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The Types of Support That Enhance Body Image in Patients with Breast Cancer: A Scoping Review

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LITERATURE REVIEW

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ABSTRACT

Patients with breast cancer often experience dissatisfaction with themselves as a result of the treatment process they undergo, potentially resulting in a negative body image and affecting the effectiveness of treatment and their quality of life. Therefore, support is needed to address this issue. This study aims to identify the types of support that can be provided to improve body image in patients with breast cancer through a scoping review. We conducted a search using five databases, including ScienceDirect, Wiley, Scopus, ClinicalKey, and ProQuest. The inclusion criteria used were English-language articles and original research articles published between January 2020 and May 2025. Review articles, books, and pilot studies were excluded. The screening procedure was conducted in accordance with the PRISMA 2020 guidelines, and article eligibility was assessed by three researchers using the JBI Critical Appraisal Checklist (2020). Ten articles were obtained, indicating that various forms of support can be provided, such as social support (from family, friends, prominent figures, important or special people, and health workers); partner support; psychological support carried out through clinical interventions; and support from groups of fellow breast cancer survivors, but social support from family being the most commonly implemented form. This support helps patients in the process of improving body image that has changed due to the treatment process; however, in practice, the provision of a single type of support cannot stand alone. These findings affirm that providing support to enhance a positive body image in patients requires thorough attention. Further research is expected to explore the effectiveness of each type of support and involve more than one form of support to produce more comprehensive findings.

Key Messages:

- The treatment process undergone by breast cancer patients results in various issues, one of which is a decline in body image.
- Various types of support can be provided to improve body image in breast cancer patients, which in turn will enhance their quality of life.

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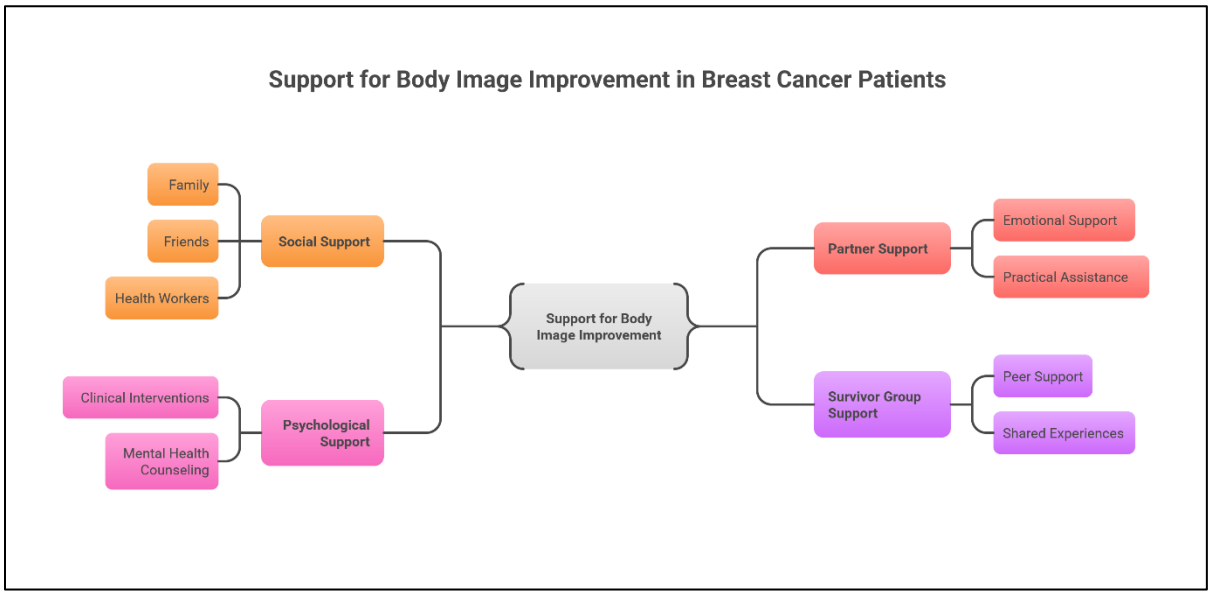
GRAPHICAL ABSTRACT



INTRODUCTION

Cancer is one of the leading causes of death and contributes to the highest morbidity rates in various countries around the world, including Indonesia. One type of cancer with a high incidence rate among women in Indonesia is breast cancer (1). Currently, breast cancer ranks as the leading cause of death among women worldwide (2). In 2020, the incidence of breast cancer in Indonesia reached 30.8% and accounted for 20.4% of cancer-related deaths. It is estimated that by 2040, Indonesia will experience an increase in breast cancer incidence to 47.1% and mortality to 62.1% (3). GLOBOCAN data from 2020 also reported that breast cancer is the most common type of cancer and ranks first in Indonesia, with 65,858 cases, accounting for 16.6% of the total 396,914 cancer cases (4).

