The purpose of this research was to investigate the differences in the effect of hysterectomy on body image, self-esteem, and marital adjustment in Turkish women with gynecologic cancer based on specific independent variables, including age, education, employment, having or not having children, and income. This cross-sectional study compared a group of women who underwent a hysterectomy (n = 100) with a healthy control group (n = 100). The study findings indicate that women who had a hysterectomy were found in worse conditions in terms of body image, self-esteem, and dyadic adjustment compared to healthy women. In terms of dyadic adjustment and body image among women who had undergone a hysterectomy, those with lower levels of income and education were found in poorer conditions. The study’s findings show that hysterectomies have negative effects on body image, self-esteem, and dyadic adjustment in women affected by gynecologic cancer. Nursing assessment of self-esteem and marital adjustment indicators and implementation of strategies to increase self-confidence and self-esteem are needed for high-risk women.

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The diagnosis and treatment of gynecologic cancers affect women physically as well as psychologically. Many factors exist related to psychological distress in women coping with gynecologic cancer, such as facing a life-threatening illness, painful and impairing treatments, and significant role changes, which, in turn, can cause psychological distress (Taskin, 2008). Among the various types of cancer, gynecologic cancer has been singled out for its major effect on body image and self-esteem. Self-esteem is considered a positive or negative attitude toward one’s self, and includes feelings of satisfaction with one’s self (Bayram & Sahin, 2008). Gynecologic cancer has been of special interest to scientific investigation because of its high incidence, undefined prognosis, the range of the ages affected, and the importance that the corresponding organ has on body image and self-esteem (Wang, Lambert, & Lambert, 2007). Despite the existence of a considerable amount of literature on the topic, an apparent lack of focus has occurred, particularly on the relationship between gynecologic cancer treatments (more specifically, hysterectomy) and dyadic adjustment (Bayram & Sahin, 2008; Wang et al., 2007). Given that sexuality is a major component of dyadic adjustment and that sexuality is directly affected by hysterectomy, the relationship between hysterectomy and dyadic adjustment deserves more attention (Taskin, 2008; Yen et al., 2008).

After a woman is diagnosed with gynecologic cancer, one major treatment is a hysterectomy, the surgical removal of the uterus. Studies conducted in Taiwan and Turkey suggest that, for many women, the uterus is the symbol of femininity, sexuality, fertility, and maternity, and the loss of this organ is identified as the loss of womanhood because giving birth to a child is an important function for many women (Bayram & Sahin, 2008; Yen et al., 2008). Following the surgery, women may also battle feelings of hopelessness and despair, which may affect their psychosocial status. Having a hysterectomy can have a huge impact on a woman’s life and relationships, as well as her perceived role in society (Okunlola et al., 2009; Reis, Engin, Ingec, & Bag, 2008).