

## Positive psychology interventions in patients with breast cancer

### Intervenciones desde Psicología Positiva en Pacientes con Cáncer de Mama

Guadalupe Gutiérrez-Leal <sup>a</sup>, Diana L. Mendoza-Madero <sup>b</sup> Alberto Gómez-Zarco <sup>c</sup>, Alejandra Lima-Quezada <sup>d</sup>, & Ana Y. Escudero-Castelán <sup>e</sup>

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#### Abstract:

Cancer is characterized by the accelerated reproduction of cells and the damage that this causes to people's health, depending on the affected organ or tissue. Breast cancer is not exclusive to women; it also affects men; however, it is less frequent. In 2018 it was announced that in Mexico, two out of 10 deaths in women were due to corresponding breast cancer from 2011 to 2016. This review aims to know the effectiveness of psychological intervention programs since the positive psychology in breast cancer patients. The bibliographic search was carried out in Redalyc, Scielo, Dialnet, PubMed, and Google Scholar. It was taken into account that the bibliography was not older than ten years, and interventions involving girls, boys, and adolescents were ruled out. In the results, it was found that interventions with positive psychology applied to patients with breast cancer mainly work both positive and negative emotions, well-being, optimism, and self-concept in women who experience this situation, with results focused on improving problem-solving, coping with illness. It is concluded that cognitive-behavioral, psychological intervention, and positive psychology effectively help to adaptively cope with changes to the new lifestyle caused by breast cancer. Future work with men is considered important, even if the sample was small, due to the low prevalence of the diagnosis in them, so it is essential to know the effects that these interventions have in this population, as well as the factors that tend to affect mainly during and after the disease process.

#### Keywords:

Positive psychology, chronic pain, breast cancer, intervention in adults

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#### Resumen:

El cáncer se caracteriza por la reproducción acelerada de células y los daños que éste causa a la salud de las personas dependiendo del órgano o tejido afectado. El cáncer de mama no es exclusivo de mujeres, también afecta a los hombres, sin embargo, es menos frecuente. En 2018, se dio a conocer que en México dos de cada 10 muertes en mujeres era debido a cáncer de mama correspondiente en el periodo de 2011 a 2016. El objetivo de esta revisión, es conocer la eficacia que han tenido los programas de intervención psicológica desde la psicología positiva en pacientes con cáncer de mamá. La búsqueda bibliográfica se realizó en Redalyc, Scielo, Dialnet, PubMed y Google Académico. Se tomó en cuenta que la bibliografía tuviera un periodo de antigüedad no mayor a 10 años, y se descartaron intervenciones donde participan niñas, niños y adolescentes. En los resultados se encontró que las intervenciones con psicología positiva aplicada en pacientes con cáncer de mama trabajan principalmente emociones tanto positivas como negativas, bienestar, optimismo y autoconcepto en las mujeres que viven esta situación, con resultados enfocados en la mejora de resolución de problemas, afrontamiento a la enfermedad. Se concluye que la intervención psicológica cognitivo conductual y la psicología positiva ayudan eficazmente a afrontar de manera adaptativa los cambios al nuevo estilo de vida ocasionado por el cáncer de mama. Se considera importante el trabajo futuro con hombres, aunque la muestra fuera pequeña, debido a la baja prevalencia del diagnóstico en ellos, por lo que es primordial conocer los efectos que tienen estas intervenciones en esta población, así como los factores que suelen afectar principalmente durante y después del proceso de la enfermedad.

#### Palabras Clave:

Psicología positiva, dolor crónico, cancer de mama, intervención en adultos

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<sup>a</sup> Corresponding author, Universidad de Sonora Departamento de Ciencias de la Salud, <https://orcid.org/0000-0002-1915-9316>, Email: [leal.1419.11@gmail.com](mailto:leal.1419.11@gmail.com)

<sup>b</sup> Universidad de Sonora Departamento de Ciencias de la Salud, <https://orcid.org/0000-0001-8264-8422>, Email: [diiiana23@gmail.com](mailto:diiiana23@gmail.com)

<sup>c</sup> Universidad de Sonora Departamento de Ciencias de la Salud, <https://orcid.org/0000-0001-7612-3304>, Email: [psic.albertogomez@gmail.com](mailto:psic.albertogomez@gmail.com)

<sup>d</sup> Universidad Autónoma del Estado de Hidalgo, <https://orcid.org/0000-0001-8768-7340>, Email: [li227408@uaeh.edu.mx](mailto:li227408@uaeh.edu.mx)

