Many factors may interfere with the ability of women newly diagnosed with breast cancer to cope with treatment. Nurses should be aware of patients’ needs during this critical time. The purpose of this study was to identify the educational needs and concerns of newly diagnosed patients with breast cancer after surgery. A phone interview with patients was conducted approximately one week after breast cancer surgery. A convenience sample of 200 patients was recruited from four hospitals within a large midwestern healthcare system. The subjects were interviewed by breast health specialists and navigators involved in their education and support and were asked to participate in a short interview during a surgical follow-up phone call. Study results indicate that fear of recurrence and anxiety regarding postoperative treatments accounted for more than 65% of the responses to the question “What concerns you most about your new diagnosis?” Emotional, social, and physical limitations were identified as most important in dealing with a breast cancer diagnosis. As breast health specialists and navigators, nurses can improve the quality of care for women with breast cancer and their families by providing additional support services and post-treatment information during the initial education and follow-up call.

At a Glance
- Patients with newly diagnosed breast cancer may experience fear and anxiety following surgery, as indicated in follow-up phone interviews.
- Patients need additional support services regarding community resources from their clinicians.
- Research continues to be needed to increase nurses’ understanding of how women approach the experience of living with newly diagnosed breast cancer.

Breast cancer is the most common form of cancer diagnosed in women in the United States. More than 250,000 women will be diagnosed with breast cancer in 2008, and approximately 40,000 women will die from the disease (American Cancer Society). When confronted with that information, women experience various feelings of fear, shock, sadness, disbelief, or other psychosocial distress. Most women, with or without psychosocial support, cope successfully with the psychological distress likely associated with living with breast cancer and adjust to and effectively manage their disease and survivorship. As many as 30%, however, experience episodes of persistent psychological distress and may benefit from interventions designed to support them emotionally, psychologically, socially, and spiritually (National Cancer Policy Board of the Institute of Medicine, 2004). For those women, psychosocial distress interferes with their ability to cope with cancer treatment and can persist across the disease continuum, ranging from feelings of vulnerability, sadness, and fear to more debilitating problems, such as depression, anxiety, panic, and feeling isolated or in a spiritual crisis.

In Meeting Psychosocial Needs of Women with Breast Cancer (National Cancer Policy Board of the Institute of Medicine, 2004), a review found that reports of psychosocial research in breast cancer have been increasing for the past 10–15 years but remain less than 7% of total citations for breast cancer research. Therefore, the present study sought to assess the early needs and concerns of newly diagnosed patients with breast cancer.