Patients diagnosed with breast cancer usually have to undergo various treatment procedures. Treatment for breast cancer typically involves surgery, chemotherapy, radiotherapy, and long-term hormonal tablet therapy, depending on the stage of cancer identified (5). The diagnostic and treatment process experienced by breast cancer patients affects not only their physical well-being but also imposes a psychological burden on patients (2). The treatments undertaken by patients often cause secondary effects such as weight gain, hair loss, changes in breast shape, and physical disabilities, which lead to a decline in body image (6,7). In addition to the treatment phase, body image disturbances often persist during the survivorship period experienced by patients. Several studies and meta-analysis articles indicate that body image issues remain a continuous problem faced by many breast cancer survivors, even several years after treatment has ended (8). This decline in body image triggers psychological disorders in patients, such as depression, anxiety, isolation, fear, decreased social and sexual functioning, and disturbances in self-concept (9,10). Among breast cancer survivors, long-term psychological challenges due to impaired body image may lead to difficulties in readjusting to daily life, including professional, social, and intimate relationships, as well as anxiety about the future (11).

Body image itself is a multidimensional concept, encompassing both positive and negative perceptions and attitudes, emotions, and behaviors toward one's own body (12). Body image plays a crucial role in supporting the recovery process of breast cancer patients (9). The body image of women with breast cancer is highly significant, as traditionally, breasts are regarded as symbols of femininity, sexual attractiveness, and motherhood (13). Moreover, the breast is an external organ that plays a fundamental role in the female body shape, and any irreversible changes resulting from treatment will be visibly noticeable (14). Women, in general, tend to experience higher levels of dissatisfaction with their body image compared to men (15). When breast cancer patients face dissatisfaction with their body image, it affects their emotional and social resilience and leads to a decreased quality of life (16). This condition may

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also result in reduced adherence to treatment, which in turn has a significant negative impact on treatment effectiveness (5). Frequently, treatment approaches for cancer patients still tend to focus primarily on the physical aspects of the patient, and for breast cancer survivors, the emphasis is often placed solely on improving survival rates, without considering approaches that address the psychological aspects of the patient, particularly concerning self-perception of body image affected by treatment (17,18).

Considering the negative impact of declining body image and the lack of psychological approaches for breast cancer patients, there is a need for comprehensive management that not only focuses on physical treatment but also addresses the psychological aspects of the patients. Various studies have identified several forms of psychological interventions for breast cancer patients, such as emotional support, social support, psychosocial support, family support, and healthcare provider support, as potential interventions to help rebuild patients' body image. However to date, there has been no comprehensive mapping of the types of support that have been studied. Most previous studies have primarily focused on the relationship between support and outcomes such as quality of life, depression, treatment adherence, and anxiety. There is still a lack of studies that specifically map the types of support directly targeting improvements in body image among breast cancer patients, which highlights a gap that needs to be addressed through a comprehensive literature review.

Therefore, this scoping review was conducted to explore and map the types of support that have been studied and proven to improve body image in breast cancer patients during and after treatment. In addition, this review also aims to provide a broader understanding of the appropriate types of support approaches to serve as a foundation for developing a holistic nursing care model that focuses on the psychological aspects of breast cancer patients.

METHODS

Research Design

The design used in this study was a scoping review, which is a type of evidence synthesis aimed at identifying and mapping relevant evidence that meets predefined inclusion criteria related to the topic, field, context, concept, or issue under review (19). This method is useful for research on specific topics that are still limited or vary widely (20). This review followed the framework proposed by Arksey and O'Malley (2005), consisting of several stages, including: 1) formulating the research question, 2) identifying relevant studies, 3) selecting studies, 4) extracting data, and 5) collating, summarizing, and reporting the results 6) engaging expert consultation to enhance the accuracy of the review findings (21). All stages were conducted systematically to ensure transparency and reliability in the execution of the study. The research question of this scoping review was: "What types of support can improve body image in patients with breast cancer during and after treatment?"

