

Body Image Distress among Primary Brain Tumor Patients: Current Research and Future Directions for Coping Strategies Development

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Introduction. Patients with primary brain tumors (PBT) often go through significant body changes that can affect their body image, treatment decisions, and overall quality of life. Despite this, healthcare providers have historically overlooked the impact of body image on PBT patients. Research has shown that cancer patients often experience distress related to body image, and this can affect their treatment choices during the first year of survivorship. Therefore, the aim of this study is to understand effective coping strategies to alleviate body image distress and help PBT patients adjust to the "altered physical self" that occurs during and after cancer treatment.

Conceptual Framework: Anticipatory Coping and Control. Anticipatory coping refers to the preparation for managing the stressful consequences of an upcoming event. This involves using a routine to manage complex events related to illness and other stressful circumstances (Gignac, 2005). Various coping skills and strategies have been explored in women with breast cancer, including cognitive coping, minimization or avoidance, reliance on social support, humor, acceptance, self-efficacy, and perceived control (Cunningham et al., 1991; Meyerowitz, 1983; Penman et al., 1986; Stanton et al., 2002; Stanton & Snider, 1993). Women with breast cancer who possessed higher self-efficacy and perceived control over situations reported improved quality of life and were less fearful and better adjusted (Cunningham et al., 1991). Previous research projects have suggested that understanding the body image distress of PBT patients may help them improve their social quality of life and long-term health outcomes.

Frith et al. (2007) stated that cutting or shaving off hair can prepare oneself and others for hair loss due to cancer treatment and feeling proactive. Cancer patients' self-efficacy in coping with cancer is significantly influenced by their body image perceptions (Cunningham et al., 1991). Women who feel good about their bodies believe more in their ability to stay healthy despite the disease and its treatments, continuing physical and non-physical intimacy with others. The study by Frith et al. (2007) found that most female cancer patients try out and purchase wigs or scarves. This allows them to feel control over their appearance. According to Thompson et al.'s (1993) research on cancer patients with different diagnoses, there is a strong connection between perceptions of control and successful adjustment to cancer treatment. Patients may have no control over their disease, but they can establish control by wearing wigs and scarves to help them look healthy (Thompson et al., 1993). From a psychological standpoint, control is essential to emotional well-being, adjustment, and coping (Walker, 2001). Apparel professionals can help develop effective interventions to improve self-image because effective coping strategies are linked to appearance management behaviors. Clothing and other appearance-management behaviors may become increasingly important for cancer patients, providing a means of secondary or cognitive control over an inevitable and uncontrollable disease.

Synthesis and Discussion. White and Hood (2011) developed a multidimensional model for understanding body image in oncology. They reviewed previous literature on cancer patients' body image, taking into consideration factors such as the type of cancer, personality, and

demographic variables. They recommended that clinicians and researchers recognize the importance that patients place on the body parts affected by cancer.

White (2002) studied how cancer treatment affects how patients perceive changes to their appearance, whether real or imagined. It is essential to understand the subjective nature of body image when trying to understand how patients feel, regardless of whether the changes to their appearance are apparent to others. Cancer patients are concerned about how others perceive them when they notice a significant difference between their ideal body image and appearance. The severity of body image distress can vary depending on the type of cancer, and visible physical changes are likely to result in adverse reactions from others. Rapid and permanent changes to the body can be particularly distressing. Patients who are deciding whether to undergo appearance-changing cancer treatment need support to help them evaluate their feelings about the potential changes. Developing effective coping strategies, such as using fashion items, can help patients adjust to the changes in their appearance following cancer treatment. Unfortunately, healthcare professionals often lack knowledge of the distress that cancer patients experience related to body image, which can make it difficult for them to communicate effectively with patients and their families. This paper aims to deepen our understanding of how improving body image can help alleviate negative moods associated with concerns about physical appearance and cancer symptoms. The study of appearance can broaden the scope of research in oncology and has crucial academic significance.

Future Directions. It is necessary to conduct further research to develop effective intervention strategies demonstrating the benefits of using apparel among cancer patients in a clinical setting. This research should also compare control and non-control groups to confirm the efficacy of appearance-related behaviors. Additionally, it is essential to develop mitigation strategies using appearance-related behaviors and products for patients with permanent visible physical changes, regardless of gender. In the future, therapists could use fashion as a reference for counseling, as it can significantly improve cancer patients' body image. Such an approach could contribute to apparel studies in other academic fields, including oncology, psychotherapy, and counseling. Fortunately, some progress has already been made in this area (Jarry & Cash, 2011).

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