Breast cancer or chest cancer? The impact of living with a 'woman's disease'

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Abstract

Breast cancer in men is rare. Diagnostic methods and treatment are the same as for women, but awareness of male breast cancer is low, as breast cancer is often perceived as a disease specific to women. This can delay diagnosis and cause psychological distress by threatening men's gendered sense of identity. In this article, Helena Lewis-Smith reviews research exploring the psychosocial impact of breast cancer for men.

Key search terms: men, breast cancer, psychosocial impact, body image

Male breast cancer accounts for only 1% of all breast cancer diagnoses in the United Kingdom, yet it still claimed responsibility for 353 new cases and 73 deaths in 2012 (Office of National Statistics, 2014; Northern Ireland Cancer Registry, 2014; Welsh Cancer Intelligence and Surveillance Unit, 2014; ISD Scotland, 2014). Though rare, outcomes for breast cancer tend to be worse for men than for women, due to delayed detection occasioned partly by lower disease awareness (Thomas et al., 2010). Both diagnosis and treatment are the same across the genders, with treatment often bringing appearance-altering side effects (Giordarno, 2005; Harlan et al., 2010). Despite these similarities, the disparity between incidence rates has led to the perception of breast cancer as a disease affecting only women, with campaigns and interventions further maintaining gendered ideas through the 'pink ribbon culture' (Sulik, 2011). Low levels of awareness of male breast cancer among health professionals and the general public place men at a disadvantage (France et al., 2000)

What is the psychosocial impact of male breast cancer?

A large body of psychosocial research has been devoted to the examination of female breast cancer, whereas research exploring the psychosocial impact of male breast cancer is scarce. One small study reported significantly poorer life satisfaction and mental health among male breast cancer survivors compared with matched controls without a history of breast cancer (Andrykowski, 2012). Additional research identified low clinical levels of depression (1%) or anxiety (6%), but high levels of cancerspecific distress among 161 men diagnosed with breast cancer (23%; Brain et al., 2006). Various factors were associated with higher levels of distress, including fear and uncertainty, avoidance coping (i.e. strategies including denial, behavioural disengagement, substance use), a desire for more gender-specific breast cancer information, and impaired body image.

These findings may not be surprising, given that male breast cancer tends to be diagnosed at a more advanced stage than female breast cancer (Anderson et al., 2010). This is attributable in part to late diagnosis connected with the perception of breast cancer as a female-exclusive disease (France et al., 2000; Thomas et al., 2010). Men do not benefit from the levels of public and professional awareness and support that women experience (Al-Naggar & Al-Naggar, 2012). They are

disadvantaged both by the dearth of male-specific information and the incessant, non-inclusive 'pink' branding associated with breast cancer (Baker & Dick., 2006). Understandably, men report high levels of social isolation and are often reluctant to disclose their female-associated diagnosis to others due to fears of prejudice (France et al., 2000; Pituskin et al., 2007). Indeed, some men with breast cancer have reported that others have presumed them wrongly to be non-heterosexual (Donovan & Flynn, 2007).

Further, given the idealised physical nature of media representations of men in our ever increasing appearance-focused society, the diagnosis and especially the surgical treatment of male breast cancer are likely to cause further psychological distress by damaging body-image.

How does the diagnosis and treatment of male breast cancer affect body image?

Breasts constitute symbolic significance for women and indicate an expression of femininity and sexuality (Latteier, 1998), whilst male breasts (or rather "pecs") are often perceived as representative of masculinity and strength (Robinson et al., 2008). The development of a feminised disease inside a masculine body therefore causes concerns for men, who feel their masculinity is challenged due to a diagnosis of male breast cancer (Pituskin et al., 2007; France et al., 2000). Further, while all treatment avenues are associated with various appearance-altering side effects, the consequences of breast surgery are likely to pose the biggest threat to the body image of men with breast cancer, particularly when mastectomy (74%) is more common than breast conserving surgery (19%) as the form of surgical intervention (Tallón-Aguilar et al., 2011). Mastectomy can involve the complete removal of breast tissue, areola, and nipple, and can result in scarring and asymmetry of the chest. It is therefore unsurprising that men with breast cancer often experience altered body image, and by implication, sexuality, following surgery (Donovan & Flynn, 2007; Naymark, 2006).

Men report feeling less attractive, more self-conscious, and consequently hesitant to reveal their chests or wear clothing that displays the outline of their chest (France et al., 2000; Naymark, 2006; Pituskin et al., 2007). They may be reluctant to engage in social situations where they would ordinarily be topless (e.g. on the beach), for fear of unwanted questions (Naymark, 2006; Pituskin et al., 2007; Williams et al., 2003). When affected men go swimming in public, they may cover their chest with a towel when they are not in the water and turn away from others when they are (Donovan & Flynn, 2007; France et al., 2000). Further, they have reported feeling that the appearance of their post-mastectomy chest compromises others' appraisals of their masculinity (Donovan & Flynn, 2007).

The limited existing research therefore suggests that the perception of breast cancer as a "woman's disease" in combination with appearance-altering breast surgery may jeopardise an individual's sense of masculinity and threaten their body image, thus indicating the need for gender-specific psychosocial support for men diagnosed with breast cancer.

How can we provide greater levels of psychosocial support for men diagnosed with breast cancer?

The psychosocial impact of male breast cancer is under-researched compared with that of breast cancer in women, yet there is clear seminal evidence of psychological distress. Further exploration is needed to determine how the needs of affected men may differ from those of women. For

example, whilst treatment-related appearance dissatisfaction has been recognised to impair sexual relationships in women with breast cancer (Sheppard & Ely, 2008), the possibility that men may experience a similar problem does not appear to have been researched. More generally, considerable work is needed to improve public awareness of male breast cancer, so as to encourage men to carry out self-examinations while helping those diagnosed to feel less alienated from friends and society at large. Progress could be made by displaying suitable information leaflets in places where men often congregate (e.g. pubs, gyms), by using the national media, and by including male patients in breast cancer campaigns (France et al., 2000; Iredale et al., 2006). Further, health professionals should receive training that improves their knowledge of and sensitivity to the psychological needs of men with breast cancer. Finally, gender-specific information and avenues of psychosocial support should be provided to diagnosed men so as to help alleviate their concerns.

Key Points

- Breast cancer is often perceived as a gender-specific disease exclusive to women, consequently causing distress for diagnosed men.
- Research to date suggests that the diagnosis and treatment of male breast cancer can adversely impact upon body image and their gendered sense of identity.
- The impact of male breast cancer upon body image warrants further examination in order to ascertain the need for gender-specific psychosocial support.
- Public and professional awareness of male breast cancer and the provision of psychosocial support for those who suffer from it should be improved.

Information, support, and resources for male breast cancer are available through Breast Cancer Care (https://www.breastcancercare.org.uk/information-support/have-i-got-breast-cancer/breast-cancer-in-men) and Healthtalk (http://www.healthtalk.org/peoples-experiences/cancer/breast-cancer-men/topics)

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