it and studied it in order to observe the thinking mechanisms of the sick patients in deciding upon the given options.

The study was led by Robin Lally who is both assistant professor in the School of Nursing within the University at Buffalo and adjunct assistant professor within the Roswell Park Cancer Institute. He stated that the research is just one of the few of its kind since it was undergone prior to the treatment process in the moment when the women started thinking and deciding upon the therapy possibilities, no matter if they already took a decision or where still in the moment of analyzing opportunities. Nonetheless, focusing on this time span, the investigators managed to receive just-on-time feed-backs regarding the decision making patterns since the females were still discussing with their oncologists about the surgeries and the chances of treatment.

As assistant professor Robin Lally stated, one of the most important discoveries of his team`s research was the fact that they observed that women felt more positive and courageous in having the capability of deciding which treatment suited them better. This positive attitude increased their survival rates because at the leading author states, the females were more confident in the thinking process role for their well-being and also communicated better and felt they were supported by the whole medical staff. In addition, even if the breast suffering patients that took part in this research had already taken a decision of treatment, they were very open to the pieces of advice given by the investigators and to the alternative treatment options. Furthermore, even some of the females in the study did not consider themselves very good at decision making they gained confidence in their capacity because the medical staff and the oncologists provided them support in deciding on the treatment alternative.

The early studies made on this matter were kind of biased due to the fact that they provided template answers such as multiple choice or yes or no answers, a feature which restricted the thinking process of the women studied. This is entitled a structured query which did not allow female patients to give arguments about deciding on a specific treatment alternative, not to mention the limitations in observing their decision-making patterns.

On the other hand, this new type of research which can be seen as a high quality one focused on surveys which allowed breast cancer suffering women to give complete answers about their decision-making process and granted the investigators the knowledge about various processes. This acquired knowledge would help scientists the opportunity to better understand some phenomena starting at the individual level and continuing with the real life.

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As the leading investigator states about this recent study, its outcomes present in a better and understandable manner what women suffering from breast cancer may decide to do regarding their treatment options. Moreover, the scientists gain insight in their decision-making patterns and what they ponder upon prior to their first surgery consultation.

Another thing that differentiated Lally's team research from others similar to it was the fact that the investigators found out that females felt that any type of data regarding breast malign tumors was very important, but had to acquire it in a gradual way in order to analyze and focus better on it and not to be overwhelmed as well. As a general guideline of the study, the more information the women received in a short time span, the greater the negative effects on the decision-making patterns were. Some of the patients from the study stated that they wanted to use just the information provided by the medical staff on a verbal basis and utilize it in their decision-making process and, afterwards, only a few days before their surgery to use the already published information about the breast cancer therapies and surgery.

Studying the amount of information to give to each breast cancer suffering patient, it was established that the women's ages had nothing to do with that volume. All the studied females were observed to utilize the information that best answered their doubts and show an avoiding trend in receiving information that would affect them in a negative manner.

The team of researchers discovered that a high number of the studied patients came to the surgery doctor with their mind made up regarding a treatment alternative. After the consultation with their surgeons, the patients would compare their decision with the information provided by the doctor. It was observed that the decisions made regarding the surgery drew their motivations from: avoid mastectomy until it became a must, eliminate the worries of malign tumors, keeping physical functionality and appearance and fast recuperation after the surgery. The majority of the studied females stated that they saw mastectomy as an alternative that should be undergone only in the invasive and late-stages of development cancers. The sample of older females stated that they saw their age as an advantage because they need not to worry about the recurrence of their breast cancer after the surgery and did not show much interest in keeping their breasts. Nonetheless, even this sample of patients showed prevalence for lumpectomy as a breast cancer surgery.

All the studied population stated that they were kind of shocked to observe that their surgeons did not recommend a specific treatment, but also explained that they knew the last decision regarding mastectomy and lumpectomy would be theirs. The investigators also noticed that even those breast cancer suffering women who already made a decision regarding their treatment, still wanted their surgery doctor to recommend or incline towards a treatment alternative. Nonetheless, all the women deciding on which of the treatments to take enjoyed full support from their surgery doctor's behalf in whatever they decided.

The leading investigator of this study states that he hopes that all the medical staff starting from nurses and ending with surgeons would feel keener on asking their patients about what they think about a specific breast cancer treatment, help them gain knowledge about the therapy alternatives and support the women in making a final decision regarding surgery. Moreover, the leading author also advises surgeon to provide this support starting with the women's first consultations and strives to make the doctors understand how important their support is in the breast cancer suffering patients' thinking processes.

This study comes in the aid of the women who survived breast malign tumors, too. As assistant professor Lally states, those women who suffered from breast cancer and were cured can find a part of their personality, worries and experience with cancer and surgery in each of the statements of the patients who underwent Lally's research. He sees this opportunity to make those who survived this cruel disease feel that they are not the only one who were confronted with breast cancer and gain courage to psychologically pass over their traumas.



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