Confronting the Unexpected: Temporal, Situational, and Attributional Dimensions of Distressing Symptom Experience for Breast Cancer Survivors

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According to the World Health Organization ([WHO], 2005), more than a million people will be diagnosed with breast cancer each year worldwide. Despite the worldwide epidemic, improvements in treatment have substantially increased survival rates, resulting in more than 2.4 million breast cancer survivors in the United States (National Cancer Institute [NCI], 2008) and millions more worldwide. As the number of people living after cancer exponentially rises, discussions about the global burden of disease increasingly focus on cancer (WHO) and how breast cancer and its treatment affect the quality of life of breast cancer survivors (Knobf, 2007; Paim, de Paula Lima, Fu, de Paula Lima, & Cassali, 2008). NCI (2006) specifically identifies the need for research with cancer survivors to examine chronic and late effects of cancer and its treatment. The effects of cancer are influenced by women’s responses to the traumatic event of cancer, including how they make meaning of cancer and how they perceive ongoing symptoms (Antoni et al., 2001). The ways women perceive and respond to their symptom experiences are vitally important in understanding the long-term effects of breast cancer on survivors (Armstrong, 2003; Budin, Cartwright-Alcarese, & Hoskins, 2008).

Uncertainty, feelings of vulnerability, and high levels of emotional distress have been reported in breast cancer survivors in the years after active treatment (Aranda et al., 2005; Budin et al., 2008; Paim et al., 2008). A review of breast cancer survivorship (Knobf, 2007) found that survivors experienced increased psychological distress and worsened health outcomes when they felt unprepared about what to expect in survivorship. That finding was supported by this article’s first author’s original study, in which all participants described a sense of survivor loneliness and a subset of women described heightened distress (Rosedale, 2009). Although researchers have reported significant prevalence of ongoing symptom experience by