To date, no study investigated the effects of a beauty care workshop in breast cancer patients (compared with a wait-list control). To our knowledge, this study represents the first randomized controlled trial examining the effect of the intervention:

• Regarding breast cancer-related quality of life, there was a Group × Time interaction, with post-test 2 (at 8 weeks) and Follow-up (at 12 weeks) indicating that only participants of IG reported higher quality of life pre- to post-test, $f_{(36)} = 2.85$, $p = .011$, $d = .35$ (Fig. 4A).

• Post-test 2 (at 8 weeks) and Follow-up (at 8 weeks) indicated moderate stability of effects (see effect sizes and broken green line in Fig. 4A and 4B).

Immediate psychological effect within Session 1:

There was a decrease of depressive symptoms measured by the State-Trait Depression Scales [10] from the beginning (M = 20.2, SD = 4.9) to the end of Session 1 (M = 15.1, SD = 3.3), $t(36) = -5.128$, $p < .001$, $d = -1.25$.

Effect of the intervention:

• Groups did not differ in any measure before treatment.

• Regarding trait depression, there was a Group × Time interaction, with IG reporting less depressive symptoms pre- to post-test, $f_{(36)} = 2.36$, $p = .030$, $d = -0.61$ (Fig. 4A).

• Regarding breast cancer-related quality of life, there was a Group × Time interaction, with IG reporting higher quality of life pre- to post-test, $f_{(36)} = 2.85$, $p = .011$, $d = .35$ (Fig. 4B).

• Post-test 2 (at 8 weeks) and Follow-up (at 8 weeks) indicated moderate stability of effects (see effect sizes and broken green line in Fig. 4A and 4B).

CONCLUSION

• To our knowledge, this study represents the first randomized controlled trial examining the effectiveness of a beauty care intervention in breast cancer patients.

• Results show that participation in a group makeup-workshop and receiving the edited photos (Session 2, at 3 weeks after Session 1) decrease patient’s depressive symptoms and increase self-reported, breast-cancer-related quality of life (compared to pretest and compared to WL, respectively).

• Results support the use of this type of brief, low-cost psychosocial intervention in women undergoing medical breast cancer treatment to improve their well-being.

REFERENCES


CONCLUSION

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REFERENCES


Methods

• n = 37 breast cancer patients undergoing chemotherapy were recruited through the Breast Centre Munich (see flowchart in Fig. 2).

• Stratifying for age and depression, patients were randomly assigned either to an immediate intervention group (IG) or a wait-list control (WL), with a waiting period of 4 weeks (Fig. 1).

• The intervention consisted of two elements:

  • Session 1: 4-hour group make-up workshop and photo shoot (S1; Fig. 3).

  • Session 2: receiving professionally edited portrait-/upper-body photos by email (S2).

• Questionnaires assessing trait-level depression [8] and quality of life [6] were administered at 4 (for IG) and 6 (for WL) measurements.

• Pre-post1 -0.51 0.23 -0.72

• Pre-test Posttest 1 Posttest 2 Follow-Up

• Notes. No significant differences between groups. PHQ-2, Patient Health Questionnaire [11] to screen for depressive symptoms; pT, primary tumor; pN, pathological region lymph nodes.