

The Battle After the Battle: Emotional Healing Through

Reconstructive Surgery

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Abstract

This study investigates the psychological impact of Deep Inferior Epigastric Perforator (DIEP) flap reconstruction on female cancer survivors. Observations and surveys were conducted over a 12-month period to monitor emotional trends during recovery. Results show that patients commonly experienced high levels of anxiety, frustration, exhaustion, and dependency during the first three to six months following surgery. However, by the six-month mark, emotional well-being began to improve significantly, with increased feelings of relief and body confidence. By one year post-surgery, the majority of patients reported high satisfaction with their physical results and a strong recovery in emotional health. These findings suggest that while DIEP flap surgery requires a challenging recovery period, it provides substantial long-term psychological benefits, helping survivors regain self-image, confidence, and emotional stability.

Introduction

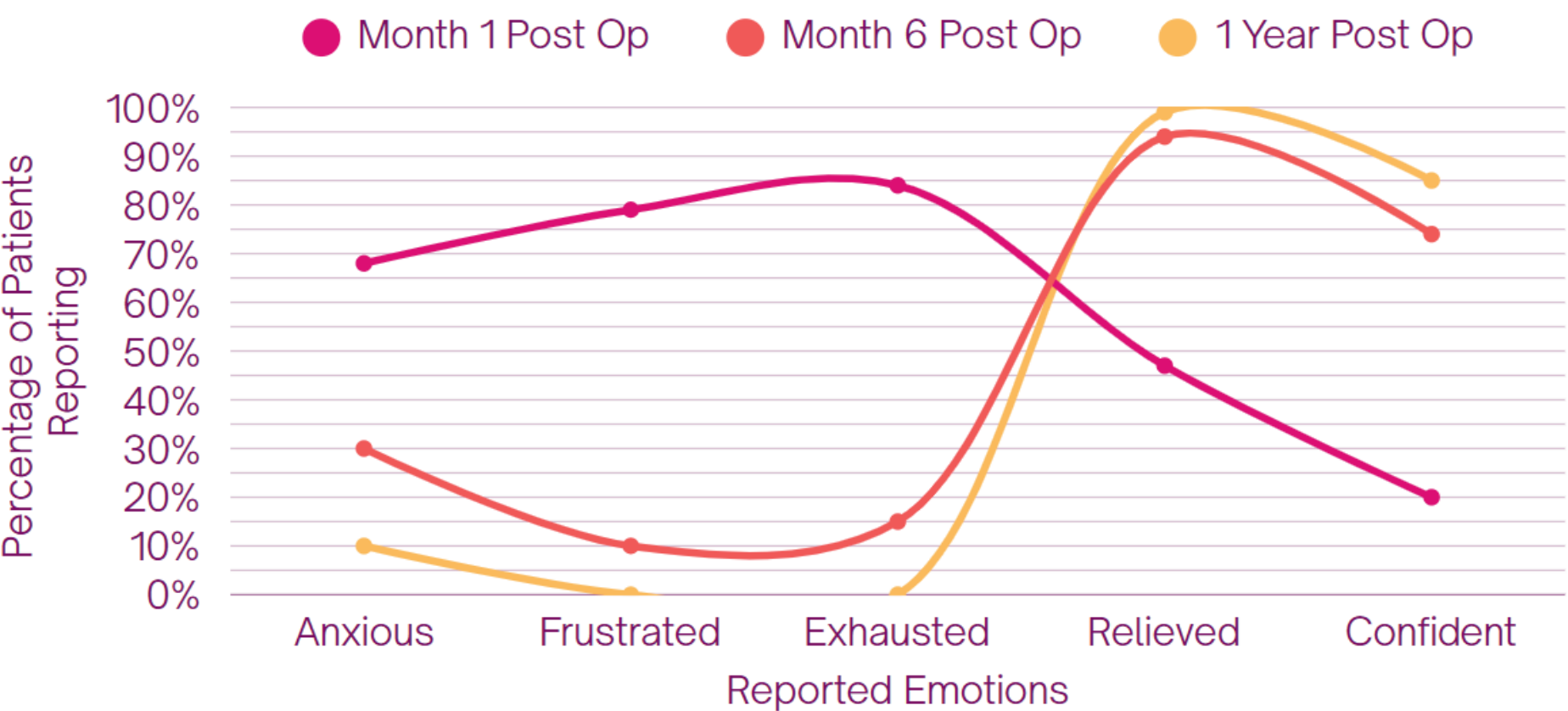
As we know, cancer takes millions of lives every year, leaving behind families and friends to grieve. However what many people do not think about is that cancer also leaves behind many survivors whose lives have been changed forever. Although they have survived the first leg of the race, there is still so much more to run. For many, the battle does not end once they are declared free of cancer; some leave with scars, most leave with countless medications, and some leave with surgeries scheduled to hopefully gain some normalcy back into their lives. Women who have been diagnosed with cancer often feel like their self-image, sexuality, and sense of femininity have been stripped from them. Women need to rebuild that sense of self-worth and comfort in the skin that they are in. Reconstructive plastic surgery is that hope for many cancer survivors, a chance for them to gain their confidence and sense of self back. However, the journey of getting there is not easy. The psychological impact is as significant as the physical impact. However there has been no experiment that has focused on the psychological effect that a deep inferior epigastric perforator, also known as DIEPs specifically has on patients. Reconstructive surgeries are not just about restoring the outside appearance, but giving cancer survivors a chance to reclaim their lives.