<sup>e</sup> Universidad Autónoma del Estado de Hidalgo, <https://orcid.org/0000-0001-6466-1578>, Email: [yare.h2693@gmail.com](mailto:yare.h2693@gmail.com)

## INTRODUCTION

Although psychooncology work is important, it has been estimated that about 30% of patients had emotional alterations such as high levels of anxiety and between 15% and 20% presented for depressive symptoms require professional attention (Fuentes & Blasco, 2012; Bárez, 2002; Millar, Purushotham, McLatchie, George & Murray, 2005; Söllner, Maislinger, König, De Vries & Lukas, 2004; Skarstein, Aass, Fossa, Skovlud & Dahl, 2000), however, the number of patients requesting such care is very small, as in many cases patients must continue the process through their own resources.

Psychological intervention aimed at patients in the disease process is important both for changes in their context and for those experienced by the individual “on a physical level, sentimental and spiritual” as it provides tools that help endow the patient with skills to deal as adaptively as possible with the process that patients live, unlike those who do not receive psychological support that they often present emotional problems that do not only usually manifest during the process but also after treatment in some cases (Galdolfi & Legelen, 2014; Scharf, 2005).

According to the above it is essential to carry out the psychological application works focused both on the emotional and spiritual sentimental according to the changes that are happening in the patient's life, and that they function in the most assertive way possible, so interventions made to cancer patients since applied positive psychology have targeted people's positive resources by talking about positive emotions, character strengths, and personal meanings, including spiritual and existential ones (Ochoa & Casellas, 2017; Ochoa, 2014; Rashid & Seligman, 2013).

García & collaborators (2018) they refer in their work to the importance of working with emotions considered negative, mentioning the following “negative emotions such as anger, sadness, anxiety, fear, and others, which can make it difficult to cope with the disease and affect its well-being and quality of life” (p, 324). these authors argue that not only should focus on intervening in negative emotions, it is also important to deal with positive emotions, this to facilitate, maintain them and at the same time enhance them, as the oncological patient cannot only experience negative emotional states. in your life you still find aspects with enough meaning, creativity and other circumstances that can bring you pleasure and joy.

Emotions can be divided into two, where the first one deals with expressions such as fear, anger, pleasure, sadness, these can be seen as interpersonal expressions. The second is directed toward psychophysiological reactions, such as fear and anxiety, which trigger a change in blood circulation, in blood pressure (Martínez, Lozano, Rodríguez, Galindo & Alvarado, 2014; Sánchez, 2002).

Coping refers to a person's response to a stressful situation, can manifest itself through behavioural and cognitive activity which

works to preserve both mental and physical integrity, another important aspect that is exposed is, that people at the time of receiving a positive diagnosis can have an emotional impact, since it is considered a threatening situation, as well as burden with thoughts of uncertainty that affect the person's coping capacity, this impact is important as a radical change in the patient's life is generated (Ojeda & Martínez, 2012, Lipowski, 1970).

Patients who are both cognitive and behavioural away from their treatment have been reported to be those who perceive cancer as harm or loss, being a type of coping focused on avoidance, on the contrary, Patients who leaned toward seeking information about treatments are related to the style of approach coping strategies, resulting in better adherence to treatment and positive disease outcomes (Castillo, Galindo, Marván & Landa, 2018; Frank & Roesh, 2006). On the other hand, optimism and coping can be thought to play the same role, but optimism is the explanation for the coping people come to have when they face negative experiences. Optimism generates a more effective coping toward the disease in the person, positively influencing the risk of disease (Mera & Ortíz, 2012; Scheier & Carver, 1985).

For good coping to be carried out during the disease, there are a number of factors that can help the patient, such as the environment in which he develops, social support, as well as in the functioning of the family, another factor is about the same disease. this has to do with the stage of the disease, the type of pathology, as well as the treatment to follow. Another reason why the patient does not have a good coping is due to the socioeconomic level, as is the fact that they have had a family history with cancer (Acosta, López, Martínez & Zapata, 2017). “Post-traumatic resilience or growth could be defined as the ability of people to generate responses to personal growth and maturation, without denying the experience of experienced adversity, giving it meaning or meaning” (Guil, Zayas, Gil, Guerrero, González & Mestre, 2016; Cota & Gil, 2008; Vázquez & Castilla, 2007).

It has been revealed that living with cancer is not only having thoughts about death, but there is also a burden on thinking how the rest of life is going to be lived, making future plans possible, however, these same thoughts create a way for people to cope with unadaptive thoughts by helping them cope with the disease. Some people choose to seek help in meditation, whether religious or not, others in distracting activities, achieving a sense of peace and strength (Gómez, Hernández, Romero & Zamora, 2017; Instituto Nacional de Cáncer, 2013). The aim of this research is to carry out a bibliographic review, to make known some of the interventions that have been effective since psychology in patients with breast cancer.

