

# Hope & Healing

Having breast reconstruction after a mastectomy can be as much of an emotional decision as it is physical. We speak to three women who decided reconstruction was the best way forward

BY SARAH MURRAY | PHOTOS BY HANNAH RICHARDS

Many women have a love/hate relationship with their breasts. We take them for granted, complaining they are too small, too saggy – sometimes even lopsided. But what happens when you're told you have breast cancer and are faced with having one breast, and sometimes both, cut off?

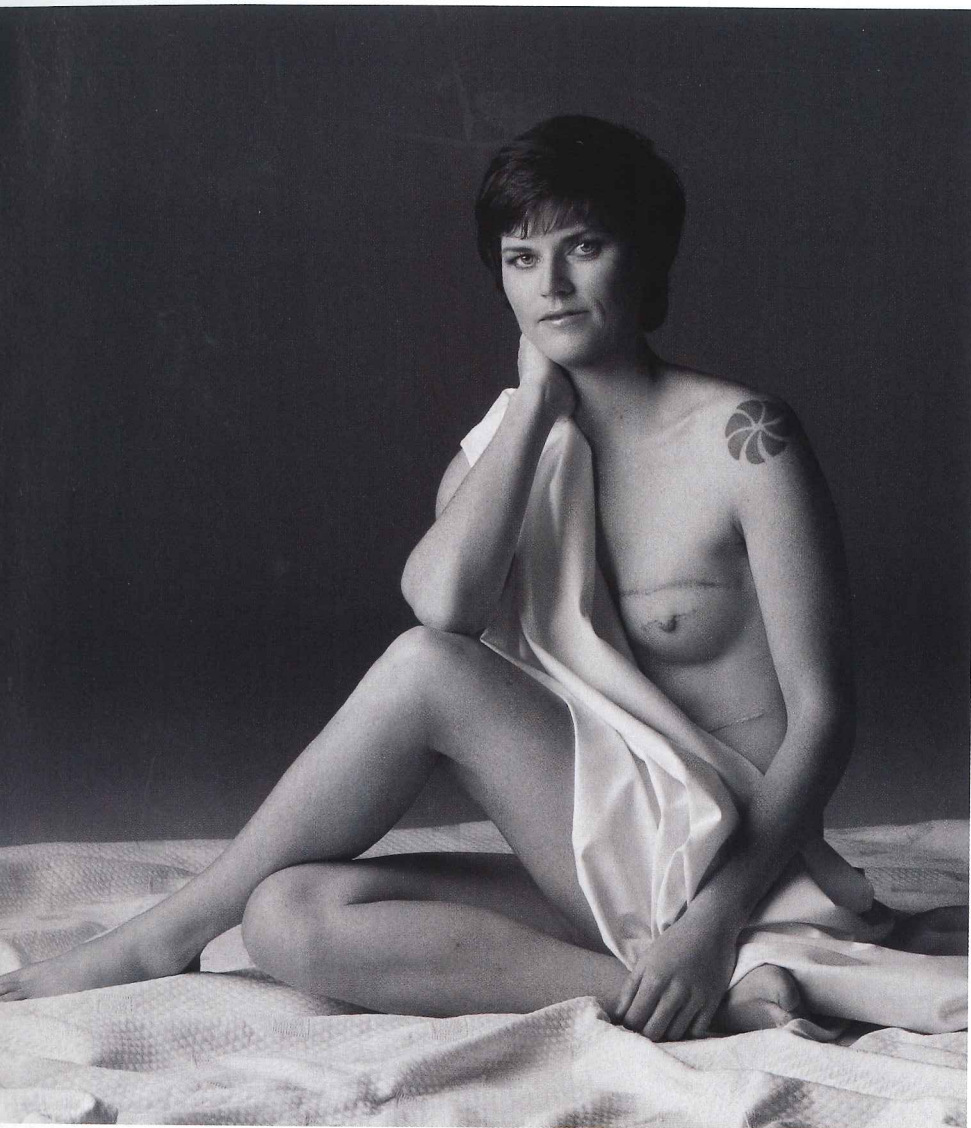
For approximately 50% of women who receive the news they have breast cancer, a mastectomy is a reality. And surprisingly, only an estimated 15% of those will decide to have breast reconstruction, either at the time of their initial surgery or later. Choosing reconstruction is as much a psychological decision as it is physical. Some women are not suitable for the procedure, and others say they simply can't face the additional surgery after the ordeal of cancer treatment.

Dr Meredith Simcock from Auckland's Middlemore Hospital says there are also those who decide against reconstruction because they believe the myth a new

breast may hide another cancerous lump further down the track. She says studies show that's not the case. "The increased risk of breast cancer is caused by the fact they have breast cancer. Reconstruction won't hide breast cancer; we can still find it if it's going to come back."

