

# Breast cancer and COVID-19: The need for enhanced psychological support for women with breast cancer during the pandemic

Dimitrios Charos<sup>1,2</sup>, Maria Andriopoulou<sup>3</sup>, Victoria Vivilaki<sup>1</sup>

## Dear Editor,

Statistical estimates show that the coronavirus pandemic affects cancer<sup>1</sup>. Reports in various countries, such as the Netherlands, the United Kingdom, and the USA, showed that during the pandemic there were fewer breast cancer diagnoses while cancer mortality continued to increase<sup>2,3</sup>. At the same time, screening was reduced or temporarily discontinued, patients had difficulty accessing and ensuring their care and prevention, delaying or postponing surgery, all of which had a significant impact on the care of women with cancer<sup>2,3</sup>.

The COVID-19 pandemic is a highly stressful event for breast cancer women due to the vulnerability they feel from the disease itself, the possibility of contracting the coronavirus, but also from the conditions created by the pandemic<sup>4,5</sup>. Breast cancer women due to immunosuppression are at increased risk of developing COVID-19 complications compared to the general population<sup>6</sup>. The restrictive measures had a significant psychological impact on women with cancer, which affected them socially and reduced social support<sup>6</sup>. Evidence from studies in countries such as Canada, the United Kingdom etc., shows that postponing surgeries, interruptions, delays and changes in their treatment due to overload of the health system have had an impact on women and increased anxiety, distress, depression, insomnia, fear of cancer recurrence, emotional distress, and emotional vulnerability associated with the pandemic<sup>4,5,7-11</sup>.

The specific population with breast cancer is particularly vulnerable to developing emotional disturbance during a pandemic. In the United Kingdom, job insecurity caused by the pandemic crisis has increased stress, emotional distress and depression in women already suffering from breast cancer, and has also affected their cognitive function<sup>10</sup>.

In many hospitals during the pandemic, caregivers' visits to patients were very limited and at times visits banned, leading patients to social isolation and frustration from being prevented to be visited by relatives<sup>5</sup>. In addition, the strict confinement in their homes reduced social contacts, increasing feelings of social isolation and resignation, while making it difficult for many families to express their feelings, and in the case of mourning to do this as they would have done normally<sup>5</sup>.

It is also worth noting that the COVID-19 pandemic has negatively affected the community midwives and other health professionals who care for breast cancer patients<sup>8,12</sup>. Health professionals and the community midwives experienced more stress, insecurity and exhaustion, which affected their functionality and their quality of life<sup>8,12</sup>.

The impact of the pandemic on women with breast cancer was significant and increased patients' vulnerability, emotional distress, depression, and anxiety<sup>4</sup>. Therefore, it is necessary to have a different support framework for breast cancer women during the pandemic crisis that will maintain their care<sup>5</sup>. Online interventions are valuable and can be effective in managing the stress and emotional distress of breast cancer women<sup>4,5,10,11</sup>. Web conferencing can provide psychological support, reducing emotional distress, fear, social isolation, stress and the accompanying effects of cancer during the pandemic<sup>4,11</sup>. Similarly, telephone supportive care has proved very useful<sup>5,8</sup>. In addition, the contribution of online support groups is important in increasing social support, helping to deal with vulnerability, and increasing quality of life<sup>4,5,11</sup>.

In conclusion, the COVID-19 pandemic crisis has placed a further burden on breast cancer women. The need to support women with breast cancer is more urgent than ever and

## AFFILIATION

1 Department of Midwifery, University of West Attica, Athens, Greece

2 General Anticancer- Oncology Hospital 'Agios Savvas', Athens, Greece

3 General Hospital of Nea Ionia 'Konstantopouleio', Athens, Greece

## CORRESPONDENCE TO

Dimitrios Charos. Department of Midwifery, University of West Attica, Athens, 12243, Greece. E-mail: char\_dim@yahoo.com

## KEYWORDS

COVID-19, breast cancer, psychological impact, psychological support



Received: 23 November 2022

Revised: 24 November 2022

Accepted: 2 December 2022

can, in part, be effectively achieved online. Communication with and support for women with breast cancer through digital media or telephone by the community midwives and other health professionals, would be very valuable during the pandemic.

