



# Psychosocial Adjustment to Breast Cancer Surgery: A Prospective Study

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## Objective:

The purpose of this study was to identify factors that predicted psychological adjustment among Chinese women in the year following breast cancer surgery.

## Method:

Of all eligible Chinese women receiving breast cancer surgery in six Hong Kong government hospitals (529), 443 were sampled and 405 were recruited and interviewed within 1 week of surgery (baseline). Participants were assessed for baseline psychological morbidity (Chinese Health Questionnaire, CHQ12) and completed a retrospective assessment of treatment decision making (TDM) difficulties, and expectations for treatment outcome. Perceived consequences of treatment outcome, CHQ12, optimism, perceived self-efficacy, and physical symptom distress were assessed at follow-up. Three hundred and three women (75%) completed follow-up assessments at one-, three-, and eight-months post-surgery. Stepwise regression analysis examined impact of one-month post-surgical psychological distress, TDM factors, and psychological factors on three- and eight-months post-surgical CHQ12 scores.

## Results:

At baseline, 38% of women had mild, and 40% moderate/severe psychological morbidity. CHQ12 scores fell significantly from baseline to follow-up assessments ( $F=21.24$ ,  $p<.001$ ). After adjustment, psychological morbidity at three-months post-surgery (adjusted  $R^2 = 0.52$ ) was predicted by one-month post-surgery CHQ12 ( $\beta = .27$ ,  $p<.001$ ), Physical symptom distress ( $\beta = .36$ ,  $p<.001$ ), Expectancy-Outcome Incongruence ( $\beta = .17$ ,  $p=.001$ ), and perceived self-efficacy ( $\beta = -.19$ ,  $p<.001$ ). Psychological morbidity at eight-months post-surgery (adjusted  $R^2 = 0.52$ ) was predicted by one-month post-surgery CHQ12 ( $\beta = .30$ ,  $p<.001$ ), Physical symptom distress ( $\beta = .34$ ,  $p<.001$ ), and optimism ( $\beta = -.34$ ,  $p<.001$ ).

## Conclusion:

Psychological adjustment improves throughout the first year after breast cancer surgery. One-month post-surgery distress is a significant predictor of subsequent adjustment. This in turn is predicted by consultation factors. Early post-surgical period should be considered as a critical time to assess delay psychological distress.