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Research Article

A STUDY TO ASSESS THE KNOWLEDGE REGARDING BREAST SELF-EXAMINATION, CERVICAL CANCER AND TO RULE OUT CERVICAL CANCER AMONG WOMEN IN SELECTED RURAL AREAS, UTTAR PRADESH

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ABSTRACT

Introduction: The South African government has recently released cancer policies for breast and cervical cancer-the most common types and causes of cancer-related death in South African women. Increased mortality rates and advanced disease at presentation in comparison with developed countries suggests a need for greater awareness of risk factors, screening and preventative methods individualized for the population at risk. **Aim:** To characterize and compare the knowledge base and perceptions of women in urban and rural settings, we assessed these factors in two different cohorts in South Africa. **Methods:** A cross-sectional sample was taken in South Africa of women invited to participate in a survey regarding breast and cervical cancer knowledge, and awareness of risk factors, prevention and screening. **Results:** 600 total women were surveyed, with 300 from each cohort. 83% of the urban cohort completed matriculation or higher, versus 60% of rural participants for whom high school was their highest level of education. Both groups demonstrated comparable levels of cancer awareness, and > 70% felt that cervical cancer is preventable. While the urban cohort was more knowledgeable about Pap smears. **Conclusion:** Overall knowledge of breast and cervical cancer did not differ between both groups, despite varying levels of education and geographic setting. Women in the rural cohort demonstrated more awareness of several oncologic risk factors. This data supports a need for further implementation and distribution of cancer care services within cancer policies.

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INTRODUCTION

Globally, cancer is the 2nd leading cause of death and about 8.8 million deaths occurred due to it in 2015. Cervical Cancer is the most common cancer among women worldwide with an estimated 530,000 new cases and 275,000 deaths with overall incidents mortality ratio of 52 percent. Cancer is a "Taboo" and the term cancer itself cause uneasiness to people who after believe it is untreatable. It takes up much of a person's time in thinking about treatment and the future holds. During diagnosis and treatment, the magnitude of the problem becomes apparent which causes severe emotional and psychological problems like anxiety and depression which are inadequately managed and at times not even recognized. (Weissman, 2004)

Cervical cancer begins when healthy cells on the surface of the cervix change and grow out of control, forming a mass called a tumor. A tumor can be cancerous or benign. A cancerous tumor is malignant, meaning it can spread to other parts of the body.

A benign tumor means the tumor will not spread. At first, the changes in a cell are abnormal, not cancerous. Researchers believe, however, that some of these abnormal changes are the first step in a series of slow changes that can lead to cancer. Some of the abnormal cells go away without treatment, but others can become cancerous. This phase of the disease is called dysplasia, which is an abnormal growth of cells. The abnormal cells, sometimes called precancerous tissue, need to be removed to keep cancer from developing. Often, the precancerous tissue can be removed or destroyed without harming healthy tissue, but in some cases, a hysterectomy is needed to prevent cervical cancer. A hysterectomy is the removal of the uterus and cervix. (Cancer editorial board, 2017)

The cross-sectional study was carried out to assess the knowledge and practice of breast self-examination among females. The findings revealed that the most of the women 89% were aware of BSE. 18% of the females had ever checked their breast and 5% practices it regularly. The level of

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knowledge and practice of BSE among females are unacceptably low. Efforts should be made to increase level of knowledge and practice of BSE through health education program. Hemalatha Kumarasamy et al (2017)

A cross-sectional study was conducted to study the knowledge, awareness and attitude of patients about cervical cancer and the screening methods in a tertiary institution. The result showed that 37% had heard of cervical cancer, while 22% knew about screening with health care provider, 13% women ever had screening done and only one aware of HPV vaccine. Adequate health information and counselling on cervical cancer and regular screening still need to be emphasized in developing countries so as to reserve the morbidity and mortality associated with cervical cancer. ShamaRazzaq et. al. 2017

A cross-sectional study was performed to study the awareness of breast and cervical cancer among common women based on different factors such as age, residence and occupation. The analysis was performed to study the significant association of different factors with various knowledge related to breast and cervical cancer among the study groups. Result showed that there was a high significant association ($p < 0.01$) of various factors. There was significant difference in the knowledge level perceived by different groups under study. People of rural area were less aware of breast cancer and cervical cancer. Kangkana Bora et. Al. 2016

A cross-sectional study was conducted to study the knowledge, awareness and attitude of patients about cervical cancer and the screening methods in a tertiary institution. The result showed that 37% had heard of cervical cancer, while 22% knew about screening with health care provider, 13% women ever had screening done and only one aware of HPV vaccine. Adequate health information and counseling on cervical cancer and regular screening still need to be emphasized in developing countries so as to reserve the morbidity and mortality associated with cervical cancer. ShantadeviSambat et al (2018)

