

Psychological Impact of Breast Cancer Diagnosis and Patient Coping Strategies: a Literature Review

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Abstract

Breast cancer is the most commonly diagnosed cancer and leading cause of cancer-related mortality among women globally. Beyond its physical impact, it brings complex psychological consequences, including stress, depression, anxiety, and post-traumatic stress disorder (PTSD), which can affect treatment adherence and quality of life. This literature review aims to explore the psychological impact of breast cancer diagnosis and identify the coping strategies used by patients to manage their emotional burden. A literature review was conducted using databases such as PubMed, Scopus, DOAJ, and Google Scholar. Selected studies focused on psychological effects and coping mechanisms among breast cancer patients, including family and social support, cultural-religious factors, and psychological interventions. The findings show that emotional distress following a breast cancer diagnosis is influenced by cancer stage, treatment type, physical changes, support systems, and cultural belief. Adaptive coping strategies such as religious faith, emotional support, positive reframing, and acceptance promote psychological adjustment and treatment compliance. In contrast, maladaptive strategies like avoidance and denial worsen emotional outcomes. Breast cancer has a profound psychological impact requiring comprehensive mental health care. Integrating psychological and cultural-religious support into cancer treatment improves emotional well-being and clinical outcomes.

Keywords: *Psychological Impact; Breast Cancer Diagnosis; Coping Strategies*

Background

The World Health Organization (WHO) states that more than 2.3 million women were reported to have breast cancer in 2020, causing around 670.000 deaths worldwide, making it one of the most common diseases among women. A breast cancer diagnosis remains a devastating and life-changing experience for many patients (World Health Organization (WHO), 2022). Receiving a diagnosis is often the beginning of a physical struggle with the disease, but also a mental struggle, with complex psychological impacts (Fawzy et al., 2015; Sung et al., 2021). Although advances in early detection and treatment have significantly improved survival rates, a breast cancer diagnosis remains a devastating and life-changing experience for many patients (Ravi Mehrota & Kavita Yadav, 2022). The moment of diagnosis often marks the beginning of not only a physical struggle with the disease but also an intense psychological struggle (Khazi et al., 2023). The psychological impact of breast cancer is complex and multidimensional (Fawzy et al., 2015; Sung et al., 2021).

Women who have been diagnosed with breast cancer often report a range of emotional reactions, including shock, fear, sadness, anger, and uncertainty about the future (Khazi et al., 2023). These emotional reactions are common, but they can

develop into more serious psychological conditions such as clinical depression, generalized anxiety disorder, post-traumatic stress disorder (PTSD), and prolonged fear of recurrence of cancer (Kulpa et al., 2022; Ośmiałowska et al., 2021). These psychological disorders can be present from the time of diagnosis and continue to persist after the diagnosis (Ośmiałowska et al., 2021).

The degree and duration of psychological stress that breast cancer patients experience can be affected by a variety of factors. These include the stage of cancer at diagnosis, the aggressiveness of the treatment, physical changes, personal or family history of mental disorders, the presence of social support, and cultural beliefs about cancer and death (Khazi et al., 2023; Kulpa et al., 2022). Furthermore, the breast has a meaning that is closely related to femininity, sexuality, and self-identity in many cultures. Surgical procedures such as mastectomy can have a significant effect on a woman's body image, self-confidence in sexual relationships, and social interaction (Devina Nurmahani, 2017; Harlianty et al., 2022).

The coping strategies that patients use to deal with psychological burdens become critical in the face of these obstacles (Hack & Degner, 2004; Mohammed et al., 2009). Coping is the effort made to manage the internal and external demands of a stressful situation by cognitive and behavioral means (Elsheshtawy et al., 2014; Taleghani et al., 2006). Adaptive strategies such as seeking social support, problem solving, and positive reframing are associated with better psychological outcomes (Elsheshtawy et al., 2014; Omari, Amaadour, et al., 2024). While maladaptive strategies such as denial, substance use, or avoidance tend to worsen emotional conditions and reduce quality of life (Ośmiałowska et al., 2021).

