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Impact of mastectomy on Quality of Life among breast cancer female patients in the Gaza–Strip.

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Aims: This study aims to identify the effect of spirituality on the quality of life among breast cancer (BC) female patients who underwent mastectomy in the Gaza-Strip (GS) and to determine if the use of positive religious coping strategies will help patients to continue their lives after mastectomy. **Methods:** This was a cross-sectional study in which a total of 173 female patients who had mastectomy in GS hospitals completed a face-to-face questionnaire designed by the researchers; which contains 2 sections including: socio-demographic data and spirituality components. All measures utilized a five-point Likert-type scale ranging from 1 (worst outcome) to 5 (best outcome). The study was conducted at European Gaza Hospital (n = 60) and Alshifaa Hospital (n = 113) in the GS from August 2015 to September 2016. The data was analyzed using SPSS software. **Results:** Among 173 female patients, the mean age was 51 years \pm 10. The overall possible positive effect of spirituality was estimated to be 83.8%. It was found that belief in destiny as well as doing devotions (praying and fasting) were helping to tolerate the new situation after mastectomy in 93 and 93.6% of patients, respectively. Interestingly, 52% of patients reported positive changes in their lives after the event of mastectomy (e.g. getting more family support and attention) and 53.8% were feeling optimistic about their future. Furthermore, 79.9% had a goal that made them strong and continued their lives normally as much as possible. **Conclusions:** The primary results of this study indicated that the studied population has very good spiritual well-being especially in the subscales of belief in destiny as well as doing devotions and religious coping is significantly used by BC patients. Therefore, providing BC patients with spiritual therapy may promote their spirituality and consequently their quality-of-life and healthcare outcome. As this will offer a powerful, low cost intervention in promoting spiritual well-being and improving quality-of-life for BC patients, there is an urgent need to implement this therapy as part of the routine medical care as soon as possible.

(3005) Impact of mastectomy on Quality of Life among breast cancer female patients in the Gaza-Strip

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Aims: This study aims to identify the various impacts of mastectomy on quality of life (QOL) among breast cancer (BC) female survivors in the Gaza-Strip (GS). **Methods:** This was a cross-sectional study in which a total of 173 patients who underwent mastectomy in the GS completed a face-to-face questionnaire designed by the researchers using a 5-point Likert scale which contained 5 sections including: socio-demographic data, physical (PWB), psychological (PsWB), social well-being (SWB) and family dynamics (FD). The study was conducted at European Gaza Hospital (n = 60) and Alshifaa Hospital

(n = 113) in the GS from August 2015 to September 2016. The data was analyzed using SPSS software. **Results:** Among our 173 patients, the mean age was 51 \pm 10 years. About 91% were unemployed, 52% had low income and 73% were of low educational level. It was found that 52.6% were obese (BMI \geq 30). Only 16.8% had breast conserving surgeries. In 43% of patients the surgery was \leq 1 year ago and in 31.2% \geq 4 years ago. The overall impact on PWB was by 52.2%. After undergoing mastectomy, 57.2% of cases were feeling fatigued, 48.6% were suffering from early menopausal symptoms as well as sexual dysfunction and 42.8% had sleep disturbances. The PsWB was impacted less significantly after mastectomy than at time of BC diagnosis (66.4% vs. 81.8%). The overall SWB score was negatively affected by 44.2%. Seventy percent of patients had a financial impact and decreased home activities. Interestingly, 57.8% claimed that involvement in family activities was not affected after mastectomy. Shockingly, 95.4% of women worried of getting divorced due to their illness. However, the overall impact on FD is estimated to be by 49.2%. Surprisingly, the diagnosis of BC had an impact on sexual performance in 27.1% compared to 19.1% after mastectomy. **Conclusions:** The overall PWB, PsWB as well as SWB have been found to be negatively impacted among mastectomized BC patients. The impact of BC on women's PsWB is strongest after the diagnosis of BC and this is probably due to the natural adaptation of patients to the diagnosis. Involving patient's family in the process of medical care may promote their SWB and FD as this will provide secure marital relationships. Improving patients' QOL should be one of the primary goals of BC treatment. Several appropriate interventions should be implemented before and after the surgical procedure takes place and outcomes of this study may help to provide a holistic medical care.

(3007) Understanding key symptoms, side effects, and impacts of HR+ and HER2- advanced breast cancer: qualitative patient interviews

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Aims: This study sought to identify and describe the most important and relevant HR+/HER2- advanced breast cancer disease symptoms, treatment side effects, and impacts from the perspective of patients diagnosed with the condition. **Methods:** One-on-one, 90-minute concept elicitation interviews were conducted in person or by phone with HR+/HER2- advanced breast cancer patients, who were asked open-ended questions from a semi-structured interview guide about their experience with breast cancer and its treatment. All interviews were audio-recorded and transcribed verbatim, and a list of codes was developed based on the interview guide and data to document and organize patient descriptions of their experiences. Using ATLAS.ti software, coded concepts were defined, supported by exemplary patient quotes, and analyzed for frequency of mention and saturation. Saturation was considered to be achieved if fewer or no new concepts were elicited in the final quartile of interviews than previous quartiles. **Results:** Fifteen qualitative interviews were conducted with women whose mean age was 66.0 years (SD = 12.4). Most patients self-identified as white/Caucasian (53.3%) or black/African American (40.0%). Patients reported metastases in the bone (86.7%), liver