

A Prospective Exploration of the Quality of Life and Mental Health Implications of Mastectomy Alone on Women in sub-Saharan Africa

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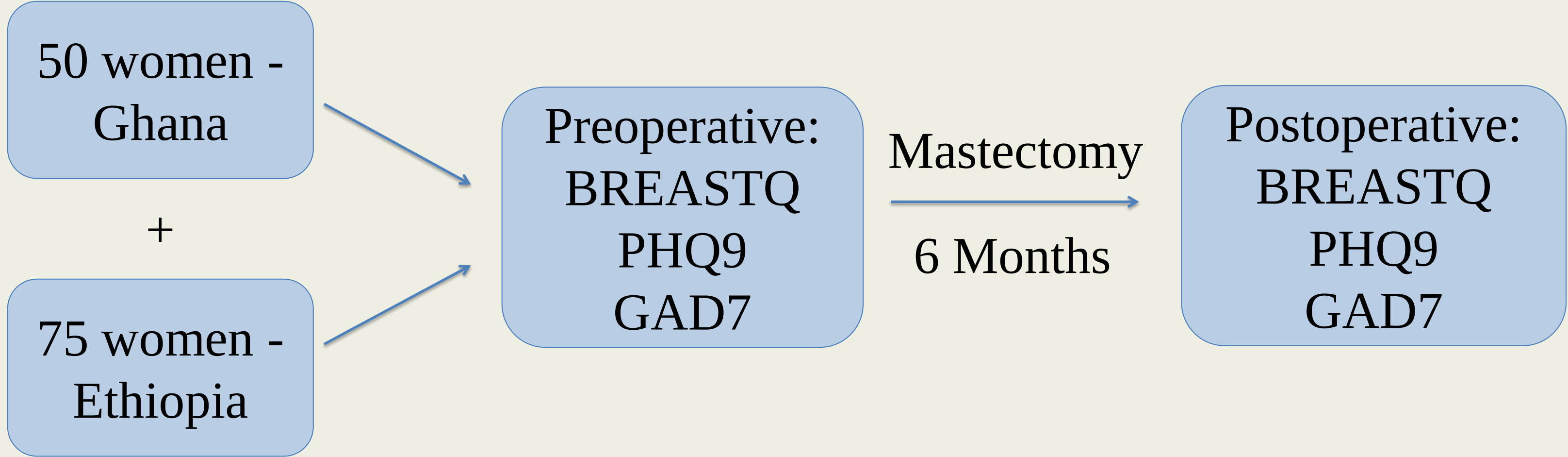
Purpose

- Breast cancer is the most common cause of malignancy-related mortality worldwide
- Stark survival disparities exist in sub-Saharan Africa due to delay in presentation and fear of mastectomy

What are the quality of life and mental health implications of mastectomy in African Women?

Methods

- Prospective study of 125 women in Ghana and Ethiopia
- History of breast cancer undergoing mastectomy
- Breast related quality of life (QOL) evaluated using BREAST-Q surveys
- Mental health measures evaluated using PHQ-9 and GAD-7

