Original Research Article

Evaluation Of Knowledge & Preventive Practices Regarding Breast & Cervical Cancer Among Women Of Reproductive Age Group (15 To 45 Year) Of Ahmedabad Municipal Corporation (AMC) Area

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ABSTRACT

Introduction: Breast and cervical cancer are two important cancers in females at worldwide.
Aims & objectives: 1) To evaluate and improve knowledge on different aspects of breast and cervical cancer among participants. 2) To assess and improve the preventive practices of participants for breast and cervical cancer.
Methodology: A cross sectional study was conducted at slum areas of Beharampura ward of south zone, AMC. Study group was women of reproductive age group. Study period was January to June 2014. Data was collected for 200 selected women. Structured proforma was used for data collection purpose.
Results & discussion: According to participants, commonest risk factor for breast cancer was familial history (58.5%) and for cervical cancer it was multiple sexual partners (71%). Commonest symptom for breast cancer was visible lump/swelling in breast (61.5%) and for cervical cancer was abdominal pain (56%). Commonest diagnostic technique for breast cancer was X-ray (42%) and for cervical cancer was abdominal-USG (36%). Poor awareness was noted for Pap test (14.5%). Most of participants preferred to go for medical checkup only in case of doubtful symptoms of breast (68.5%) and cervical (56%) cancer.
Conclusion: Average knowledge of participants was observed for risk factors, symptoms and diagnostic techniques of breast and cervical cancer. Priority of medical checkup should be given on regular base and not only in case of doubtful symptoms.

Key words: Reproductive women, knowledge, breast & cervical cancer, preventive practices

INTRODUCTION

Cancer is a leading cause of death in both more and less economically developed countries. [1] The occurrence of cancer is increasing worldwide because of the growth and aging of the population as well as increasing prevalence of established risk factors such as smoking, overweight, physical inactivity, changing reproductive patterns, familial / hereditary causes etc. [1,2] Burden of cancer is also associated with urbanization and industrialization particularly in less developed countries, in

which about 82% of the world's population resides.

Breast cancer is the most frequently diagnosed cancer and the leading cause of cancer death among females' worldwide, with an estimated 1.7 million cases and 521,900 deaths in 2012. [3] Breast cancer alone accounts for 25% of all cancer cases and 15% of all cancer deaths among females. More developed countries account for about one-half of all breast cancer cases and 38% of deaths. Rates are generally high in Northern America, Australia/New Zealand, and Northern and Western Europe and low in most of Africa and Asia. [4,5] International variation in breast cancer incidence rates reflects differences in the availability of early detection as well as risk factors.

There were an estimated 527,600 new cervical cancer cases and 265,700 deaths worldwide in 2012. It is the second most commonly diagnosed cancer and third leading cause of cancer death among females in less developed countries. [6,7] India, the second most populous country in the world, accounted for 25% of cervical cancer deaths (67,500 deaths). The large geographic variation in cervical cancer rates reflects differences in the availability of screening, which allows for the detection and removal of precancerous lesions and human papilloma virus (HPV) infection prevalence. [8] There are 2 vaccines available for protection against the 2 types of HPV that cause most (70%) cervical cancers. [3] In economically less developed countries, the major barrier to widespread use is the high cost of the vaccine; however, GAVI, the Vaccine Alliance, has negotiated lower prices for developing countries. So for increasing awareness and preventive practices on breast & cervical cancer, study was conducted in women of reproductive group with following objectives.

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MATERIALS AND METHODS

Ahmedabad Municipal Corporation is divided in 6 zones and has total 57 wards with a city population of 5,570,585. [9] Six zones are West Zone (WZ), New west Zone (Nwz), East Zone (Ez) and North Zone (Nz), Central Zone (Cz) and South Zone (Sz). The present cross sectional study was conducted at slum areas of Beharampura ward of south zone, Ahmedabad Municipal Corporation area. The ward was randomly selected. Study group was women of reproductive age group (15 to 45 year age) and data was collected for 200 selected women of slum areas of Beharampura ward. Informed consent of all participants was taken for data collection purpose after giving brief orientation about study. Those who denied were excluded. Study period was January to June 2014. Fully structured proforma, which was specially designed and pre-tested, was used for data collection purpose. The proforma contains details of various components to evaluate knowledge and practices of breast and cervical cancer among participants e.g. risk factors, symptoms, diagnostic techniques and preventive practices. Small awareness sessions on breast and cervical cancer were arranged in community with the help of different IEC materials (e.g. posters, charts, photos etc) for improving the knowledge and preventive practices among participants after data collection. Data entry was carried out (MS excel 2007) and data analysis was done by using appropriate statistical software (e.g. SPSS statistics 20)

