

Abstract

Breast Cancer, Resilience, Quality of Life, Depression, and Dyadic Adjustment from Diagnosis to 24 Months: A Prospective Pilot Study

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Introduction. Breast cancer is the most frequently diagnosed cancer in women and has important effects not only on health but also on the couple's relational life. In Italy, AIOM estimated 53,686 new diagnoses in 2024, with a 5-year net survival of 88%, while GLOBOCAN 2022 reported 57,480 new cases and 15,455 deaths. The literature suggests that couples may react to breast cancer with either vulnerability or adaptation, depending on coping strategies and resilience, viewed as a protective resource that may influence quality of life, depression, and dyadic adjustment. The aim of this study was to explore resilience, quality of life, depression, and dyadic adjustment in women with breast cancer and their cohabiting partners from diagnosis to 24 months.

Methods. This prospective pilot mixed-method study was conducted between Italy and Colombia in women with stage I–III breast cancer and their cohabiting partners. The protocol includes longitudinal data collection from baseline to 24 months. The quantitative component includes the EORTC QLQ-C30,

Marital Adjustment Test, PHQ-9, and Resilience Scale, administered separately to each member of the dyad; the qualitative component includes focus groups and phenomenological interviews. This abstract reports a preliminary analysis based on the partial quantitative data currently available, re-elaborated exploratorily according to the study framework on 25 dyads. The study was approved by the Ethics Committee (Sperimentation Registry No. 1718/22).

Results. In the exploratory analysis of 25 dyads, higher resilience levels were associated with better global quality of life measured with the EORTC QLQ-C30 ($r = 0.788$; $t(23) = 6.14$; $p < 0.001$) and better functioning ($r = 0.712$; $t(23) = 4.86$; $p < 0.001$), and were inversely associated with symptom burden ($r = -0.793$; $t(23) = -6.24$; $p < 0.001$). Descriptively, male partners showed a tendency toward greater depressive burden, whereas dyadic adjustment appeared overall preserved, although more fragile in sexuality, finances, and shared leisure time.

Discussion. Although preliminary and based on partial quantitative data, these findings support a dyadic interpretation of breast cancer and suggest that resilience may act as a protective factor against symptom burden, depression, and relational vulnerability. From a nursing perspective, these preliminary findings support an integrated and longitudinal assessment of the couple and the development of dyad-centred care models from diagnosis to follow-up. Completion of the study will help confirm these preliminary findings and define targeted supportive care interventions.

Keywords: Breast Cancer, Resilience, Dyadic Adjustment

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