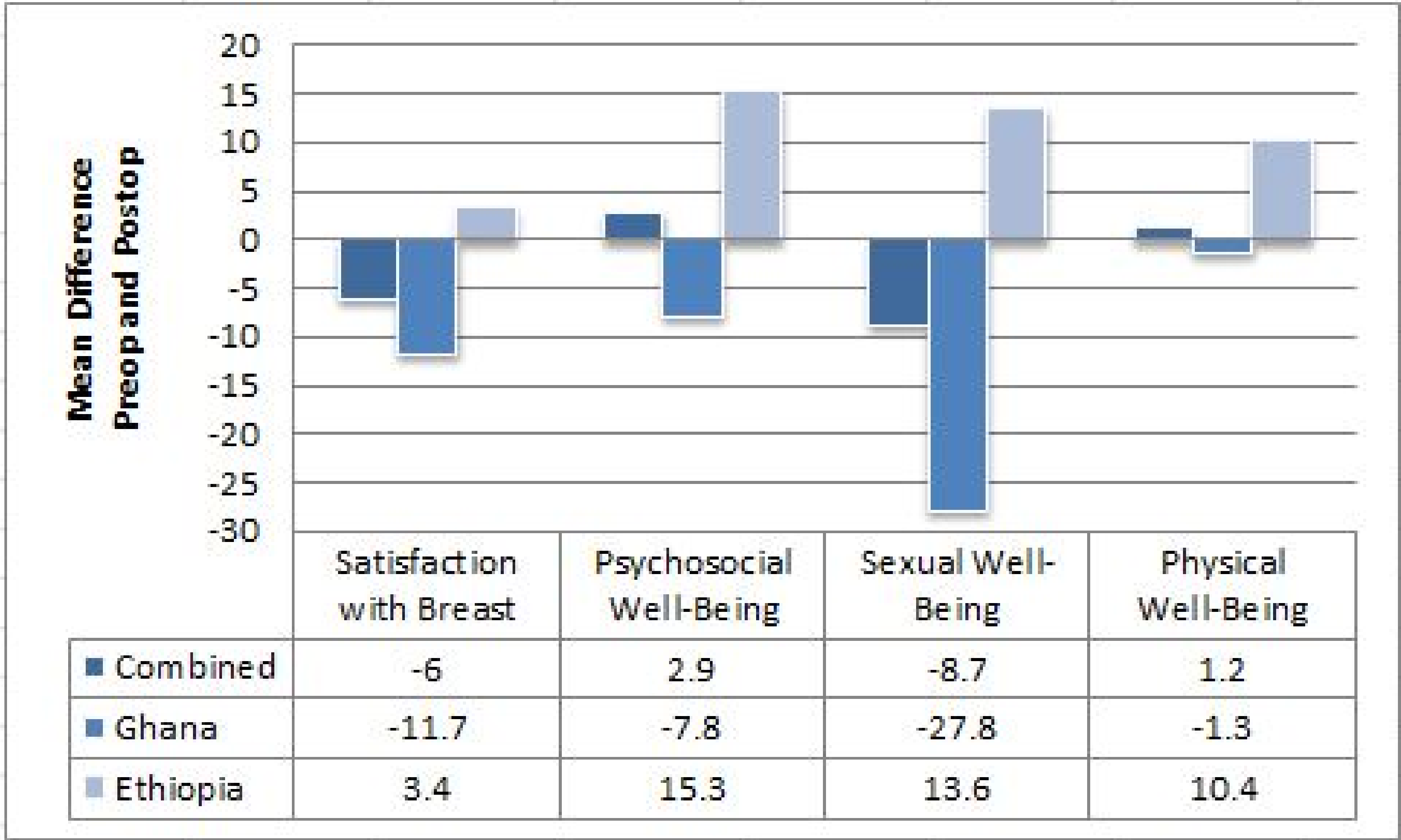


- Univariate tests and logistic regression analyses evaluated changes in these measures and assessed for regional differences

Results – BREAST Q Scores

Combined Cohort

At 6 months, combined cohort reported decreased scores for breast satisfaction (mean difference, -6.0) and sexual well-being (mean difference, -8.7)