RESULTS

Breast and Cervical cancers are two most predominant cancers in female. Current study was done to evaluate the knowledge and practices on various aspects of breast and cervical cancer. (E.g. risk factors, symptoms, diagnostic techniques, preventive practices etc.) Knowledge of different risk factors for breast & cervical cancers among women of reproductive age group (15 to 45 yr.) is shown in table-1. Majority of participants were aware regarding predominant role of Hereditary / Family History in breast and cervical cancer. As such there are so many of symptoms of breast cancers. On the basis of initial symptoms, early detection of breast cancer can be done. Some common symptoms of breast cancers were noted in table-2 on the basis of knowledge of participants. The symptoms of cervical cancers are not well known and mostly they are seen at late stage. Average to poor knowledge of women of reproductive age group was noted as per the results (Table-3). Nowadays there are so many diagnostic techniques and methods available for detection of breast cancers at early stage. Knowledge of study participants was noted in table-4. Majority of participants were answered that X-ray was effective technique for detection of breast cancer. For cervical cancer, Pap test was very cost effective, easily available and accessible screening method for early detection of cancer. As per the results, knowledge of participants for different diagnostic technique was average to poor (Table-5). Regarding the practices for early detection and prevention of breast and cervical cancer of participants, results were noted in table-6. Poor practices for breast self examination (66.5%) was noted. Average results were noted for good hygienic practices (41%) for prevention of cervical cancer (Table-6). Most of participants were go for medical checkup only in case of doubtful symptoms of breast (68.5%) and cervical (56%) cancer. only few participants (4.5%) were taken HPV vaccine for prevention of cervical cancer. This is due to high cost and poor knowledge for such vaccine among participants (Table-6).

Table-1: Knowledge of risk factors of Breast and Cervical cancer.

Sr. No	Knowledge of risk factors * (N=200)	Breast cancer		Cervical cancer	
		No.	Percentage	No.	Percentage
1	Hereditary / Family Hx	117	58.5	96	48
2	Married women	57	28.5	78	39
3	Unmarried women	93	46.5	24	12
4	Poor Breast feeding	104	52	13	6.5
5	Oral Contraceptive Pills	89	44.5	37	18.5
6	High Fatty diet	32	16	7	3.5
7	Multiple sexual partners	9	4.5	142	71
8	Personal Hygiene	17	8.5	53	26.5
9	Radiation exposure	76	38	23	11.5

Symbol (*) indicates multiple answers.

Table-2: Knowledge of symptoms of Breast cancer among participants.

Sr. No.	Knowledge of Symptoms of Breast cancer* (N=200)	No.	Percentage
1	Visible lump/swelling in breasts	123	61.5
2	Visible lump/swelling in axilla	39	19.5
3	Change in shape of breast	47	23.5
4	Nipple discharge	96	48
5	Pain in breast lump	92	46

Symbol (*) indicates multiple answers.

Table-3: Knowledge of symptoms of cervical cancer among participants.

Sr. No.	Knowledge of Symptoms of Cervical cancer* (N=200)	No.	Percentage
1	Burning micturation	93	46.5
2	Vaginal discharge (Blood, pus)	25	12.5
3	Abdominal pain	112	56
4	Lymphadenopathy	23	11.5

Symbol (*) indicates multiple answers.

Table-4: Knowledge regarding diagnostic techniques of Breast cancer.

Sr. No.	Knowledge regarding diagnosis of Breast cancer* (N=200)	No	Percentage
1	Regular self examination	63	31.5
2	Mammography	49	24.5
3	Biopsy	78	39
4	X-ray	84	42
5	CT scan/MRI	16	8

Symbol (*) indicates multiple answers.

Table-5: Knowledge regarding diagnostic techniques of cervical cancer.

Sr. No.	Knowledge regarding diagnosis of Cervical cancer* (N=200)	No	Percentage
1	Pap test	29	14.5
2	Biopsy	52	26
3	X-ray	63	31.5
4	CT scan/MRI	35	17.5
5	Abdominal USG (sonography)	72	36

Symbol (*) indicates multiple answers.

Table-6: Preventive practices for Breast and Cervical cancer prevention.

