Use of Letter Writing as a Means of Integrating an Altered Body Image: A Case Study

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Purpose/Objectives: To describe the use of letter writing as a technique to assist patients in adjusting to an altered body image after dramatic cancer treatment.

Data Sources: Published articles and books.

Data Synthesis: Gestalt therapy, psychosynthesis, and journaling techniques evolve into a technique that can assist patients who are challenged to accept altered body parts.

Conclusions: Described in a case study presentation, letter writing was found to assist female patients with recurrent breast cancer in adjusting to reconstruction of lost breasts.

Implications for Nursing: Nurses can use letter writing as a means of assisting patients through the grief process associated with body image alterations.

Despite the emergence of microsurgery and other less invasive surgeries, many patients still undergo radical operations that alter body parts’ structure and function. As a result, they may grieve the losses associated with such drastic changes (e.g., altered reproductive or elimination processes, missing limbs, sensory and motor alterations, other stigma-producing anatomic alterations). Grief is the normal healing response to such losses. Because grief is not pathologic, its facilitation originates from a wellness conceptual framework.

Numerous one-on-one interventions already exist to assist grief work and promote adaptation to an altered body image. These include helping patients look at altered sites, sharing bibliotherapies with pictures of patients having undergone similar surgeries now engaged in daily living activities (Sabolich, 1995), and encouraging the use of expressive arts such as painting pictures of themselves before and after treatment with attendant debriefing. In addition, community building can help patients feel less isolated. Encouragement to join groups or other support activities offered by organizations such as the Wellness Community (Benjamin, 1995) can inspire hope that “life after cancer” does exist. The American Cancer Society’s “Look Good, Feel Better” program and one-on-one programs also are useful in helping patients feel more comfortable with their new bodies.

Ultimately, the ideal outcome for patients is to use their health situations as an opportunity for growth, especially psychospiritual growth. This article describes the process of letter writing as one way healthcare professionals can assist patients who must grieve the loss of body parts and function so that they can move past the role of patients to their daily lives. If these situations are handled therapeutically, patients can be helped to not only cope with but also transcend the illness and its treatment.

Key Points . . .

- Patients who undergo dramatic changes in physical appearance after cancer treatment will grieve for the lost or altered body part or its function.
- Psychosocial rehabilitation and reintegration are important components of a holistic approach to care.
- Letter writing, a technique in which patients “communicate” with lost or altered body parts, can evoke a healing response during the adjustment period.

Literature Review

An impressive number of psychotherapy outcome studies in medical settings have determined that patients who receive psychotherapy in addition to surgery or medical treatment fare significantly better psychologically and emotionally than patients who rely on medical treatments alone (Ferrell & Coyle, 2001; Holland & Rowland, 1990). The therapeutic technique of journaling used with verbal therapy also is well documented as a tool to stimulate a healing response (Day, 2001; Jordan & L’Abate, 1995; McGihon, 1996; Pennebaker, 1993; Rosenberg, 1990; Torrem, 1993).

Numerous benefits have been cited for the additional use of journaling or, more specifically, letter writing for patients undergoing intrusive medical or surgical techniques.

- Patients become active participants in their treatment and assume personal responsibility for change. Writing is an active statement of externalizing an internal experience and becomes a prelude to proactive problem solving by patients (McGihon, 1996).

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