What is a DIEP?

A DIEP flap (Deep Inferior Epigastric Perforator flap) surgery is a type of breast reconstruction often done after someone has had a mastectomy (when the breast is removed to treat or prevent cancer). Instead of using implants, the surgeon takes skin, fat, and tiny blood vessels from the patient's lower stomach (the same area where people often have extra tissue) and moves it to the chest to form a new breast. However some women may not have enough fat in their lower stomach so the skin fat is taken from either the thighs or the back. The surgeon has to carefully reconnect the blood vessels under a microscope so that the transferred tissue can survive and heal properly. The great thing about DIEP surgery is that it uses the person's own natural tissue, so it can look and feel more like a real breast. However in some cases if the cancer has reached the nipple, then the nipple will have to be removed then later reconstructed.

Results

Emotion trends in DIEP Patients over time



Findings

As shown in the graph above, many post-operative patients experienced significant emotional distress in the early stages of recovery. Nearly 74% of women reported feeling anxious due to the demanding nature of postoperative care following DIEP flap surgery. With 3 to 4 surgical drains attached to their bodies, stitches to monitor, medications to manage, and frequent check-ups, the recovery process can feel overwhelming. This complexity contributes to the frustration that 79% of patients reported—frustration that often stems from the disruption of everyday routines. Simple tasks like showering, eating, or even just moving around become difficult. Sleep is also deeply affected, with 84% of women saying they felt constantly exhausted. However, amid these struggles, some light begins to break through. Around 47% of patients reported feeling a sense of relief as they adjusted to the process, even though only 20% felt confident in their bodies at this early point. It's important to remember that these women were still in the middle of recovery. By the six-month mark, a significant shift occurs—most women begin to feel better than they have in a long time. Their levels of anxiety, frustration, and exhaustion drop dramatically. At this stage, 94% of women reported feeling relieved, and 74% expressed confidence in their new bodies. Finally, at the one-year post-op appointments, patients often return as the best version of themselves. Confidence peaks at 85%, and frustration drops to just 1%. Many women have also completed additional procedures such as nipple reconstruction by this point, which helps them feel more whole again. Though the recovery process is long and incredibly challenging, every woman I spoke with shared the same sentiment: undergoing reconstructive surgery had a deeply positive impact on their life.

Methodology

This investigation required surveying patients who have had a deep inferior epigastric perforator (DIEP) procedure performed on them within the past year. I will only be surveying postoperative patients, however I will be surveying patients who have had flaps removed from various parts of the body (thighs, back, and stomach). This semi-structured interview will encourage patients to describe their emotional states and challenges during their healing process. I will collect information from 17 different patients. I will also be asking questions about their postoperative routine/ life adjustments like how many people are assisting in their healing process, how are you feeling postoperative routine, how has your mood been, have you been feeling up to going outside and moving around, etc.

Conclusion & Discussion

This study shows that while DIEP flap reconstruction offers major long-term benefits, it also presents significant emotional challenges early in recovery. Many patients reported high levels of anxiety, frustration, and exhaustion in the first few months due to physical healing demands and reliance on others. However, by six months post-surgery, emotional health improved greatly, with most patients expressing relief and growing confidence. At the one-year mark, nearly all patients reported high satisfaction with their results and a strong sense of emotional recovery. These findings suggest that DIEP flap reconstruction is not only vital for restoring physical appearance but also plays a key role in helping survivors rebuild self-worth and emotional stability. However, there are limitations to this study, including a small sample size and the reliance on self-reported emotions, which could introduce personal bias. Emotional responses may also vary based on individual support systems, prior mental health history, and cultural perceptions of body image. Future research with larger, more diverse patient groups is needed to strengthen these findings and provide even more comprehensive emotional care strategies.