Search Strategy

This study used secondary data sources obtained from five databases: ScienceDirect (22), Wiley (23), Scopus (24), ClinicalKey (25), and ProQuest (26). In this review, five databases were used to ensure a comprehensive literature search. Vassar (2017) stated that a review article should include at least two databases (27), while Bramer (2017) recommended the use of a minimum of four databases in systematic reviews to ensure adequate topic coverage (28). Therefore, the use of five databases in this study is considered sufficient to capture relevant literature. The inclusion criteria were established as follows: original articles, published within the last five years ~~(2020–2025)~~ (January 2020-May 2025), written in English, open access, available in full text, involving cancer patients undergoing treatment, and articles discussing support provided to breast cancer patients in improving body image. The exclusion criteria for this study included review articles, study protocols, and pilot studies. To ensure that this study addresses the research question, the literature review focused on the following elements: Population (P): Breast Cancer Patients, Concept (C): Types of Support that Improve Body Image, Context (Co): Cancer Treatment.

As an effort to obtain relevant articles, keywords were used in each database and were designed to conduct searches in accordance with the relevance of the literature. The keywords used in each database are presented in Table 1.

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Table. 1 Keywords in the database

Database	Keywords
ScienceDirect	("Body image") AND ("Breast cancer" OR "breast carcinoma") AND ("Management Cancer" OR "Cancer treatment") AND ("Support" OR "Psychosocial support" OR "Social support" OR "Family Support")
Wiley	("Breast Cancer" OR "Breast Carcinoma") AND ("Body image") AND ("Support" OR "Social support" OR "Family support" OR "Peer support" OR "Psychosocial support" OR "Emotional support") AND ("Cancer treatment")
Scopus	TITLE-ABS-KEY ("Body Image") AND TITLE-ABS-KEY ("Breast Carcinoma" OR "Breast Cancer") AND TITLE-ABS-KEY ("Cancer Treatment" OR "Chemotherapy" OR "Radiotherapy" OR "Surgery" OR "Mastectomy") AND TITLE-ABS-KEY ("Support" OR "Family support" OR "Emotional support" OR "Social support" OR "Peer support")
ClinicalKey	("Breast Cancer" OR "Breast Carcinoma") AND ("Body image") AND ("Support" OR "Social support" OR "Family support" OR "Peer support" OR "Psychosocial support" OR "Emotional support") AND ("Cancer treatment")
ProQuest	("Breast Cancer" OR "Breast Carcinoma") AND ("Body image") AND ("Support" OR "Social support" OR "Family support" OR "Peer support" OR "Psychosocial support" OR "Emotional support") AND ("Cancer treatment")

Article Selection

Article screening was conducted by three researchers (STWC, SFT, and WOSM) using the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) 2020 guidelines. The researchers performed the screening by checking for duplicate articles, selecting based on the predefined inclusion and exclusion criteria, and assessing alignment with the PCC framework. The Rayyan application was also used during the selection process, as it has a sensitivity of up to 78% in identifying relevant articles (29). After duplicates were removed, the three researchers screened the titles and abstracts and reviewed the full-text completeness using the Rayyan tool to determine the eligibility of the articles to be used.

Critical Appraisal

After determining the articles to be included, an eligibility assessment was conducted. Critical appraisal is an essential step that enables researchers to evaluate the credibility and relevance of articles , thereby minimizing potential bias during the decision-making process (30). The quality assessment process for the articles used in this scoping review was carried out by three researchers (CE, AT, and STWC) using the Joanna Briggs Institute (JBI) Critical Appraisal Checklist (2020). The critical appraisal was adapted to match the methodological design of each selected article. For articles with a cross-sectional study design, the JBI Critical Appraisal Tools for Cross-Sectional Studies were used, while for randomized controlled trials (RCTs), the JBI Critical Appraisal Tools for RCTs were applied. These tools consist of four response options: 'yes', 'no', 'unclear', and 'not applicable'. If differences in assessment results occurred among the three reviewers, the decision regarding article selection was made through a joint discussion to evaluate the article. After the appraisal process, articles were classified as either included or excluded, based on the JBI scoring threshold of >70% to determine articles with a low risk of bias (31).