## METHOD

A search was carried out for articles in which studies were identified that were relevant and focused mainly on cognitive-behavioural interventions related to positive psychology and carried out in people with breast cancer, which was elaborated out through databases such as: Redalyc, Scielo, Dialnet, Pubmed and Google Scholar.

As inclusion criteria for the selection of articles, it was considered that they fulfilled a period of no more than 10 years, and as exclusion criteria it was considered that the articles consulted (cited) were focused on interventions directed at women with pain chronic due to breast cancer, and interventions carried out with children or adolescents

## RESULTS

During the bibliographic searched, 40 articles were found; however, only five articles were selected that met the established criteria, in which the following results were obtained as shown in Table 1, where the title of the article, the sample that participated, the strategies that were used during the intervention and the results obtained once the study was completed.

## DISCUSSIONS

The results of the analysed articles show relevant data, that psychological work approached from positive psychology, such as the psychological well-being of women with breast cancer, and quality of life are higher in cases where psychological therapy is attended, showing relevant changes in these patients. On the other hand, the emotional intelligence that patients have has also been investigated, and it has been found that it is highly related with the resilience since those who have high emotional intelligence according to the instruments usually have high levels of resilience. Coping strategies are more related to feelings, at the time of the news of the diagnosis, psychological therapy from positive psychology in these patients helps to reinforce the strengths of character, so that psychological therapy with positive psychology implement is useful according to the collected data both for patients who have been diagnosed, th disease and for those who have already received surgical treatment.

In addition to highlighting the importance of teaching patients with breast cancer assertive communication very commonly approached effectively by positive psychology, which helps patients to communicate with the people around them, mainly their support network (Fernandez et al., 2011).

Carrying out programs focused on improving the perspective of patients by providing psychological intervention with techniques, with scientifically proven foundations such as cognitive behavioural therapy and positive psychology, help to increase well-being in addition to the fact that with the tools received, patients have skills to continue promoting assertive

changes in his life once the intervention program has concluded (Cerezo et al, 2014).

As limitations to the search and selection of articles, it is found that not all the interventions carried out to patients with breast cancer have a pre-test and post-test evaluation to know the progress or acquisition of learning after the psychological intervention.

Regarding the articles, most were quantitative in nature, varying among them of a correlational and descriptive type. Likewise, a large part of the studies presented carried out the sample for convenience.

Another important aspect is that the cognitive behavioural techniques that are used or those that tend to give better results in said process were mentioned by said studies in which an intervention program is carried out, as mentioned by Haro de and collaborators (2014), the problem-solving technique was the most used and that provided better results in women with breast cancer to make use of coping strategies before the diagnosis.

## CONCLUSIONS

According to the articles consulted, cognitive behavioural therapy related to positive psychology turns out to be of great help in patients with breast cancer, by providing strategies to cope with the disease in an adaptive way, psychological intervention programs based on positive psychology help to minimize the damage that can cause the experimentation of negative emotions and are inclined to enhance the experimentation of positive emotions as well as to constantly maintain these, helps to reinforce optimism as well as the strengths of character and raise optimism during the treatment process and after you have finished it.

As a research proposal, it is considered that psychological intervention should be carried out including men since, although epidemiological rates show that it is more frequent in women, it would be relevant and interesting to know what coping style the male sex diagnosed with breast cancer handles, positive and negative affect, as well as the resilience that both sexes show to the disease.

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Table 1. Results of the reviewed articles on psychological interventions from positive psychology in patients with breast cancer

