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**Introduction.** Breast cancer is the most common cancer in women worldwide (WHO, 2022). With 7-10% of diagnoses involving premenopausal women (Rossi et al., 2019), fertility and reproductive issues emerge as critical concerns, with nearly half of young survivors expressing a desire for pregnancy (Paluch-Shimon et al., 2017). However, meta-analysis indicates a 40% lower pregnancy rate post-breast cancer treatment compared to the general population (Gerstl et al., 2018). Pregnancy after breast cancer so represents a moment of vulnerability deserving attention to prevent negative consequences.

**Methods.** This study aims to critically analyze the psychological implications associated with pregnancy and motherhood following breast cancer, focusing on the challenges and complexities that women face. The methods entail a literature review covering existing works until 2021. The goal is to provide information and advocate for concrete actions to improve the support for women navigating pregnancy post-diagnosis, addressing their unmet needs.

## References

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**Results. Mood status and health concerns.** Cancer diagnosis and treatment can lead to psychological instability and depression. Breast cancer patients often experience distress, anxiety, cognitive impairment, and sexual dysfunction during treatment. Reproductive issues post-treatment are linked to increased depressive symptoms.

**Pregnancy representation.** Women may grapple with uncertainty about disease outcome, discontinuation of hormone therapy, fears of recurrences and misinterpreting breast changes during pregnancy.

**Delivery and preparation.** Childbirth can be traumatic, especially for cancer survivors, potentially leading to PTSD. Anxiety and stress during pregnancy can impact birth outcomes. Psychological interventions before childbirth are recommended to address anxiety and prepare for the experience.

**Marital and family support.** Partner support is crucial during pregnancy and postpartum for psychological well-being. Lack of social support correlates with higher depression levels. Counseling should focus on coping strategies and exploration of emotions.

**Breastfeeding.** Breast cancer survivors might encounter difficulties with breastfeeding due to psychological factors, body image concerns, and accepting their previously affected breast as a source of nourishment. Despite these challenges, they are encouraged to breastfeed through counseling.

**Conclusions.** The rising incidence of breast cancer in young women demands a multidisciplinary approach to address the challenges of pregnancy after diagnosis. A comprehensive approach, including psychological support and partner involvement, enhances resilience and adjustment to motherhood challenges after cancer. Our findings call for heightened awareness and intervention strategies to enhance the overall well-being of breast cancer survivors undertaking the challenges of pregnancy and parenthood.

