"It’s Like We Don’t Exist": Tailoring Education for Young Women Undergoing Surgery for Early-Stage Breast Cancer

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In the United Kingdom, about 20% of breast cancer cases are diagnosed in young women. With about 1,100 deaths each year, it is the leading cause of cancer death for women aged younger than 50 years (Cancer Research UK, n.d.). Characteristics of breast cancer in young women as compared to older women include increased risk of recurrence, higher proportion of triple-negative cancers, and higher mortality rates, which present challenges to the treatment of breast cancer in this age group (Narod, 2012).

Randomized, controlled trials have demonstrated equivalent survival in suitable patients between those treated with mastectomy and breast conservation (lumpectomy and radiation therapy) (Fisher et al., 2002), and this appears to be no different in young women (Maishman et al., 2017), providing some women with a choice of surgical intervention to treat breast cancer. When presented with a surgical choice, however, women may struggle to make a decision because of lack of knowledge, individual decisional preferences, or emotional state after diagnosis (Molenaar et al., 2004; Nold, Beamer, Helmer, & McBoyle, 2000; Staradub et al., 2002). The difficulties of weighing pros and cons of different treatment options experienced by young women is counterbalanced by evidence suggesting that greater involvement in treatment decisions decreases decisional conflict and regret (Brown et al., 2012; Hack, Degner, Watson, & Sinha, 2006) and increases satisfaction with the decision (Janz et al., 2004). In addition, being informed about diagnosis and treatment can result in a positive impact on quality of life, greater satisfaction with choices, and improved ability to cope during and after treatment (Keating et al., 2010).

Elements involved in the treatment decision-making process include having sufficient information...