The cross-sectional study was conducted to investigate the distribution of cervical and breast cancer risk factors in women and their knowledge and behavior about cancer screening methods. The results showed that the rates of those who knew and did breast self-examination were significantly lower in illiterate women who were aged 40 and the rates of those who has clinical breast examination and pap smear were significantly lower in women aged 39 & below $p < 0.01$. The study identified the most notable breast and cervical cancer risk factors as low education levels, high number of deliveries, short breastfeeding period obesity and low socio-economic level. KaradagArli et. al (2018)

The cross-sectional study was conducted to assess the knowledge and screening method of cervical cancer among women attending OPD. 88% women were not aware of cervical cancer and its risk factors. 6.5% women were aware of the paps test. 8% were aware of probability of early diagnosis. Majority (98.5%) were not aware of vaccination as prevention for cervical cancer. The population shows very poor knowledge about cervical cancer risk factors and is unaware of the concept of prevention. Hence extensive health education to the public is needed regarding cervical cancer and its prevention. AsmaNigar (2017)

METERIAL AND METHOD

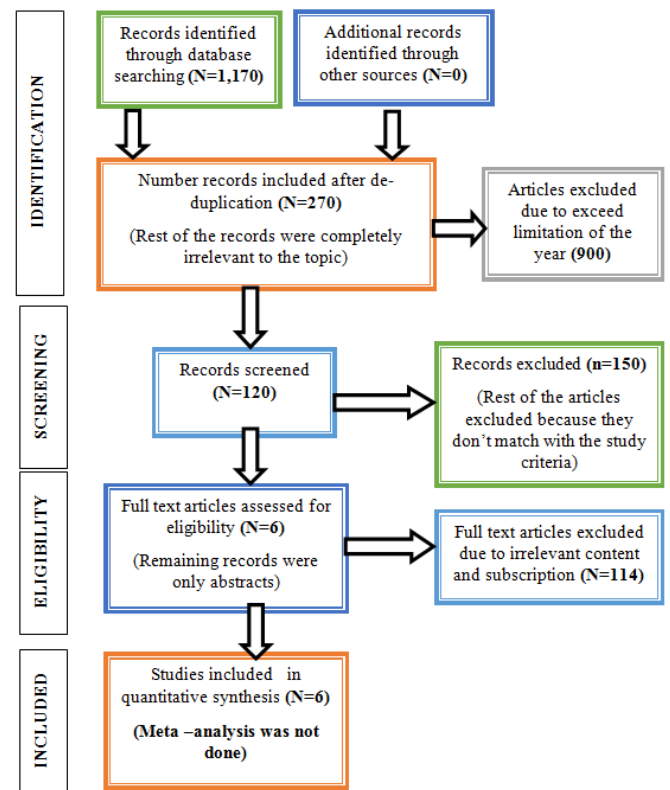


Figure 2 Prisma flow diagram of narrative review

Findings

The systematic search was conducted by formulating the terms separately and in integration with all synonyms, also according to the database. Likewise, a manual Google scholar search was undertaken using the keywords and search synonyms from already articles. An addition of 6 articles was found in the database. Initial search recovers 1170 articles over which 270 articles were selected manually. 150 articles were rejected as a result of replication in the database. Replication was removed and reviewed 120 articles for acceptability. 114 more studies were rejected because of unreachable of the full text. Hence 6 articles were screened which includes quantitative study.

DISCUSSION

The findings are supported by a study conducted by cross-sectional study conducted by NC Obajiet. Al. reported that the rate of those who knew and did breast self-examination were significantly lower in illiterate women who were aged 40 and the rates of those who has clinical breast examination & pap smear test were significantly lower in women aged 39 & below $p < 0.01$. The study identified the most notable breast & cervical cancer risk factor as low education levels, high number of deliveries, short breast feeding period, obesity & low socio-economic level

CONCLUSION

There was high significant association ($p < 0.01$) of various factors. There was significant difference in the knowledge level perceived by different groups under study. People of rural area were less aware of breast cancer and cervical cancer. Therefore

adequate health information and counselling on cervical cancer, breast cancer & regular screening need to be emphasized.

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Ethical Clearance

- Principal, School of Nursing Science and Research, Sharda University
- University Ethical Committee, Sharda University
- Permission will be obtained from the Greater Noida Development Authority to collect the data of the women from rural areas.

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