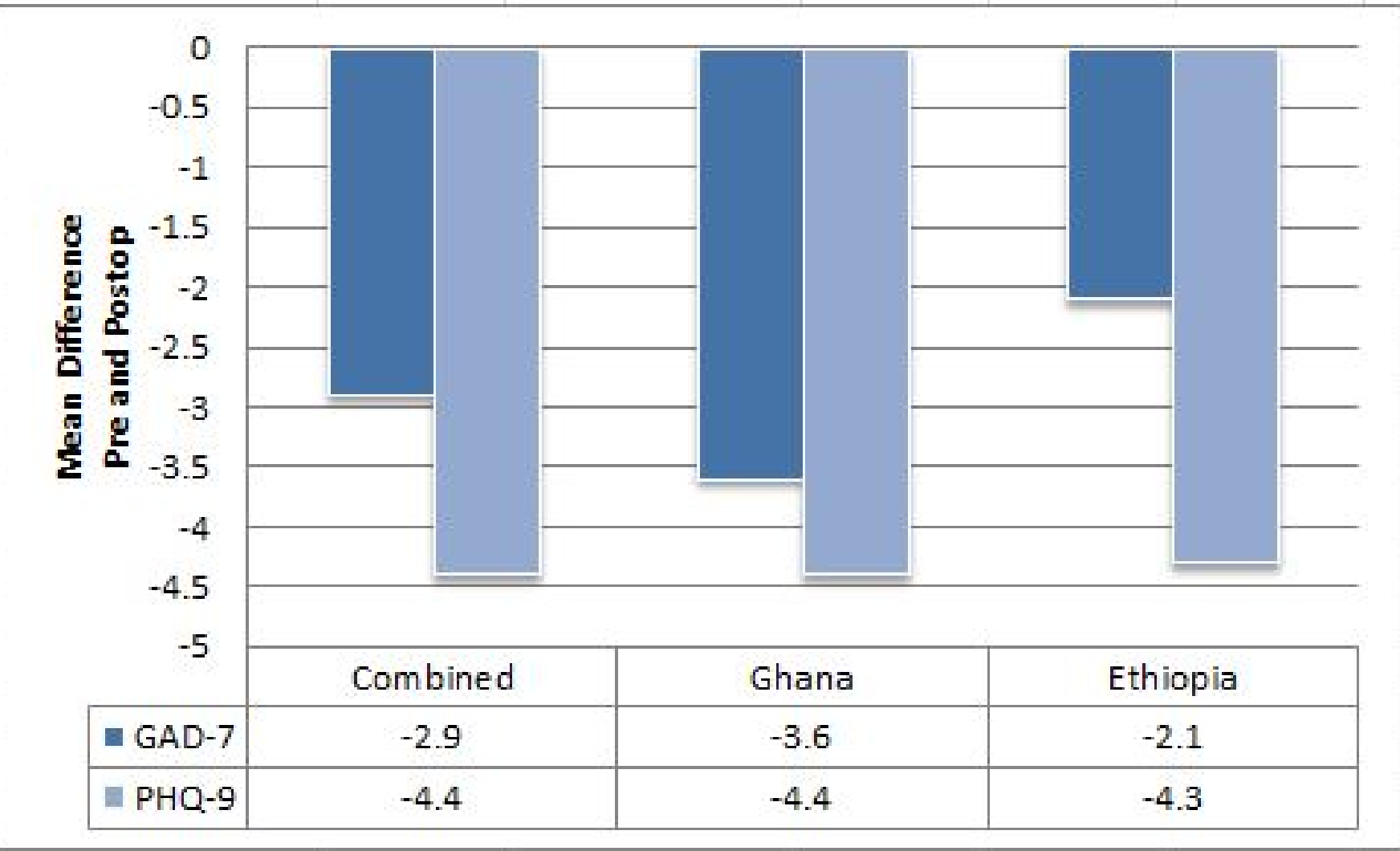


Regional Differences

- Ghanaian women reported decreased scores for all measured satisfaction and QOL domains
- Ethiopian women reported increased scores for satisfaction and QOL domains

Results – Mental Health Measures

Women in both countries reported similar significant improvement in anxiety and depression postoperatively



Results – Demographics

- Ghanaian women older and with larger BMI (p <0.001)
- > 50% of cohort diagnosed with Stage III or IV disease
- Radiation more common in Ghana (p <0.001)
- No difference in lymph node testing (p=0.21), with majority of patients receiving axillary node dissection (98.4%)

Conclusions

This study demonstrates previously undescribed QOL experiences, with interesting regional variations, amongst women in Ghana and Ethiopia undergoing mastectomy and provides evidence of mental health benefits of mastectomy