## REFERENCES

1. Sung H, Ferlay J, Siegel RL, et al. Global Cancer Statistics 2020: GLOBOCAN Estimates of Incidence and Mortality Worldwide for 36 Cancers in 185 Countries. *CA Cancer J Clin.* 2021;71(3):209-249. doi:10.3322/caac.21660
2. Dinmohamed AG, Visser O, Verhoeven RHA, et al. Fewer cancer diagnoses during the COVID-19 epidemic in the Netherlands. *Lancet Oncol.* 2020;21(6):750-751. doi:10.1016/S1470-2045(20)30265-5
3. Gathani T, Clayton G, MacInnes E, Horgan K. The COVID-19 pandemic and impact on breast cancer diagnoses: what happened in England in the first half of 2020. *Br J Cancer.* 2021;124(4):710-712. doi:10.1038/s41416-020-01182-z
4. Massicotte V, Ivers H, Savard J. COVID-19 Pandemic Stressors and Psychological Symptoms in Breast Cancer Patients. *Curr Oncol.* 2021;28(1):294-300. doi:10.3390/currncol28010034
5. Chan JJ, Sim Y, Ow SGW, et al. The impact of COVID-19 on and recommendations for breast cancer care: the Singapore experience. *Endocr Relat Cancer.* 2020;27(9):R307-R327. doi:10.1530/ERC-20-0157
6. Shinan-Altman S, Levkovich I, Tavori G. Healthcare utilization among breast cancer patients during the COVID-19 outbreak. *Palliat Support Care.* 2020;18(4):385-391. doi:10.1017/S1478951520000516
7. Li J, Santa-Maria CA, Feng H, et al. Patient-reported outcomes of breast cancer patients during the COVID-19 outbreak in the epicenter of China: A cross-sectional survey study. *Clin Cancer Res.* 2020;26(18\_Suppl):S07-S02. doi:10.1158/1557-3265.COVID-19-S07-02
8. Crowther S, Maude R, Zhao IY, Bradford B, Gilkison A. New Zealand maternity and midwifery services and the COVID-19 response: A systematic scoping review. *Women Birth.* 2022;35(3):213-222. doi:10.1016/j.wombi.2021.05.008
9. Choobin MH, Mirabolfathi V, Chapman B, Moradi AR, Grunfeld EA, Derakshan N. The Impact of COVID-19 Outbreak on Emotional and Cognitive Vulnerability in Iranian Women With Breast Cancer. *Front Psychol.* 2021;12:663310. doi:10.3389/fpsyg.2021.663310
10. Chapman B, Swainston J, Grunfeld EA, Derakshan N. COVID-19 Outbreak Effects on Job Security and Emotional Functioning Amongst Women Living With Breast Cancer. *Front Psychol.* 2020;11:582014. doi:10.3389/fpsyg.2020.582014
11. Andriopoulou M, Charos D, Stergiadi E. The impact of cancer on patients and their caregivers, and the importance of empowerment. *Archives of Hellenic Medicine.* 2018;35(5):601-611. Accessed November 24, 2022. <https://www.mednet.gr/archives/2018-5/pdf/601.pdf>
12. Bradfield Z, Hauck Y, Homer CSE, et al. Midwives' experiences of providing maternity care during the COVID-19 pandemic in Australia. *Women Birth.* 2022;35(3):262-271. doi:10.1016/j.wombi.2021.02.007

### CONFLICTS OF INTEREST

The author has completed and submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest and none was reported.

### FUNDING

There was no source of funding for this research.

### ETHICAL APPROVAL AND INFORMED CONSENT

Ethical approval and informed consent were not required for this study.

### DATA AVAILABILITY

Data sharing is not applicable to this article as no new data were created.

### PROVENANCE AND PEER REVIEW

Not commissioned; internally peer reviewed.

### DISCLAIMER

The views and opinions expressed in this article are those of the authors.