To determine the bias score in the JBI critical appraisal, the calculation was performed by dividing the number of "Yes" responses on the checklist by the total number of questions, and then multiplying by 100% (31). The ten selected articles demonstrated a high level of reliability, as evidenced by appraisal scores exceeding 70%. All appraisal results are presented in Table 2.

Data Synthesis

Once the articles were selected, data extraction was carried out to ensure validity, consistency, and credibility based on the *Updated Methodological Guidance for the Conduct of Scoping Reviews* (40). The extracted data included the authors' names, year of publication, research objectives, country, population, and findings. This synthesis approach was conducted to ensure the consistency of the resulting data for subsequent analysis.

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Table 2. JBI Critical Appraisal Score

Article	Study Design	Score
Doori et al., 2022 (10)	Cross-sectional	8/8 (100%)
Hsu et al., 2021 (16)	Cross-sectional	8/8 (100%)
Ye et al., 2025 (32)	Cross-sectional	8/8 (100%)
Almeida et al., 2025 (33)	Cross-sectional	8/8 (100%)
Iris, 2025 (34)	Cross-sectional	8/8 (100%)
Vuletić, 2022 (35)	Cross-sectional	8/8 (100%)
KavehFarsani and Worthington, 2024 (36)	Cross-sectional	8/8 (100%)
Mehrabi et al., 2024 (37)	RCT	11/13 (84,62%)
Moghadam et al., 2024 (38)	RCT	10/13 (76,92%)
Esplen et al., 2020 (39)	RCT	10/13 (76,92%)

RESULTS

Based on the five databases used, an initial total of 10.597 articles were identified according to the predetermined keywords. However, 3.747 articles were removed due to duplication, and 4.431 articles were excluded because they were not relevant to the specified topic, leaving 2.419 articles. Screening based on titles and abstracts, then eliminated 725 articles due to study designs not meeting the criteria. Subsequently, 389 articles were excluded because the subjects were not appropriate (not related to cancer or involved in animal studies), leaving a total of 1.305 articles. Of that total, 1.081 articles were identified as review articles, book chapters, or books, leaving 224 articles for further examination. Among these, 44 articles were excluded because they were published before 2020, 72 articles did not discuss body image, and 98 articles did not specifically focus on breast cancer patients. This procedure subsequently resulted in 10 articles that met the eligibility criteria for data synthesis.

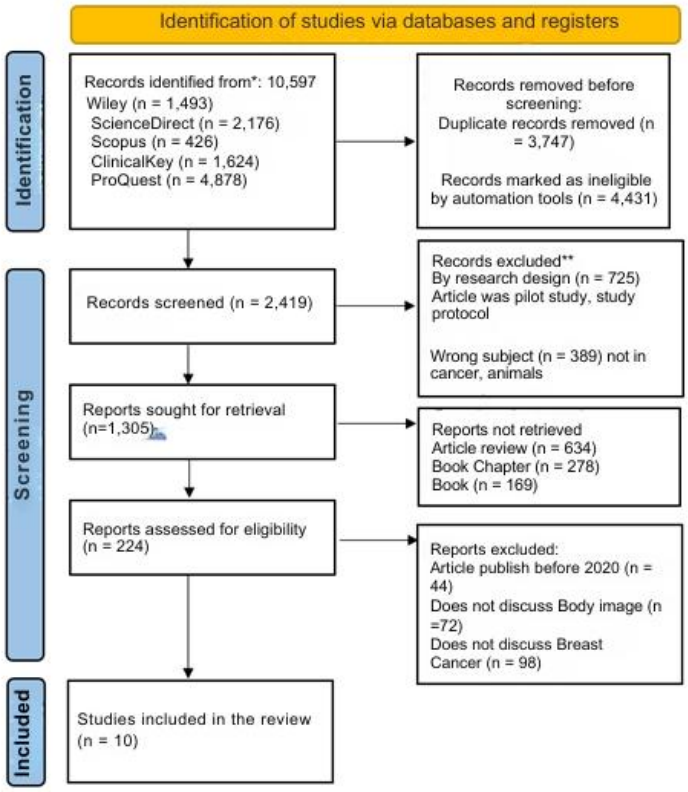

Figure 1. PRISMA Flow Diagram

Ten articles were identified and included in this review, consisting of cross-sectional studies (n = 7) and randomized controlled trials (RCTs) (n = 3). These studies focused on the types of support provided to improve body image in breast cancer patients during and after treatment. The included articles were

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conducted in various countries, such as Iran (n = 4), Taiwan (n = 1), China (n = 1), Portugal (n = 1), Israel (n = 1), Croatia (n = 1), and Canada (n = 1).