In the case of breast cancer, many studies have investigated the psychological interventions and coping mechanisms used by patients, including individual psychotherapy, support groups, mindfulness-based stress reduction techniques, and spiritual or religious approaches (Devina Nurmahani, 2017; Harlianty et al., 2022). To provide holistic cancer care, clinicians, counselors, and support staff must understand the different types of coping strategies used and how they function across populations. This is a literature review that aims to synthesize current research on the psychological impact of a breast cancer diagnosis and the coping strategies used by patients. It is hoped that this will help build a more responsive and comprehensive mental health system for people affected by breast cancer.

Methods

A comprehensive search of relevant studies, analyzing findings on the psychological impact of cancer diagnosis and patient management strategies. Additionally, the study will examine supporting factors that help patients adjust to and accept their diagnosis, including the roles of family members and health workers in providing moral and material support to enhance patient compliance with treatment. Search using search engines and data based on PubMed, Scopus, DOAJ, and Google Scholar using the keywords “breast cancer”; “psychological impact”; “disease management strategies”; “women”.

There is no year limit in the literature search. In PubMed there are 2,390 related articles, Scopus there are 1021, DOAJ 41 articles, and more than 5000 articles in Google Scholar, from thousands of articles, only 8 were taken that met the inclusion criteria and could represent data from others.

Results

The results indicate that family support, social support, psychological therapy, and the use of religious coping contribute to patients' adjustment to their illness. The involvement of close relatives and a religious approach, as well as the inclusion of psychiatrists, play a significant role in fostering strong motivation to recover, accept their condition, and adhere to treatment. The results of the article analysis are presented in Table 1.

Table 1. Research analysis

No	Title and Author, Years	Population and Sample	Method	Result
1	Psychosocial impact at diagnosis and coping strategies among woman with breast cancer – A qualitative study Fatima Khazi.,et al (2023)	12 respondents	The study uses a phenomenological approach to examine the lives of newly diagnosed women. Semi-structured interviews	The data analysis showed three main themes and eight subthemes. At the beginning of the diagnosis, psychological effects included tension and uncertainty, financial difficulties, family difficulties, and social loss. The main coping strategies were identified as family support and religious beliefs. Ignoring signs and symptoms, and the cause of late diagnosis was misdiagnosis.
2	Mental adaption to cancer diagnosis and the health locus of control in patients undergoing treatment Marta Kulpa.,et al (2022)	569 patients aged 19 to 91 undergoing oncological treatment	Quantitative research using the MHLC scale to measure health locus control and the mini-MAC scale to measure mental adaptation to cancer	The anxiety preoccupation strategy had the highest value in breast cancer; the helplessness and hopelessness strategy had the highest value in breast and reproductive organ cancers; the fighting spirit strategy had the highest value in digestive system cancers; and the positive re-evaluation strategy had the highest value in cancers of the digestive system. of the head and neck,

No	Title and Author, Years	Population and Sample	Method	Result
				as well as the digestive system
3	Coping strategies in Egyptian Ladies with Breast Cancer Eman A., et al (2014)	In the study, 56 women were diagnosed with operable breast cancer.	From August 2011 to August 2013, a cross-sectional study was conducted at the Surgical Oncology Unit at the Oncology Center of Mansoura University.	To cope with the stress caused by breast cancer, most patients used acceptance, religion, and emotional support. Patients with depressive symptoms received higher scores, positive reframing, planning, and venting.
4	Effective and ineffective psychological adjustment in breast cancer patients before receiving neoadjuvant chemotherapy : insights from a cohort study Majid Omari., et al (2024)	Between 2021 and 2023, 209 patients were recruited to the oncology department of the public oncology hospital of Fez city.	a cross-sectional study that aimed to investigate psychological adjustment techniques mobilized by women who have just been diagnosed with BC and to find sociodemographic and clinical determinants associated with each coping strategy before NACT.	Using Mini-MAC scores, the evaluation of mental adjustment for cancer showed that FA, FS, and "adaptive coping" strategies received higher scores. HH and FS were negatively correlated with monthly family income, while FA and "adaptive coping" strategies were positively correlated. Additionally, the left side, such as BC laterality was negatively associated with AP and "maladaptive coping" strategies. Furthermore, positive ER status was negatively associated with HH and "maladaptive coping" strategies and high Ki-67 levels were positively linked to AP.
5	Religious coping caregiver partners in woman with breast cancer Ruli Afrita. H ., et al (2022)	1 respondent	This study uses a qualitative interpretive phenomenological approach.	Subjective religious coping consists of assessing problems as punishment from God, gaining inner peace by getting closer to God, surrendering to God for the trials experienced, experiencing life

