https://doi.org/10.29289/259453942022V32S2040

THE COVID-19 PANDEMIC AND LOSS OF BREAST RECONSTRUCTION SERVICES: HAS IT AFFECTED PATIENT QUALITY OF LIFE AND WELL-BEING?

Jenna Shepherd¹, Sue Rodwell², Rachel Moir², Mairi Fuller², Beatrix Elsberger¹, Yazan Masannat¹

¹University of Aberdeen, NHS Grampian – Aberdeen, United Kingdom.

Objective: Breast reconstruction has better postoperative quality of life (QoL) outcomes compared to mastectomy. The COVID-19 pandemic led to restrictions across the National Health Service, including breast reconstruction services. Breast reconstruction was unavailable in the Aberdeen Royal Infirmary from March to September 2020. This study aims to determine how many patients were affected and how this restriction has impacted patients' physical, psychosocial, and sexual well-being. Methods: Patients who underwent mastectomy or breast reconstruction surgery in the Aberdeen Royal Infirmary from September 18, 2019 to September 18, 2020 were identified from admission lists. Breast-Q questionnaires were administered via post to all eligible individuals. Participants were asked if they would have preferred reconstruction had it been offered. QoL scores were compared between two groups: 1) patients who underwent breast reconstruction prior to the restriction of services and 2) patients who were not offered but would have preferred reconstruction. Data analysis was carried out using the SPSS statistical software. Results: In all, 164 patients underwent procedures during the period, of which 147 were eligible to participate. Of the 147 patients, 105 (71.4%) completed questionnaires were returned. Of those who had a procedure post-COVID-19 restrictions, 15 (27.8%) stated they would have preferred reconstruction had it been offered. Lower QoL scores were observed in group 2 compared to group 1 in both psychosocial well-being (medians 49 and 63, respectively, p=0.022) and sexual well-being (medians 37.5 and 51.5, respectively, p=0.026). Conclusion: The loss of breast reconstruction services affected 27.8% of patients. We demonstrate the negative impact this had on psychosocial and sexual well-being, which should inform decisions regarding service provision in the future.

Keywords: Breast reconstruction. Breast cancer. Quality of life.

²NHS Grampian – Aberdeen, United Kingdom.