Table 3. Summary of Extracted Data from Reviewed Articles on Support and Body Image in Patients with Breast Cancer

Author and Year	Study Design	Country	Population	Aim	Results
(Doori et al., 2022) (10)	Cross-sectional	Iran	192 women with breast cancer. 95 (49.5%) patients underwent mastectomy; 97 (50.5%) underwent tumor resection with breast preservation.	To determine the relationship between perceived social support and body image in women with breast cancer.	Social support shows a positive relationship with body image. 1. Among mastectomy patients, support from friends and significant others is stronger. 2. Among patients who undergo tumor resection, support from significant others is greater.
(Hsu et al., 2021) (16)	Cross-sectional	Taiwan	141 women with breast cancer undergoing treatment	To investigate the mediating roles of hope and social support in the association between body image distress and resilience.	The results of the study show a negative relationship between body image distress and social support from family members and healthcare workers.
(Ye et al., 2025) (32)	Cross-sectional	China	647 women with breast cancer undergoing chemotherapy	To explore the mediating roles of depression and self-efficacy in the relationship between social support and body image in patients with breast cancer during chemotherapy.	This study shows that social support has a negative relationship with body image distress and contributes to reducing depression levels and enhancing self-efficacy.
(Almeida et al., 2025) (33)	Cross-sectional	Portugal	157 young women with breast cancer undergoing mastectomy.	To deepen understanding of how coping strategies and perceived social support contribute to fostering a positive body image.	Positive body image shows a significant positive correlation with perceived social support.
(Iris, 2025) (34)	Cross-sectional	Israel	100 women with breast cancer who underwent total mastectomy, partial mastectomy, chemotherapy, and radiotherapy treatments	To examine the relationships between marital support, partner participation, body image, and mental distress.	Partner support is higher among women with total mastectomy, but it is not significantly associated with body image. Body image is negatively associated with mental distress.
(Vuletić, 2022) (35)	Cross-sectional	Croatia	71 women with breast cancer undergoing surgery for mastectomy treatment	To examine the relationship between perceived social support and body image with quality of life.	Social support has more impact on improving quality of life, while it does not show a strong association with improving body image
(KavehFarsani and	Cross-sectional	Iran	160 married women with	To evaluate the effects of the relationships	1. Social support from spouses shows a

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Author and Year	Study Design	Country	Population	Aim	Results
Worthington, 2024) (36)			breast cancer undergoing chemotherapy or radiotherapy	among marital empathy, body image, and perceived social support on quality of life (QoL), and the mediating role of perceived marital quality.	significant effect on quality of life. 2. Social support is not directly identified as a factor that improves body image. 3. The combination of social support and body image contributes to improving quality of life.
(Mehrabi et al., 2024) (37)	RCT	Iran	44 women with breast cancer undergoing chemotherapy, radiotherapy, and surgery	To examine the impact of group Compassion-Focused Therapy (CFT) on body image and interpersonal stress.	Group Compassion-Focused Therapy shows an impact on improving body image in breast cancer patients compared to its effect on interpersonal stress
(Moghadam et al., 2024) (38)	RCT	Iran	30 women with breast cancer undergoing chemotherapy, radiotherapy, and surgery	To investigate the effect of Mindfulness-Integrated Cognitive Behavior Therapy on demoralization, body image, and sexual function.	Mindfulness-Integrated Cognitive Behavior Therapy shows a positive impact on reducing body image demoralization and improving sexual function
(Esplen et al., 2020) (39)	RCT	Canada	194 women with breast cancer who had completed treatment	To describe the group therapy intervention and therapeutic components for restoring body image	Group therapy interventions show an impact on addressing body image problems in patients.

The results obtained in the articles were then grouped into four categories based on the types of support provided. These categories include social support, partner support, psychological support based on clinical therapy, emotional and existential support, and group support. These results are summarized in Table 4.

