

# A Randomized Clinical Trial of a Videotape Intervention for Women With Chemotherapy-Induced Alopecia: A Gynecologic Oncology Group Study

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**Purpose/Objectives:** To evaluate changes in body image and self-esteem in women with gynecologic malignancies who experience chemotherapy-induced alopecia and to examine the effectiveness of a videotape intervention on body image and self-esteem.

**Design:** A prospective, randomized study.

**Setting:** Subjects were accrued from 11 Gynecologic Oncology Group (GOG) member institutions participating in 14 GOG treatment protocols.

**Sample:** 136 women with chemotherapy-induced alopecia, a mean age of 57.7 years, and advanced disease at study entry.

**Methods:** Prior to the first course of chemotherapy, all subjects received standard counseling regarding hair loss. Body image and self-esteem scores were obtained prior to course 1 and 3 and after course 4 of chemotherapy. Prior to course 3, women with grade 2 alopecia were allocated randomly to the videotape intervention or no intervention.

**Main Research Variables:** Total body image and self-esteem as measured by the Body Cathexis/Self-Cathexis Scale (BCSCS).

**Findings:** A small but statistically significant change ( $p = 0.045$ ) in body image was observed after chemotherapy-induced alopecia, with no change in self-esteem. The videotape did not produce a significant effect on body image score.

**Conclusions:** The study results support prior studies that have reported changes in body image as a result of chemotherapy-induced alopecia. The intervention employed (a videotape) was not effective. The BCSCS is a simple and quick measurement for use in future studies.

**Implications for Nursing:** Chemotherapy-induced alopecia has an adverse effect on body image. Novel interventions are needed to assist women in coping with this consequence of treatment.

Alopecia is a common and devastating, although temporary, side effect of many antineoplastic agents. The impact of the potential loss is so profound that some patients with cancer consider refusing therapy; indeed, some individuals actually refuse therapy because of the possibility (Fawzy, Secher, Evans, & Giuliano, 1995; Kennedy et al., 1983). Hair reflects personal expression and is associated with beauty, age, and sexuality. Particularly for women, hair loss is a significant concern that is compounded by other physical and emotional events related to cancer therapy. Many women with breast cancer report that dealing with hair loss is more

## Key Points . . .

- ▶ Alopecia, a common side effect of many chemotherapeutic agents used to treat gynecologic malignancies, may affect patients' body image and self-esteem and influence their treatment decisions.
- ▶ Reliable methods exist to measure body image and self-esteem.
- ▶ A videotape intervention was not more successful than standard interventions (counseling and prostheses) in improving or preventing changes in body image.

difficult than coping with the loss of a breast because hair loss is visible to others and is a constant reminder of their diagnosis (Pozo-Kaderman, Kaderman, & Toonkel, 1999). In a qualitative study of 15 participants, being constantly reminded of their disease as a result of alopecia emerged as a major aspect of the experience (Williams, Wood, & Cunningham-Warburton, 1999).

Women with cancer have cited alopecia as the most disturbing aspect of the chemotherapy experience (Munstedt,

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