No	Title and Author, Years	Population and Sample	Method	Result
				changes shown by greater obedience in carrying out religious rituals, and finally gaining support from the religious community (congregation) in the form of spiritual support. Although religious coping strategies can help patients deal with their problems, patients still need help in the form of material support to become stronger in dealing with problems related to caregiving.
6	Process of religious coping in women with breast cancer Zahra Devina Nurmahani (2017)	3 Respondents	This study uses a phenomenological qualitative approach	Religious coping causes calm, relief, contentment, joy in prayer, uncontrolled emotions and thoughts, and many ways to feel at ease. Factors that influence religious peace efforts include education and learning from those closest to a person (family, partner, religious teacher), appreciation for life experience, religious involvement and culture, and worship.
7	Coping strategies and Experiences in Woman with a Primary Breast cancer Diagnosis Sepideh Hajian., et al (2017)	22 Respondents	In this study, a qualitative phenomenological design was used to investigate women's experiences with breast cancer and its associated complications, as well as their ways of handling these issues. To select participants, a purposive sampling	Women aged 32–68, most of them were married and had received additional therapies, such as mastectomy and chemo-radiation. Emotional turmoil, avoidance, and logical attempts were the three main themes that emerged from the interviews.

No	Title and Author, Years	Population and Sample	Method	Result
8	Coping Strategies, Pain, and Quality of Life in Patients with Breast Cancer Edyta Osmialowska., et al (2021)	202 Respondents	technique was used. In this quantitative study, in addition to patient medical data and hospital archives, the following standardized instruments validated in the Polish population were used: EORTC QLQ-C30 cancer questionnaire, EORTC QLQ-BR23 breast cancer module, Mental Adjustment to Cancer (Mini-MAC) scale, visual analogue scale (VAS) for pain intensity, and personal survey forms from the study to evaluate patients' clinical and sociodemographic conditions.	Most patients had been diagnosed with cancer between one and two years previously, and the average age of patients was 53 years. In the women studied, there was a negative relationship between the selection of a destructive approach to coping with cancer and a positive one, between quality of life and constructive coping strategies. Severe pain caused by the disease and its treatment significantly reduces the quality of life of patients in various aspects.

Discussion

Psychological Impact of a Breast Cancer Diagnosis

A diagnosis of breast cancer is often a traumatic experience for women, eliciting a wide range of emotional responses that may evolve into serious psychological disorders. Newly diagnosed patients commonly experience stress, uncertainty, financial strain, family-related distress, and social withdrawal (Khazi et al., 2023). These emotional responses are not isolated but interconnected, and they may develop into anxiety, depression, and even post-traumatic stress disorder (PTSD) (Burgess et al., 2005; Henselmans et al., 2010).

Kulpa et al. (2022) found that women with breast cancer demonstrated higher levels of anxiety, preoccupation, and helplessness-hopelessness compared to patients with other types of cancer, indicating a profound psychological burden. Similarly (Ośmiałowska et al., 2021). Revealed that the use of destructive coping strategies negatively influenced patients' quality of life, especially when physical pain was a contributing factor. These findings underscore that psychological distress in breast cancer patients is influenced not only by the disease itself but also

by treatment side effects and changes in body image (Avis et al., 2004; Fobair et al., 2006).

