



## Original article

# Comparison Among the Levels of Patients' Satisfaction According to the Surgical Technique Used in Breast Reconstruction After Mastectomy<sup>☆</sup>



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## A B S T R A C T

**Background:** It has been proved that a breast reconstruction after a mastectomy has a great psycho-social impact on patients. For this reason, it is increasingly done in a greater percentage of cases. There are two major groups of reconstructive techniques: a reconstruction with implants and a reconstruction with autologous tissue of the patient. In order to make a more objective assessment of the results, it is important to know how satisfied these patients are with the results. Therefore, we performed a study using Q-BREAST, the aim of which is to analyze the satisfaction of mastectomized patients according to the different surgical reconstruction techniques.

**Methods:** A retrospective, descriptive and observational study of patients reconstructed in our service from 2008 to 2011 was carried out. Patient satisfaction levels were compared according to the surgical technique used in breast reconstruction using the Q-BREAST test, which was mailed to them.

**Results:** There are no statistical differences in the levels of satisfaction in terms of age, type of mastectomy done, coadjuvant treatment or existence of complications. Higher levels of satisfaction are observed in patients reconstructed with autologous tissue versus implants ( $P=.028$ ).

**Conclusions:** Patients reconstructed with autologous tissue have higher levels of satisfaction than those reconstructed with implants.

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## Valoración de la satisfacción en pacientes mastectomizadas con reconstrucción mamaria según la técnica quirúrgica empleada

### RESUMEN

#### Palabras clave:

Mamoplastia  
Proceso reconstructivo quirúrgico  
Reconstrucción mamaria  
Satisfacción del paciente

**Introducción:** La reconstrucción mamaria tras mastectomía ha demostrado tener un impacto psicosocial muy importante en las pacientes. Existen 2 grandes grupos de técnicas reconstructivas: la reconstrucción con implantes y la reconstrucción con tejido autógeno de la paciente. Para poder realizar una valoración más objetiva de los resultados es importante conocer la satisfacción que presentan las mismas, por lo que se decide realizar un estudio empleando el Q-BREAST cuyo objetivo es analizar la satisfacción de las pacientes mastectomizadas en función de las diferentes técnicas quirúrgicas de reconstrucción.

**Métodos:** Se realiza un estudio retrospectivo, descriptivo y observacional de las pacientes reconstruidas en nuestro servicio del 2008 al 2011. Se comparan los niveles de satisfacción de las pacientes según la técnica quirúrgica empleada en la reconstrucción de mama mediante el empleo del test Q-BREAST, que se les envió por correo.

**Resultados:** Se obtiene una respuesta al Q-BREAST de 90 pacientes. No se encuentran diferencias estadísticas en los niveles de satisfacción en relación con la edad, el tipo de mastectomía realizada, el tratamiento coadyuvante y la existencia de complicaciones. Sí se observan unos niveles superiores de satisfacción en las pacientes reconstruidas con tejido autógeno frente a los implantes ( $p = 0,028$ ).

**Conclusiones:** Las pacientes reconstruidas con tejido autógeno presentan niveles más altos de satisfacción que las reconstruidas con implantes.

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## Introduction

Breast cancer is currently a disease of considerable interest given its high incidence in developed countries.<sup>1</sup> Its surgical treatment has evolved from the radical mastectomy of Halsted<sup>2</sup> to the current trend of performing breast-conserving surgery whenever possible. However, mastectomy is often necessary.

To minimize the psychological effect of the resulting change in breast shape,<sup>3</sup> the possibility of breast reconstruction is offered to these patients. Breast reconstruction methods can be divided into 2 groups:

- Reconstruction with implants: either with direct prosthesis or in two stages with the use of an expander and subsequent replacement with a definitive prosthesis.
- Reconstruction with autogenous tissue: pedicle flaps (latissimus dorsi with or without underlying prosthesis) and distance flaps or "free flaps" require microsurgical techniques.

Since 1983, when the British National Health Service recommended the assessment of patient satisfaction in order to determine the quality of the health service provided,<sup>4</sup> many surveys have proliferated to analyze the efficacy and effectiveness of healthcare interventions.

In 2007, Pusic et al.<sup>5</sup> performed a systematic review of all the published questionnaires that were answered by patients after breast surgery. Of these, only the Breast-Related Symptoms Questionnaire (BRSQ), which assesses results after

breast reduction, demonstrated adequate development and validation.

Therefore, these same authors published another article<sup>6</sup> in which they presented a new questionnaire, the Q-BREAST, which made up for the shortcomings of the previous surveys and presented adequate development and validation.

After confirming this growing relevance that is given to the opinion of patients about their own surgical results, we decided to conduct a study using the Q-BREAST, which aims to analyze the satisfaction of mastectomy patients according to different surgical reconstruction techniques.

## Methods

- a. *Study design:* we carried out a retrospective, descriptive, observational study that included all patients who had undergone breast reconstruction secondary to cancer surgery at the Reconstructive and Plastic Surgery Department of the Hospital Universitario Miguel Servet from January 1, 2008 until December 31, 2011. Excluded from the study were those patients who, at the time of data collection, had not yet completed the reconstructive process, presented active breast cancer disease, or had deceased.
- b. *Instrument for measurement:* the satisfaction data were obtained with the Q-BREAST test, which is comprised of 2 general topics (or domains), with 3 subsections each:
  1. Patient satisfaction
    - Satisfaction with the breast
    - Satisfaction with the general result
    - Satisfaction with the medical care

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