Sr. No.	Preventive practices for cancer prevention (N=200)	No.	Percentage
Breast cancer			
1	Breast self examination		
1.a	Daily	11	5.5
1.b	Once a week	20	10
1.c	Once a month	36	18
1.d	Not done	133	66.5
2	Medical checkup by doctors		
2.a	Once in 6 months	13	6.5
2.b	Once in 12 months	29	14.5
2.c	In case of doubtful symptoms	137	68.5
2.d	Not done	21	10.5
Cervical cancer			
1	Maintain good Hygiene practices	82	41
1.a	No good Hygiene practices	118	59
2	Medical checkup by doctors		
2.a	Once in 6 months	27	13.5
2.b	Once in 12 months	33	16.5
2.c	In case of doubtful symptoms	112	56
2.d	Not done	28	14
3	HPV vaccine taken	9	4.5

DISCUSSION

Cancer is a leading cause of death worldwide and occurrence of cancer is also increasing day by day. [1,2] According to women, most common risk factors for breast cancer was family history/hereditary cause (58.5%) followed by poor breast feeding practices (52%), Unmarried women (46.5%) and Oral contraceptive pills consumption (44.5%). For cervical cancer, opinion of women for common risk factors was multiple sexual partners (e.g. Commercial Sex Workers) (71%), family history/ hereditary cause (48%), marriage (39%) etc. (Table-1). Breast cancer is the most frequently diagnosed cancer and the leading cause of cancer death among females' worldwide. [5] The initial symptoms of breast cancer are very helpful for early detection of breast cancer in initial stage. As from the results, majority of women were aware regarding visible lump/swelling in breast (61.5%). The knowledge of other symptoms e.g. nipple discharge (48%), pain in breast lump (46%) was average for breast cancer (Table-2). Study reveals that according to knowledge of participants, most common symptom for cervical cancer was abdominal pain (56%). Other symptoms were burning micturition (46.5%), different types of vaginal discharge (12.5%) and Lymphadenopathy (11.5%) (Table-3). Majority of women of reproductive age group was answered that diagnosis of breast cancer was done by X-ray (42%). Other diagnostic techniques were biopsy (39%), regular self examination (31.5%), mammography (24.5%) etc. (Table-4). Cervical cancer is the second most commonly diagnosed cancer and third leading cause of cancer death among females in less developed countries. [2] The Pap test screening technique was widely used and awareness for this screening is high among developed countries. [1] But in developing countries like India, poor level of awareness for Pap test screening technique was noted. So majority of women in developing countries are diagnosed for cervical cancer in late stage, where treatment is difficult and prognosis is poor. [3] Current study reveals that, knowledge of participants for pap test (14.5%) was very low. According to them diagnosis of cervical cancer was done by abdominal USG (36%), X-ray (31.5%), biopsy (26%) etc. (Table-5). Good preventive practices and awareness regarding breast and cervical

cancer can minimize the occurrence of breast and cervical cancer. It is also helpful for early detection of both cancers at initial stage and also helpful for better prognosis. As the study reveals, preventive practices for breast cancer was poor of majority of participants. This is because majority of participants were not doing regular self breast examination practices (66.5%). Even medical checkup was done for breast cancer only in case of doubtful symptoms (68.5%) and not on regular base. For cervical cancer prevention good hygienic practices (vaginal) is essential. But the results showed that only 41% of participants were maintaining good vaginal hygienic practices. Majority of participants were preferred medical checkup for cervical cancer not on routine basis (screening) but only in case of doubtful symptoms (56%) (Table-6). In case of breast and cervical cancer, doubtful symptoms may appear at late stage where prognosis was poor. So it is advisable to maintain good preventive practices for early detection and better prognosis of both cancers. There are 2 vaccines available for protection against the 2 types of HPV that cause most (70%) cervical cancers. But due to high cost and poor awareness in community level, only few participants (4.5%) were taken HPV vaccine.

CONCLUSION AND RECOMMENDATIONS

As per the participants, most common risk factors for breast cancer was family history/hereditary cause (58.5%) followed by poor breast feeding practices (52%) and for cervical cancer it was multiple sexual partners (e.g. Commercial Sex Workers) (71%). Regarding the knowledge of symptoms, commonest symptom for breast cancer was visible lump/swelling in breasts (61.5%) and for cervical cancer, it was abdominal pain (56%). Most preferable diagnostic technique for breast cancer was X-ray (42%) and for cervical cancer was abdominal USG (36%). Poor awareness was noted for Pap test screening (14.5%) for early detection of cervical cancer. Regarding the preventive practices for average findings was noted for breast self examination (33.5%) and maintaining good vaginal hygienic practices (41%). Majority of participants were preferred medical checkup/examination only in case of any doubtful symptoms appear for breast cancer (68.5%) and for cervical cancer (56%). Regular checkup is emphasized according to risk factor exposure.

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