Grounded Theory Study of How Women With Early Stage Breast Cancer Choose Contralateral Prophylactic Mastectomy

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ABSTRACT

Increasing numbers of women in the United States with the first diagnosis of sporadic early stage unilateral breast cancer are choosing contralateral prophylactic mastectomy rather than surveillance of their healthy breast seemingly against the general advice of experts in the field, best evidence, and medical/lifestyle options for risk reduction.

In a healthcare environment which promotes patient engagement and favors patient's values, goals, and preferences over such expert advice and best evidence, the process of making such an irreversible and life-changing surgical decision needs to be more fully understood.

The goal of this grounded theory study is to expand nursing knowledge of women's decision-making within the existing social context as a base for health policy development, expansion of nurse's roles, and empowerment of women.

REVIEW OF THE LITERATURE*

Previous studies have served primarily to advance our understanding about which women choose contralateral prophylactic mastectomy but not how women engage in the decision-making process

*limited by methodological approach

METHOD

Grounded theory methodology is ideally suited to discovering what is “really going on”

PURPOSE

To explore the process of how women choose contralateral prophylactic mastectomy

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REFERENCES

For the majority of women with Stage I or II breast cancer, the absolute 20-year survival benefit of contralateral prophylactic mastectomy has been calculated as less than 1% among all age, ER status, and cancer stage groups