
Ablatio mammae like Angelina: Fad or a wise decision?

DOI: 10.4103/2278-330X.155706

Sir,

The articles entitled “Angelina’s choice”^[1] and “Counterpoint: Angelina’s choice - or the choice of anyone else in her place” are very interesting.^[2] These articles represent two sides of the same coin. Goel has criticized Angelina’s choice of undergoing prophylactic bilateral mastectomy after being detected to be at high risk of developing breast cancer whereas Parikh has supported and scientifically reasoned out Angelina’s bold decision. In our opinion, every decision/choice needs to be evidence based and uninfluenced.

Goel has rightly said that the celebrity’s choice has the power to influence and impact the healthcare trends and decisions.

However, this is not the 1st time when the issue of celebrity’s decision influencing others has been raised. Earlier in 1987, when first lady Nancy Reagan underwent a modified radical mastectomy after a cancerous lesion was discovered on one of her breasts; a gigantic debate was prompted. Nattinger *et al.* conducted a comprehensive study on this matter and concluded that celebrity role models can influence decisions about medical care, and the influence appears to be strongest among persons who demographically resemble the celebrity, and those of lower income and educational status.^[3] In fact, this perception has led to the use of celebrity endorsements for promoting health behaviours such as safe sex and avoiding illegal drugs.^[3]

The decision to put the feminine twin assets under the scalpel is not an easy one for anyone then, be it Angelina Jolie or

anybody else. However, studies have suggested that race is an important factor in decision role, treatment choice, and survival.^[4] For women from the developed world, mastectomy was found to be the preferred choice^[4] compared to those from developed world, where patients desire to conserve their breast, even after being diagnosed with cancer.^[5] Further global studies are needed involving women from diverse cohorts to investigate the multitude of factors that influence the individual's decision.

The role of multidisciplinary management team is crucial, and the manner, and the extent to which the information is provided affects the patient's decision. The patient should always be involved in the decision-making process and should be provided with unbiased, factual information so as to minimize decisional conflicts.^[4]

Himanshi Aggarwal, Pradeep Kumar

Department of Prosthodontics, Faculty of Dental Sciences, King George's Medical University, Lucknow, Uttar Pradesh, India

Correspondence to: Dr. Pradeep Kumar,
E-mail: drpradeepkmr@gmail.com

References

1. Goel NS. Angelina's choice. *South Asian J Cancer* 2013;2:285-7.
2. Parikh PM. Counterpoint: Angelina's choice-or the choice of anyone else in her place. *South Asian J Cancer* 2014;3:71-3.
3. Nattinger AB, Hoffmann RG, Howell-Pelz A, Goodwin JS. Effect of Nancy Reagan's mastectomy on choice of surgery for breast cancer by US women. *JAMA* 1998;279:762-6.
4. Collins ED, Moore CP, Clay KF, Kearing SA, O'Connor AM, Llewellyn-Thomas HA, *et al.* Can women with early-stage breast cancer make an informed decision for mastectomy? *J Clin Oncol* 2009;27:519-25.
5. Narendra H, Ray S. Breast conserving surgery for breast cancer: Single institutional experience from Southern India. *Indian J Cancer* 2011;48:415-22.