Table 4. Types of Support Identified to improve Body Image in Patients with Breast Cancer

Social Support	Friends	(Almeida et al., 2025; Doori et al., 2022; Vuletić, 2022; Yu et al., 2025)
	Family	(Almeida et al., 2025; Doori et al., 2022; Hsu et al., 2021; Vuletić, 2022; Yu et al., 2025)
	Leading figures	(Doori et al., 2022)
	Healthcare providers	(Hsu et al., 2021; Yu et al., 2025)
	Key support/Special persons	(Almeida et al., 2025)
Partner Support (Marital/Partner)	Marital Support and Partner Participation	(Iris, 2025; KavehFarsani & Worthington, 2024) (34,36)
Psychological Support Based on Clinical Therapy	Group Compassion Focused Therapy (CFT)	(Mehrabi et al., 2024) (37)
	Mindfulness Integrated Cognitive Behavioral Therapy (MiCBT)	(Moghadam et al., 2024) (38)
	Group therapy model (ReBIC)	(Esplen et al., 2020) (39)
Group Support	Survivor group	(Esplen et al., 2020; Mehrabi et al., 2024) (37,39)

Based on Table 4, the results indicate that there are four types of support, including social support, support from partners involving partner participation, psychological support provided through clinical therapy interventions, and support from survivor groups.

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Among the four identified types of support, the most frequently provided is social support from family members. Social support from close family members influences the effectiveness of coping strategies in patients, as such support can reduce anxiety levels and improve the quality of life in cancer patients (41).

DISCUSSION

Cancer treatment often results in various pressures and impacts on patients, both during the treatment process and for years after treatment has been completed. Therefore, it is essential to enhance the provision of support aimed at addressing these issues, including the decline in body image experienced by patients (42). The results of the data extraction (Table 3) indicate that various types of support can be provided to breast cancer patients, which helps them in rebuilding a positive body image. However, it should be noted that the findings of this review may be influenced by potential biases, given that the included studies consisted only of RCTs and cross-sectional designs, with differences in sample sizes and the use of varying measurement instruments across studies. These factors may affect the consistency of the findings and limit the generalizability of the results.

As show in Table 4, the identified types of support include social support from individuals such as family members, friends, leading figures, individuals considered important or special by the patients, and healthcare providers; support from partners; psychological support provided through clinical interventions; and support from peer groups of fellow breast cancer survivors. Each type of support identified shows, based on the dominant findings of the articles, a significant effect on improving patients' body image. This indicates that a multidimensional approach, such as support integrated into various phases of treatment experienced by breast cancer patients, will reduce the psychological problems experienced by the patients (43). In addition, cancer patients who receive support tend to have a higher level of resilience, which leads to a more positive body image, lower levels of anxiety and depression, as well as better physical, emotional, and social functioning, all of which contribute to an overall higher quality of life (44). Among the various types of support identified, social support from family is found to be the most dominant type reported in the articles analyzed.

Social support became one of the key determinants in effective care, as it helps patients develop a positive outlook regarding their health and enables them to cope with cancer more effectively (45). According to the theory of social relationships proposed by Weiss (1974), humans have six primary social needs that must be fulfilled through relationships with others, and when these six needs are met, they form the foundation of effective social support. If there is a deficiency in one of these forms, it may lead to psychological problems and reduced quality of life, particularly in patients with chronic illnesses such as cancer (46). The dimensions of social support may vary across different populations, such as support from close friends, family members, healthcare providers, and others. The results of the analysis show that social support from family is more frequently identified.

Social support from family can be manifested in the form of informational support, which may be provided through advice given to the patient; appraisal support, which may be expressed as respect and encouragement to boost the patient's motivation; emotional support, which may be offered through empathy and affection; and instrumental support, which may be provided in the form of direct assistance to the patient (47). The family represents the closest environment to the patient, in which reciprocal interactions occur between individuals. When patients receive support from their families, they feel that someone continues to care for them, that they are valued, loved, or cared for, and that concern is shown toward them despite their suffering (12,47). In addition, family support plays a crucial role in helping patients adhere to necessary restrictions, thereby enhancing treatment effectiveness and contributing to the stabilization of their condition (48). The presence of family support significantly contributes to the development of a positive body image and the improvement of appropriate treatment decision-making in patients (49).

