

# GENETIC ADVICE IN BREAST CANCER AND / OR OVARIAN: PSYCHOLOGY CONTRIBUTIONS

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## OBJECTIVES

To present the contributions of psychology department to the genetic counseling group and to present an overview of the population served at HCIII / INCA and their expectations regarding the predictive test.

## METHODOLOGY

The institution's clinical staff perform the referral of patients, and / or relatives, to Genetic Counseling (GC), which includes various direct care professionals. The first consultation is scheduled with the geneticists, who will evaluate the indication, following the medical criteria to the predictive testing. Those who had their indication confirmed forwarded to a psychological evaluation. In the first interview, is searched to know what are the personal motivation, for beyond the medical indication and, the knowledge degree of and/or expectation about the possible results and implications in everyday life. Evaluate the patient/family cognitive ability. Collect the previous story of psychiatric disorder, such as depression, schizophrenia, panic disorders or any other that, without stabilization possibility that can indicate that it will create a difficult in the elaboration process of whatever is the result of the test and that will interfere, in a harmful way, In the way of life.

## RESULTS

Clinical praxis demonstrates that the population served reports that there is an expectation that the forward to the GC and, as a consequence, the testing, ensure to know the cause of the Cancer and a control/guarantee of a possible relapse. After that, the speeches is about the heredity, that is, they seek not only to know about the mutation but also to ensure that their next generations will not be reached. Then we see a concern for self-care and on the other that can generate diverse behaviors that can interfere in the familiar ties. There is speech whose expectation is related with the guarantee of a prophylactic surgery, especially that one is associated with the mastectomy.

## CONCLUSION

Although based on an objectification, the expectation and confirmation of the presence of a Genetic alteration, by itself, is capable of producing both organic and psychic effects. This way the AG presents a meeting of subjective questions with the concepts of probabilities. With the Technical-scientific advancing and the Age of globalization, in which the information transits almost instantaneously, do not prevent patients and families from building expectations that we cannot yet respond to, especially concerning cure or non-recurrence. We remember that we deal with types of cancers that affect in an incisive way the various roles that the woman plays in the present day. Hence, the Importance of the GC team for breast and / or ovary cancer has resumed in the last three years its multi professional character. In this team, the consultations are not the only moments of deliberation about testing, as well the reporting the results. There is a construction that is based on Spaces of learning and discussion of clinical cases. The learning about genetics and questions about subjectivity, as advocated by the American Society of Human Genetics in defining AG. The universe of this work is intense in front of a population of a Reference Center, in function this the researches of post-test is still ongoing.