Factors Influencing Psychological Distress

Several variables have been identified as determinants of psychological stress levels among breast cancer patients:

- Stage of cancer and treatment type : Advanced cancer stages and aggressive treatment regimens tend to be associated with higher levels of psychological distress.
- Physical changes : Mastectomy and chemotherapy-related hair loss can severely impact a woman's body image and self-esteem.
- Social and familial support : Family support plays a crucial role in reducing psychological burden, as highlighted in studies by Khazi et al. (2023) and Omari et al (2024).
- Culture and religious context : In many cultures, the breast symbolizes femininity and sexuality, and its loss may be perceived as a threat to a woman's identity. Religious coping strategies, including spiritual surrender and communal religious involvement, offer psychological relief and foster acceptance (Devina Nurmahani, 2017).

Coping Strategies Adopted by Patients

Coping strategies used by breast cancer patients are generally classified into adaptive and maladaptive forms :

- Adaptive coping strategies, such as positive reframing, seeking emotional support, and religious or spiritual practices, are associated with improved psychological outcomes. Previous studies have reported that many Egyptian women used acceptance, religious faith, and emotional support to cope with the stress of diagnosis (Elsheshtawy et al., 2014; Roszkowska & Białczyk, 2023). Similarly Omari et al. (2024) found that adaptive coping strategies, particularly fighting spirit and fatalism acceptance, were associated with better mental adjustment and adherence to treatment.
- Maladaptive coping strategies, including avoidance, denial, and social withdrawal, often lead to deteriorating emotional health and reduced treatment compliance (Ośmiałowska et al., 2021). Avoidant coping style is strongly associated with poorer mental, physical, and overall quality of life in breast cancer patients (Roszkowska & Białczyk, 2023). Other findings highlighted that avoidant and accepting-resignation coping styles mediate the negative effects of low self-compassion on body image disturbance (Zhu et al., 2023).

Psychological and Psychosocial Interventions

Various psychological interventions have been developed to assist breast cancer patients in managing emotional distress :

- Individual psychotherapy can help with depression and anxiety. A common therapy is cognitive behavioral therapy (CBT), which helps patients recognize and change negative thought patterns that exacerbate emotional distress. Support groups provide emotional validation and a sense of shared experiences. These involve cancer patients with similar experiences, facilitated by trained professionals or survivors.
- Mindfulness-Based Stress Reduction (MBSR) programs have been shown to be successful in reducing stress and improving emotional regulation. Additionally,

the study will examine supporting factors that help patients adjust to and accept their diagnosis, including the roles of family members and health workers in providing moral and material support to enhance patient compliance with treatment

- Religious and spiritual support, as documented by Devina Nurmahani (2017), offers inner peace, a sense of control, and purpose, which facilitate emotional resilience. These interventions, particularly when tailored to cultural and individual needs, can enhance psychological well-being and encourage greater engagement with treatment.

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Clinical Implications

Understanding the psychological effects of breast cancer and the coping strategies employed by patients is essential for healthcare professionals aiming to deliver holistic cancer care. Mental health screening and culturally sensitive interventions should be integrated into standard oncological care. Additionally, involving family members and spiritual communities can enhance the patient's motivation to recover and support long-term emotional adaptation.

Conclusion

After receiving a breast cancer diagnosis, patients often experience mental health issues such as stress, anxiety, depression, and post-traumatic stress disorder (PTSD). Various factors such as cancer stage, type of treatment, physical changes, social support, and cultural or religious contexts affect the level of psychological distress experienced. Adaptive coping strategies, such as acceptance, emotional support, positive reframing, and spiritual or religious practices, have been shown to improve psychological well-being and treatment adherence. In contrast, maladaptive coping strategies, including avoidance and denial, tend to worsen emotional conditions and reduce quality of life. Psychosocial interventions such as individual psychotherapy, support groups, mindfulness-based programs, and spiritual support have proven effective in facilitating emotional adjustment. Therefore, a holistic approach that integrates psychological care with family and culturally sensitive support is essential for enhancing the quality of life and clinical outcomes of breast cancer patients.

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