In addition to family support, support from partners was also identified. Partner support plays a crucial role in the recovery process of body image, particularly among patients who are married. According to a study conducted by La Guardia and Patrick (2008), partners are key support figures who play an important role in fulfilling needs that contribute to improving patients' well-being (50). The forms of

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support frequently provided include empathy and participation in the patient's treatment process (34). A high level of empathy in the emotional relationship between partners, especially in couples where one partner is experiencing breast cancer, can enhance the individuals' ability to understand each other's feelings comprehensively. This, in turn, facilitates calm decision-making, effective problem-solving, and improvement in their intimate relationship. Such high levels of empathy and mutual understanding can eliminate negative body image (behavioral and emotional responses) in wives who are experiencing breast cancer (36).

Meanwhile, psychological support delivered through clinical therapy has also been proven effective in improving body image in breast cancer patients. Psychological support involving clinical therapy refers to the self-efficacy theory proposed by Bandura (1977), which provides an understanding of the belief in one's ability to cope with challenges faced by cancer patients through motivation and behavioral change facilitated by clinical interventions (51). Based on the extracted data, three clinical therapies were identified as effective in enhancing body image among patients: compassion-focused therapy, mindfulness-based cognitive behavioral therapy (CBT), and survivor support groups. The provision of psychological interventions through clinical therapy is effective in reducing the distress caused by diagnosis and medical treatment experienced by breast cancer patients, which often leads to psychological disturbances, including a decline in positive body image (52). These psychological interventions also contribute to improving patients' quality of life by providing support that helps reduce psychological problems, which may otherwise interfere with the effectiveness of the treatment being undertaken (53).

Support from survivor groups was also identified in the data extraction results, which shows a positive impact and a strong association with the improvement of positive body image in breast cancer patients. Women with breast cancer reported that support from fellow survivor groups greatly assisted them by providing information about foods that should be consumed and avoided; offering guidance on healthy eating tips, the benefits of exercise, understanding the stages of cancer treatment, strategies for managing emotional problems, and the available treatment options that can be pursued (54). In addition, support from fellow cancer survivor groups helps patients regain control over their lives, reduces feelings of isolation, and provides a safe and confidential environment to communicate effectively about shared experiences and emotions (55). This is in line with the study by Belete et al. (2025), which states that cancer survivor groups, whether peer-led or facilitated by professionals, are effective in addressing the emotional and psychological needs of survivors, such as reduced body image, particularly in individuals post-treatment (56).

Based on the explanation above, it can be concluded that patients with breast cancer, whether undergoing or having completed therapy, require supportive care aimed at preventing therapy-related side effects and assisting in the management of both physical and psychosocial conditions (57). Although the analysis identified various forms and types of support, the provision of support remains predominantly influenced by the role of the family. This highlights the critical importance of family involvement in the treatment and recovery process experienced by patients. Family support contributes to enhancing patients' self-confidence in facing the long treatment journey (58). The presence of family during the treatment process provides patients with a sense of safety and comfort, which significantly affects their psychological well-being (59). This can become a highly important input for healthcare professionals to actively involve the family in the care process undergone by the patient, as it will have a positive impact on the patient's body image and ultimately improve the patient's quality of life.

Although it is a concern for healthcare professionals, excessive dependence on family support can also become a barrier in the care process, especially when family members lack a comprehensive understanding of the patient's condition or are unable to provide the emotional support required by the patient. Some studies have indicated that the better the family support provided, the better the patient's condition will be. Conversely, insufficient family support can contribute to a decline in the patient's condition (47). Therefore, healthcare professionals, particularly nurses, need to be able to identify other available sources of support and facilitate the development of a holistic and integrated support system for breast cancer patients.

The limitation in this study was particularly the lack of an in-depth exploration of implementation

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in clinical practice or real interventions, as well as the reliance on limited research designs. This scoping review also highlights the need for ongoing research to explore the effectiveness of each type of support within different contexts, including cultural influences, marital status, patient condition, and the living environment that may support the presence of active survivor communities. Future research is expected to further explore the relationship between various aspects that support improved body image in patients with breast cancer.

CONCLUSION

This scoping review highlights several types of support that can help improve body image in breast cancer patients undergoing treatment. The types of support that can be provided include social support, which may come from friends, family members, leading figures, healthcare providers, and individuals considered important; psychological support, which can be delivered through clinical therapy; partner support; and support from fellow survivor groups. Social support from family is the most commonly identified type of support; however, it cannot stand alone. Therefore, a holistic and integrated support approach is necessary to optimally enhance positive body image in patients.

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CONFLICTS OF INTEREST

The authors declare no conflict of interest

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