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RECONSTRUCTED LIVES

Mother and daughter both faced breast cancer, and survived

By PATTI MARTIN
STAFF WRITER

Danielle Watznauer (left) learned about breast plastic reconstructive surgery with the help of her daughter, Victoria Watznauer. Dr. Michael Rose talks about surgical options.

Typically, it is a mother who gives life to a daughter, but for Danielle and Victoria Watznauer it worked the other way as well.

Four years ago, Danielle was diagnosed with breast cancer. The Plumsted resident, now 69, had gotten a mammogram that detected a problem in her left breast. Her immediate reaction was, "Let's get it out. I want to be cured."

But her life after the mastectomy . . . that was something she had not given any thought.

Enter Victoria Watznauer, Danielle's daughter. She began talking to her mother about breast reconstruction surgery.

"I know my mother. I knew she would be uncomfortable without a breast," said Victoria Watznauer, 47, also of Plumsted. "I told her to do it."

This time, it was daughter who knew best.

"It was the right choice for me," Danielle Watznauer said. "I'm not constantly reminded of the cancer when I take a shower. Having that (left) breast makes me feel whole again. I can go about living my life."

What neither woman expected was that, less than two years later, Victoria would be facing the same situation.

Family history

When Danielle had received her diagnosis, it did not come as a complete surprise.

"My sister had breast cancer in 1991," she said. "I thought my chances were pretty good of getting it, too."

In October 2005, she underwent a mastectomy. And ultimately, she was able to resume living her life, thanks to her daughter.

"Victoria knew that, psychologically, it would be hard for me without a breast," Danielle said. "And yes, I had breast cancer, but I've been cancer-free for four years, and I don't need that constant reminder."

Breast reconstruction is performed by plastic surgeons who have received special training. The surgery rebuilds the size and shape of the breast following the mastectomy.

Generally, there are two types of reconstruction, according to Dr. Michael Rose of the Plastic Surgery Center, which has offices in Shrewsbury and Freehold. The first is a breast implant.

The implant may be placed right away, or a "balloon" — a tissue expander — may be put in first. Over several months, the expander is filled with saline until its size matches the other breast. The expander is then removed and the implant put in.

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> *— Danielle Watznauer*

The other type of reconstruction is known as tissue flap surgery. A new breast is shaped from skin, fat and muscle taken from another area of the body (usually the belly).

After her mastectomy, Danielle Watznauer had her left breast reconstructed. The surgery was performed by Rose.

Then, 21 months after her mother's diagnosis, Victoria Watznauer found a lump in her own left breast — a lump that had not been detected in a recent mammogram. She immediately knew something was wrong.

"I didn't have any fear," Victoria said. "I just knew it was cancer."

Recovery plan

Victoria went about scheduling an ultrasound, meeting with doctors including Rose, and scheduling a mastectomy and breast reconstruction.

What she didn't do was tell her mother — at least initially.

"I didn't want her to worry," Victoria said. "She was dealing with her own recovery, and I wanted her to focus on that."

As part of her own reconstruction plan, Victoria opted to increase her breast size.

"I would never have had implants just to have implants — but having to have the mastectomy, I decided that I would just go bigger," Victoria said.

The result, she said, "is just perfect."

"I feel comfortable with myself," Victoria said. "I go about my life not thinking about the cancer. It was a bump in the road — the reconstruction has allowed me to get on with my life and not pity myself because of a breast cancer diagnosis."

Facing choices

Both mother and daughter said that having breast reconstruction following a mastectomy was an extremely personal choice.

"We were both realistic about how a new breast would look and feel," Victoria Watznauer said. "And I think for both of us, reconstruction provided a psychological lift. Yes we had breast cancer, but breast cancer wasn't going to define us."

Reconstruction can be a great psychological healer, Rose said.

"It's only been since the late 1980s, early 1990s that breast reconstruction surgery has come into its own," Rose said. "And since that time, techniques have been refined, making it an option for many women."

Most women are candidates for breast reconstruction, although it may not be an option for those who are obese, who smoke or who have other serious health problems such as heart disease or diabetes.

And as with any surgery, breast reconstruction comes with pros and cons.

"It is important to discuss options with your doctor," Rose said. "A breast cancer diagnosis is stressful enough, so you want to take the time to make the right decision for you."

BREAST CANCER

JUST THE FACTS

- An estimated 192,370 new cases of invasive breast cancer are expected to occur among women in the United States during 2009.
- Breast cancer is second only to lung cancer in cancer deaths among women in the United States.
- An estimated 40,170 women in the U.S. will die from breast cancer in 2009.
- There are 2.5 million breast cancer survivors alive in the United States today.
- In the U.S., breast cancer death rates have steadily declined since 1990.
- The five-year survival rate for female breast cancer survivors in the U.S. has increased from 63 percent in the early 1960s to 89 percent today.
- A woman's chance of developing breast cancer increases with age. in the U.S., a woman has about a 12.1 percent, or 1 in 8, lifetime risk of developing breast cancer.

Sources: American Cancer Society, Susan G. Komen for the Cure