She also believes reconstruction is an important step for women who want to be back to the way they were before. "We're restoring femininity, restoring self-image, restoring confidence. I think they feel they've treated the cancer and now they're treating themselves," Simcock says.

As October is Breast Cancer Action Month, and October 16 is National Breast Reconstruction Awareness Day, NEXT magazine had the opportunity to photograph three women who've had a mastectomy and subsequently reconstructive surgery. They bravely bared all and shared their stories with us. >>



## TESS ALEXANDER-WARD

When Tess Alexander-Ward was 30 and going through chemotherapy, she felt she had a different set of worries compared to women battling breast cancer in their 50s and 60s. Yes, she wondered how she'd look following a mastectomy, and naturally she had thoughts about her own mortality – but she also thought about life, her future and how it would all affect any potential plans of having children.

"You're focusing on getting over the cancer and the treatment... but there are all these other issues to think about. Because my mum had breast cancer I was aware of a lot of these things. But I think someone young might not realise there's a chance their ovaries might shut down and all of that," the now 33-year-old events facilitator says.

Chemotherapy is a fickle healer. Where it will kill cancerous cells, it can make you feel nauseous, cause your hair to fall out and affect fertility. With 75% of breast cancer occurring in women over 50, fertility is not

always a concern – but for Alexander-Ward, it really was.

"When I did chemo most women there were older – they'd had their children," she recalls.

Instead of leaving it to chance, or luck, she froze some eggs as a 'backup' for her and her partner of 10 years. With this on her mind she initially focused on getting well rather than having breast reconstruction.

As a slim built, small-breasted woman, Alexander-Ward thought "it wasn't like I was going to miss it [her breast] that much", choosing instead to wear a prosthesis. She wore the jelly-like breast-shaped mould for a year and says it wasn't that difficult or heavy to wear.

And at the time, she was more relieved the lump was gone and the surgery had got rid of the cancer. But she did wonder whether people would notice or not.

"When you look down, after a mastectomy, you're incredibly flat [on one side]. A

*'When I did* chemo most women there were older, they'd had children. But I was just starting to think of those sorts of things'

prosthesis just made me feel a little bit more secure that no one was going to look at me and think 'what?!'"

As long as Alexander-Ward didn't wear a low-cut top, the prosthesis couldn't be seen. But when it came to, for example, donning a bikini for the beach in summer, people would notice. So a year after her initial surgery, and after two rounds of chemotherapy, she called her surgeon.

"I just thought I've possibly got 60 years left of my life... so I might as well get the reconstruction done and not have to wear a prosthesis for the rest of it."

Because she didn't have much spare skin on her stomach or back to use for the reconstruction they opted for a method in which an expander is put under the skin to stretch it, before inserting an implant.

"I'm much more comfortable now – in my appearance mainly," Alexander-Ward says about her new breast.

"And I feel more comfortable to wear tighter clothing like swimwear. With the prosthesis I was always a bit worried it would fall out, or that people could tell."

Not only that, it has set her mind at ease around getting undressed in front of other people in changing rooms – and not just because of how she would feel.

"I think I was just getting to a point in life where it didn't matter if someone saw me naked... I'd got over all the teenage insecurity stuff. Then after the mastectomy I was like 'oh gosh'. Probably not so much for me but I thought other people might see it and get a fright."

As for children, Alexander-Ward is still having hormone therapy with monthly injections of tamoxifen and Zoladex. It's the latter which is often used for younger women to keep them in a menopausal state, meaning there are no extra hormones for cancer to grow on. But, she says with a smile, "I've spoken with my oncologist and hopefully next year I'll be off everything and be able to try for kids." >>



## LEIGH COOPER:

It was just an ordinary night, five years ago, when Leigh Cooper was taking off her T-shirt for bed that she felt it. It was big. And for the life of her she couldn't understand how she hadn't noticed that hardened lump on her right breast before. Cooper, who was single at the time, went to the doctor, who swiftly sent her for an ultrasound. It was here that she was told 'it wasn't looking particularly good', and after a biopsy she knew - it was cancer.

"And that was that," says a teary-eyed Cooper, shrugging. "They found two lumps in the same breast. My surgeon decided it had to be a mastectomy - but said they could do a reconstruction at the same time. That was definitely the option for me. Waking up and looking down and still having a breast there was a huge thing for me psychologically. I felt like I was still me."

The 46-year-old business analyst spent 12 hours 'under the knife' while surgeons worked to remove her breast. They then used the 'transverse rectus abdominis myocutaneous' - TRAM flap - procedure, which allowed them to take tissue from her stomach to reattach to the blood cells in her chest - effectively building her a new breast.

