SUMMARY

Breast cancer is the most common neoplasm in occidental women.The diagnosis of breast cancer is a very traumatic experience. Women with breast cancer report continued distress resulting from concerns of the diagnosis, and aspects of the physical, psychosocial and spiritual domains. The degree of stress generates information needs as well as relevant information leads to better patient outcomes. The nurse must bear in mind that the amount of information each woman wants about her disease or proposed treatment will vary and it is important for the nurse to find out what each individual wants to know.

The aim of the present study was to identify the informational needs and concerns among women with breast cancer after surgery. To fulfill the aim of the present study, the following ***research questions*** were formulated:

1- What are the informational needs of women with breast cancer after surgery?

2- What are the concerns of women with breast cancer after surgery?

The study was conducted at the female surgical departments in Benha University Hospital, Teaching Hospital and NCI, Cairo University. The study subjects included 200 patients aged from 20 to 65 years, and had undergone modified radical mastectomy or breast conserving surgery. Besides, will undergo chemotherapy or radiotherapy after surgery.

Implementing this study required three tools:

Part I: Patients' assessment sheet, constructed by the researcher, it consists of:

A- Socio demographic data related to patients including (age, marital status, level of education, working status,... etc).

B- Illness related data sheet including A number of days since diagnosis, type of surgery performed,…etc).

Part II:

The Toronto Informational Needs Questionnaire _ Breast Cancer (TINQ-BC), developed by ***Galloway et al. (1997*), to elicit women's perception of their informational needs related to their experience of breast cancer. The instrument comprises 52-item scale, including five sub scales: disease (9 items), investigative tests (8 items), treatment (16 items), physical I (8 items), physical II (3 items) and psychosocial functioning (8 items). Each item was rated on the scale from 1 (not important) to 5 (extremely important). The questionnaire yields a total score with a minimum of 52 and a maximum of 260.

Part III:

It is a checklist for concern that assesses women's emotional needs and fears experienced following surgical intervention regarding to the effect of disease and treatment on patient and family ***(Broomfield and Humphris, 1999).***

Data collection phase was lasted from beginning of June 2009 to beginning of December 2009 in surgical departments at Benha University Hospital, Benha Teaching Hospital and the National Cancer Institute Cairo University.

The main findings of this study were:

- As regards the sociodemographic data, more than half (54.5%) of the studied group were within age group of 40-< 60 years with mean age of 47.10± 11.03 years and a range of 25-65years. More than two thirds (70.0%) were married and 70.5% were living in rural areas. More than quarter (28.5%) of the studied group were illiterate and 81.0% were house wives.
- Concerning illness related data of subjects, three quarters (75%) had undergone MRM and represented by breast mass (71.5%), less than three fifths (57%) of the studied group were diagnosed in the second stage, pre menopausal (54.5%), and the time since diagnosis was less than 2 months for (46.5%) of them.
- Regarding to their informational needs, the areas of greatest needs for the studied group were about the physical needs as well as treatment and psychosocial needs in an equal percentage. While the area of lowest informational needs was related to investigative tests.
- Concerning their physical needs almost two thirds (66.0%) were highly in need to know how to care for their wound or incision.
- About treatment more three fifths (60.5%) were highly in need to know how they will feel after treatment.
- The major concerns were about their inability to complete their social role as mothers.
- There were highly statistically significant differences (P<0.001) between total informational needs and total concerns with sociodemographic characteristics as women's age, marital status, educational level and occupation.
- Considering illness related data, there were highly statistically significant differences (P <0.001) between general total of

informational needs and time since diagnosis and source of information, while there were no statistically significant differences with disease stage at diagnosis and period of hospitalization.

- There were highly statistically significant differences ($P<0.001$) between concerns and incidence of menopause, and previous family history.
- There was positive (good) correlation between total informational needs and total concerns.

The following are the main recommendations:

- There is a need to plan and conduct an in service training program to the oncology nursing staff to acquaint them with informational needs and concerns to provide patients with their unmet informational needs prior to their discharge.
- Good communication between cancer patients and the health care team is important since it helps patients express their feelings and alleviate their emotional stress.
- Using educational program on different cancer treatment units to improve quality of life during the treatment.