Title	Sample	Strategies	Results	Type of study and research design
Efficacy of group therapy in breast cancer: evolution of maladaptive emotions (Rodríguez & Font, 2013).	N = 172 patients with breast cancer with psychosocial difficulties due to the diagnosis, being a long-term intervention, 38 patients were concluded.	The intervention consisted of a support group monitored by a psychologist using the expression of emotions and cognitive-behavioral techniques. At the beginning of the interview with a psycho-oncologist, data about her clinical and psychological history were collected and then included in a group based on her condition. Starting from the 4th session, a theoretical part of topics such as anxiety, depression, self-esteem and body image is exposed, which consist of three sessions each module.	Using the emotional subscale of the QL-CA-Afex quality of life questionnaire, the Font and Font Bayes Instrument and with the analogy-visual scales. It was obtained as a result that emotional distress improves significantly, as well as anger, depression, fear and concentration difficulties. Similarly, physical dissatisfaction improves during the session.	This is a quantitative research, with experimental design
Quality of life and breast cancer: effects of a cognitive-behavioural intervention (Garduño, Riveros & Sanchez, 2010).	N = 60 female patients with a confirmed diagnosis of non-terminal maternal cancer, aged between 31 and 67 years, who presented evolution of the disease from 3 months to 7 years from the diagnosis.	Positive psychology issues were addressed, focusing on emotions, cognitive-behavioural techniques were also used, such as: psychoeducation on breast cancer and therapeutic principles, establishing supportive behaviors, modifying thoughts, and abilities to reduce reacting with negative emotions. Problem resolution. Valuation change techniques, in these, if the	After the intervention and the application of InCAVisa, the quality of life areas that showed improvement in the patients was greater than 75% of the total sample, while from 1% to 25% showed worsening. The most relevant improvement was in daily life, free time, worries, body perception and isolation. Regarding the techniques that best helped to cope with stressful	A pre-test, post-test design was used.

Title	Sample	Strategies	Results	Type of study and research design
		patient's verbalizations had a positive change, the therapist recognized them verbally. Training in diaphragmatic breathing and deep muscle relaxation.	situations, the pain that the patients experienced was mainly emotional regulation and progressive muscle relaxation.	
Effectiveness of cognitive-behavioral treatment focused on the emotional distress of patients with breast cancer. (Aberturas, Magán, Espinosa, Navas & Provencio, 2015).	N = 7 female patients diagnosed with breast cancer, aged between 40 and 60 years.	The intervention consisted of the following modules. Physiological deactivation module, including progressive relaxation, abdominal breathing. Behavioral activation module and focus on the positive, through psychoeducation, programming of pleasant activities. Thought management module, using thinking stop and junk time techniques. Three modules to work on social skills, assertiveness improvement and problem-solving training. Finally, we worked with relapse prevention and maintenance of achievements.	The results obtained showed that after the treatment, the application of the strategy of restraining the emotion was reduced, being able to express them adaptively. Regarding the coping strategies of suppressing activities, although they were not significant, they had a medium effect size, which indicates a trend that after treatment, the patients changed this coping style.	A quasi-experimental design was used.
Effects of an emotional intelligence program on anxiety and self-concept in women with breast cancer (Cejudo, García & López, 2017).	N = 81 women, 42 belonged to the control group with a mean age of 55.66, and 39 belonged to the intervention group with a mean age of 50.67, within the intervention group 18 women had less than two years with the disease, and 21 women had more	The intervention program was based on the Mayer and Salovey model of emotional intelligence. In each session topics were discussed to improve the components involved in emotional intelligence and	After evaluating the improvement that the program had in the emotional intelligence of women with breast cancer with surgery, it was obtained that the women improved in terms of emotional clarity and emotional	The design used was of a quasi-experimental type.

Title	Sample	Strategies	Results	Type of study and research design
	than two years with the disease.	improve knowledge about the five dimensions of self-concept	repair, had an increase in five self-concept subscales and presented a decrease in anxiety state.	
Positive psychology group intervention for breast cancer patients: a randomised trial (Cerezo, Ortiz, Cardenal, & Torre de la, 2014).	N = 175 women randomly assigned to an experimental group, 87 received a 14-session intervention, and 88 on the waiting list received no type of intervention.	They describe how each session was carried out, the first three being focused on improving self-knowledge, using techniques such as psychoeducation, mindfulness and mutual support. In the seven sessions in a row, we worked with the promotion of active psychology skills, assertive communication skills, adequate emotional expression, repair of negative emotions promoting adaptive positive attitudes, self-control and coping with difficult situations were promoted, using cognitive restructuring techniques, role play inclined to awareness and self-awareness. The last four sessions were focused on improving resilience, optimism and coping skills related to traits, including gratitude techniques to improve mood	In the results obtained related to strength, self-esteem, well-being and happiness, the experimental group showed high scores after the intervention, in addition to the fact that the patients also reported having better self-esteem, skills related to emotional intelligence, resilience and optimism, positive affectivity, well-being and happiness, in addition to the coping strategies related to psychological strengths are those that showed greater well-being to patients by helping them cope with the ailments that usually mainly present pain among them, so psychological intervention is usually beneficial based on positive psychology on psychological health in patients diagnosed with breast cancer.	A quantitative study was conducted with an experimental design.

Source: Own elaboration

Note: N= Population size