The mottled scarring from where a skin graft was needed doesn't bother her, but it does feel different she admits: firm rather than soft.

"It's odd because it's not a breast, and it's never going to be a breast. It's my tummy," Cooper says matter-of-factly.

Six surgeries followed, one a reduction of her left breast from her naturally sized F cup to a more subtle DD to balance things up with her newer, smaller breast. Then there was the chemotherapy, the radiation therapy and eventually hormone therapy, the latter she is currently still doing. And right in the middle of it all, her dad lost his battle with lung cancer five months after his diagnosis. It was a tough time, the toughest. But throughout it all Cooper remained positive - something she believes made a huge difference. While her family were grieving, her friends stepped in to make the best of a bad situation.

"One of the girls I worked with spread-sheeted and came to all my initial doctors' appointments. She even turned my hospital room into a project room and just carried on with work as if it [the

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cancer] was just an inconvenience."

There were pick-ups and drop-offs, meals delivered and a phone tree organised to filter down information about Cooper. Her friends even put together a 'chemo party' at a bar in Auckland's Newmarket to boost her spirits, complete with a 'chemo cocktail' to make special note of the occasion.

At the end of that first year her life had changed course completely but by Christmas she had an unexpected compliment. While at the races a fellow race-goer walked past her and shouted out "Nice rack!" He thought he was being cheeky but a very chuffed Cooper went straight back to tell her surgeon "Good work!"

This month Cooper, who now has a partner and stepson, is off on an adventure to India and Nepal to celebrate five years cancer free. Undoubtedly her view on life and her body image has changed since the night she first found that lump - and she says it's for the better.

"When you're faced with losing something entirely you realise how stupid you were to think 'I want to be thin or I want to be tall'. At the end of the day we're lucky to have what we've got."

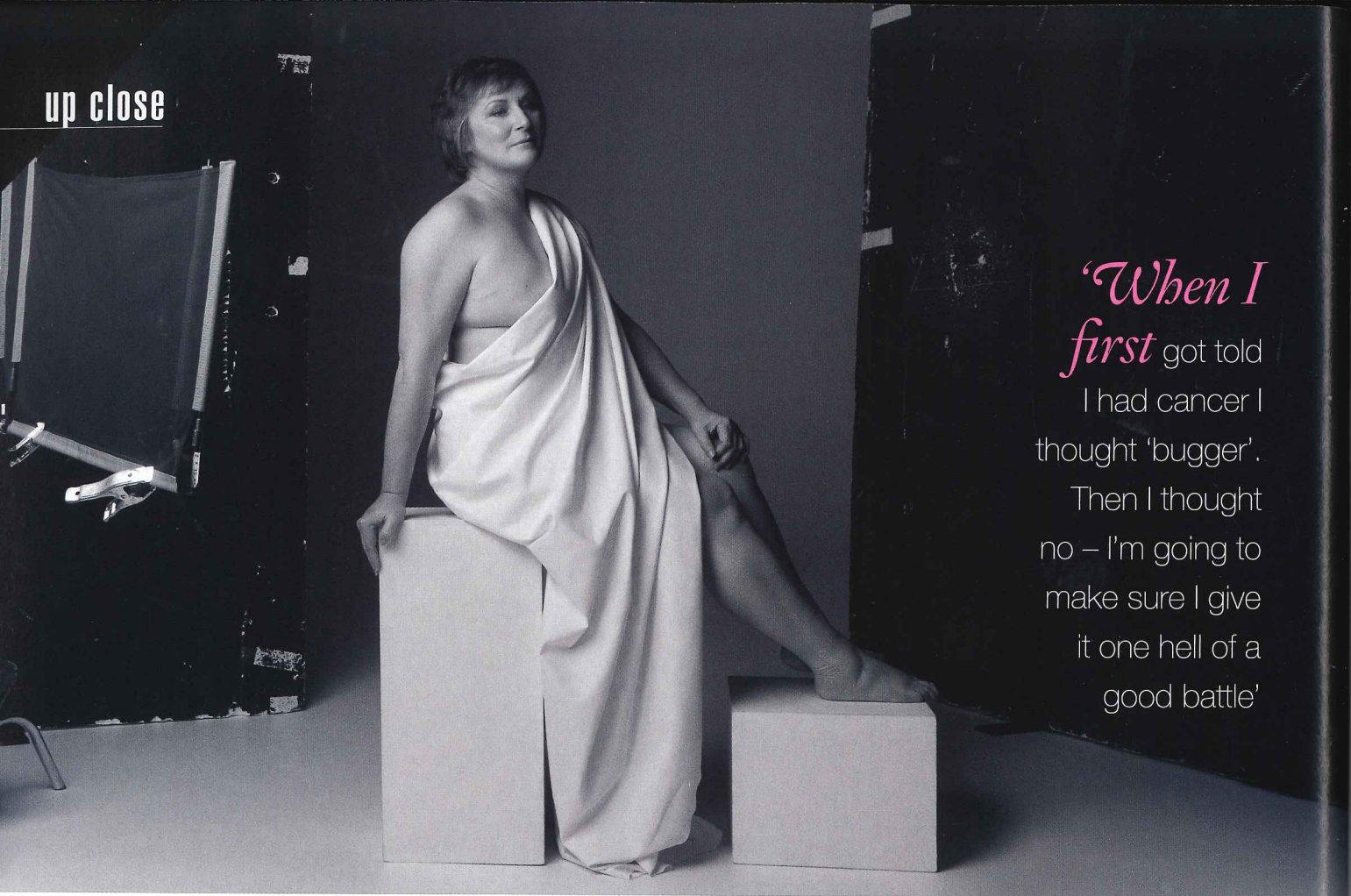
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up close





