

Quality of Life in Older Women With Early-Stage Breast Cancer in the First Year of Survivorship

Victoria Wochna Loerzel, PhD, RN, OCN®, Patrick McNees, PhD, FAAN,
Lorrie L. Powel, PhD, RN, Xiaogang Su, PhD, and Karen Meneses, PhD, RN, FAAN

Purpose/Objectives: To describe quality-of-life (QOL) changes in older women with early-stage breast cancer in the first year of survivorship and report on the effectiveness of a psychoeducational intervention on survivors' QOL.

Design: Secondary analysis, descriptive, repeated measure.

Setting: An academic setting in the southeastern United States.

Sample: 50 early-stage breast cancer survivors, aged 65 years and older.

Methods: Data were drawn from the Breast Cancer Education Intervention (BCEI) research study. Data for a six-month time period within the survivors' first year were available for an experimental group participating in a psychoeducational intervention and a control group.

Main Research Variables: Overall QOL and physical, psychological, social, and spiritual well-being subscales.

Findings: Older women reported positive overall QOL within the first year of survivorship, but overall QOL declined slightly over time. Physical and psychological well-being declined over time. Social well-being initially improved over time, but then declined. Spiritual well-being initially declined over time, then improved. Survivors had a downward trend in overall QOL during the study time period; however, experimental group participants had a smaller decline in QOL compared to control group participants.

Conclusions: QOL in older breast cancer survivors within the first year is positive. However, overall QOL declines over time. The BCEI attenuated decline of QOL in the experimental group compared to the control group.

Implications for Nursing: Few studies focus on older breast cancer survivors. This descriptive study is one of the first to describe changes in QOL and report the effect of interventions for older breast cancer survivors. Oncology nurses are in a position to recognize QOL issues and help older women maintain QOL in the first year of survivorship after treatment.

Key Points . . .

- ▶ Few research studies have focused on quality of life (QOL) in older women after treatment for early-stage breast cancer.
- ▶ Supportive interventions may slow the decline of QOL in older breast cancer survivors after treatment.
- ▶ Nurses should recognize that older women may experience declines in QOL after treatment despite interventions and education designed to improve QOL.

quality of life (QOL) (Boyle, 2006; Dow, 1991, 2003; Dow & Loerzel, 2005; Loescher, Welch-McCaffrey, Leigh, Hoffman, & Meyskens, 1989; Welch-McCaffrey, Hoffman, Leigh, Loescher, & Meyskens, 1989; Zebrack, 2000). Older women may experience other chronic illnesses in addition to breast cancer that may have an additional effect on QOL (Yancik & Ries, 2000).

Research demonstrates that women of different ages diagnosed with breast cancer have different concerns and needs (Cameron & Horsburgh, 1998; Wang, Cosby, Harris, & Liu, 1999). However, research on the needs of women with breast cancer who are aged 65 years and older and in the first year of survivorship is limited. The purpose of this article is to study QOL in older, early-stage breast cancer survivors in

Breast cancer is the most common cancer among women in the United States (American Cancer Society [ACS], 2008), and more than 2.3 million women are breast cancer survivors (ACS, 2007). The mean age of all women diagnosed with breast cancer is 61 years, and women aged 75–79 years have the highest incidence of the disease (ACS, 2007). As the baby boomer generation ages with increased life expectancy, the number of older women (aged 65 and older) diagnosed with breast cancer also is expected to increase (U.S. Census Bureau, 2005).

Older women with breast cancer receive standard treatments such as mastectomy, lumpectomy, radiation, chemotherapy, and hormone therapy (Chagpar et al., 2006; Du, Jones, & Zhang, 2005; Leonard & Malinowsky, 2005; Muss et al., 2005). Older breast cancer survivors are at risk for adverse effects from these treatments that may have an effect on

Victoria Wochna Loerzel, PhD, RN, OCN®, is an assistant professor in the College of Nursing at the University of Central Florida in Orlando; Patrick McNees, PhD, FAAN, is a professor and director of research, innovation, and technology in the School of Nursing and School of Health Professions at the University of Alabama at Birmingham; Lorrie L. Powel, PhD, RN, is the Thelma and Joe Crow Endowed Professor and associate professor in the Department of Family Nursing in the School of Nursing and in the Department of Urology in the School of Medicine, both at the University of Texas Health Science Center in San Antonio; Xiaogang Su, PhD, is an associate professor in the Department of Statistics at the University of Central Florida; and Karen Meneses, PhD, RN, FAAN, is a professor and associate dean for research in the School of Nursing at the University of Alabama at Birmingham. This research was sponsored by the National Institute of Nursing Research and the National Cancer Institute Office of Cancer Survivorship (R01-NR005332). No financial relationships to disclose. (Submitted December 2007. Accepted for publication February 7, 2008.)

Digital Object Identifier: 10.1188/08.ONF.924-932