Depression and Perceptions of Quality of Life of Breast Cancer Survivors and Their Male Partners

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Breast cancer is the most common disease among women ages 30–60 from occidental countries and the second-leading cause of death from cancer in American women (Jemal et al., 2008; Smith, Cokkinides, & Eyre, 2007). Each year, more than one million women are diagnosed with breast cancer, representing more than 10% of all new cases of cancer (Anderson et al., 2006). Treatments for breast cancer are well known and can be summarized as mastectomy or breast-conserving surgery, chemotherapy, radiotherapy, and endocrine therapy (Menke et al., 2006).

Effective treatments can produce a life expectancy of 10 or more years, increasing concern for patients’ quality of life (QOL) (Fallowfield, 1995; Ganz & Hann, 2008; Grunfeld, 2006; Wronska, 2003). As a result of early detection and improved treatments, more women now live with the disease and have to adjust to alterations such as change in body image (loss of a breast, hair loss, change of weight), modification in interpersonal relations (isolation and marriage, family, professional relationships) with a consequential influence on moods (Bower, 2008; Fallowfield; Jemal et al., 2008; Smith et al., 2007). In recent years, the use of QOL assessments for determining the global impact of diseases and medical treatments from patients’ perspectives has increased. QOL measurements are potentially useful for application in research and clinical practice because isolating a disease from patients’ perceptions of the disease is impossible (Carr & Higgins, 2001). Diverse QOL instruments based on patients’ perspectives are available, with a multidimensional construct that includes physical health status, psychological well-being, social and cognitive functioning, and impact of disease and treatment based on patients’ life experiences. Examples of generic instruments include the Medical Outcomes Study 36-item Short Form (SF-36), the EuroQol Instrument (EQ-5D), the World Health Organization Quality of Life (WHOQOL) and WHOQOL-BREF assessments in addition to others (Coons, Rao, Keininger, & Hays, 2000).

Breast cancer diagnosis and treatment may have a significant practical and emotional impact on the entire family, but particularly on partners (Baucom, Porter, Kirby, Gremore, & Keefe, 2005–2006). Reports indicate...