up close



*'When I first got told I had cancer I thought 'bugger'. Then I thought no – I'm going to make sure I give it one hell of a good battle'*

## JAN SEAL

When we meet Jan Seal she's walking through a busy south Auckland mall in a grey sweatshirt that says 'Sydney' on it. She looks like any other woman browsing the stores, but she's a bit different; beneath her sweatshirt is a lengthy scar from her breast reconstruction surgery that goes from the middle of her back, running parallel to her rib cage, all the way to her chest.

"It feels a bit weird at times," Seal says. "But I know it's me, part of me. There's no plastic in there or anything; it's just all muscle."

That muscle came from the latissimus dorsi – the broadest back muscle. It's been used for breast reconstruction post mastectomy since 1906, mainly because its broadness provides ample bulk for reconstruction – an implant often doesn't even need to be inserted.

Despite being a popular choice, it wasn't an easy decision for Seal, 51, because she was unsure about how she'd look and feel afterwards. When meeting with the surgeon they discussed reconstruction simultaneously with the mastectomy, but a nervous Seal said she'd have to sleep on it before she made a choice. She woke up the next morning with a hand on her right breast and said to herself 'I think I need to see a plastic surgeon!'

"I just couldn't imagine not having anything there. So I made the appointment." Seal still thinks of it as one of the best decisions she's ever made – using that back

muscle just felt right. She also made another monumental decision, much to the displeasure of her oncologist, to go against advice and not have chemotherapy.

"I just said no. They had removed about seven lymph nodes and the breast so I thought if it hadn't spread then that was good. I'd also seen my dad go through chemo and watched how he'd reacted to it. He'd go in on a Thursday for chemo and was crook for the next week. I just wanted to get my life back on track."

Seal says she will have to take the hormone drug tamoxifen for the next five to 10 years – which means hot flushes, sweats, and the risk of clots. But she is happy with her decision, even if her specialist wasn't. "I thought life's a gamble so take the gamble."

It was just over a year ago when Seal, who is currently single, was told she had cancer and her breast had to be removed. She asked them very nicely if they could please save her nipple but they sternly told her 'no'. Now, as one of the final steps of reconstruction, there's a chance she'll get it back.

"I went to see the plastic surgeon and he said 'I want you to think about a nipple. You've got three choices – surgical, tattooed or a stick-on one for special occasions'. My friends wanted to know if I got tassels or diamantes to go with the stick-on version," she says laughing. "I think I'll have mine

done surgically," she adds.

It's clear Seal has a light-hearted approach towards her plight, but she says this just comes from her trying to stay positive.

"When I first got told I had cancer I thought 'bugger'. Then I thought no – I'm going to make sure I give it one hell of a good battle. Cancer is just six letters – but it has so much power. I'm trying to dictate the terms... I feel like saying 'I got rid of you, I've got a new boob – now try anything else and look out!'"

Of course, even while remaining positive there are still times when she feels upset, and it wasn't until July this year when Seal took a moment, sat down, and cried. Like her chest, her body image has undergone a transformation. She no longer spends time worrying about her weight – instead she focuses on being healthy. And although initially hesitating about baring all for the NEXT shoot, she's happy she's done it and feels proud of the changes to her body.

"I think I'm more accepting of my body. It does look different but it's still my body. I'm more confident and more self-assured that everything is okay. I really enjoyed sitting there watching myself transform. Usually I'll have a shower, wash and dry myself, not look and just get dressed. This photo session has made me realise I've got to look. In a way it's made me more aware." □