

A Cross sectional study regarding knowledge of cervical cancer screening and its practice in women in a Tertiary Care hospital in Central India

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Abstract

Aim-To assess knowledge and practice of women towards cervical cancer screening.

Methodology-

Study Design: - Cross Sectional Study

Study Site: Gynaecology opd and IPD in Department of Obs & Gyn, MY Hospital and MTH Hospital, Indore.

Study Population- Patients attending gynaecology opd and admitted in Department of Obs & Gyn, MY Hospital and MTH Hospital

Sample size- 290

Sampling Frame: - Married eligible women for screening of cervical cancer in the age group of 25 to 55 years **Sampling**

Methods: - purposive sampling will be done.

Criteria- Married eligible women for screening of cervical cancer in the age group of 25 to 55 years

Exclusion Criteria-

Women who is outside the eligible age group. Women who fails to give consent.

Women who is not able to respond due to any reason. Biopsy diagnosed carcinoma cervix.

Keywords: hyper cervical cancer screening, carcinogenic human papillomavirus (HPV)

INTRODUCTION:

Cervical cancer is thought to affect 500,000 people annually, and 79 to 85 percent of those cases—where it consistently ranks as the most common cancer and causes more than 2,30,000 deaths annually—occur in developing nations.[1] The four fundamental elements of cancer control, however prevention, early symptom detection, prompt diagnosis and treatment, and efficient palliative care can be implemented in all nations at some useful level due to the wealth of knowledge that is currently available.[2]

In India, tobacco use is a leading cause of breast, cervical, and head and neck cancers in women. All three cancers are easily detectable early on and, if caught in stages I or II, are almost always curable with a greater than 70–80% chance of achieving a full life expectancy of 75 percent or more. [3] But according to some reports, the number of cases of breast cancer is currently higher than those of cervical cancer. [4] 85 percent of cervical cancer deaths occur in low- and middle-income countries, making it the fourth most common cancer in women worldwide. 528,000 new cases of cervical cancer were diagnosed globally in 2012, with 123,000 cases being diagnosed in India. In 2012, this disease claimed the lives of about 266,000 women worldwide, 67,000 of whom perished in India [5]. Researchers have discovered that carcinogenic human papillomavirus (HPV) infection is linked to the majority of cervical cancer cases. Promiscuous sexual behaviour, reproductive factors like genital hygiene, early menarche, the window between menarche and the first sexual encounter, young marriage age, high parity, other sexually transmitted infections, and smoking are among the additional risk factors for cervical cancer.

Typically, early invasive cervical cancer develops after a persistent HPV infection for ten years. Many years pass after a woman contracts HPV, but pathological changes that occur during this time can be found using various screening techniques, such as a Pap smear. Thus, by detecting and treating cervical cancer in its precancerous stages, it is possible to reduce the morbidity and mortality caused by the disease. Health-seeking behaviour is influenced by knowledge of the various cervical cancer signs, symptoms, and risk factors. Additionally, their awareness of and favorable attitudes toward the cervical cancer vaccine may further lower the risk of contracting HPV. The purpose of this study was to evaluate women's attitudes and practices toward cervical cancer as well as their knowledge of the symptoms, risk factors, early detection, prevention, and knowledge of cervical cancer. A cancer diagnosis can be an emotionally traumatic experience, and the treatment of cancer can be a significant financial burden. More than one-third of cancer patients experience feelings of anxiety and depression following the initial diagnosis of their disease, which is widely regarded as a life-threatening event.

RESULTS-

Table 1. KNOWLEDGE ABOUT PERSONS WHO UNDERGOSCREENING FOR CANCER CERVIX

	Frequency	Percent
Women Aged 25 Year and Above	21	7.2
Women With Multiple Sex Partner	4	1.4
Elderly Women	8	2.8
Do Not Know	257	88.6
Total	290	100.0

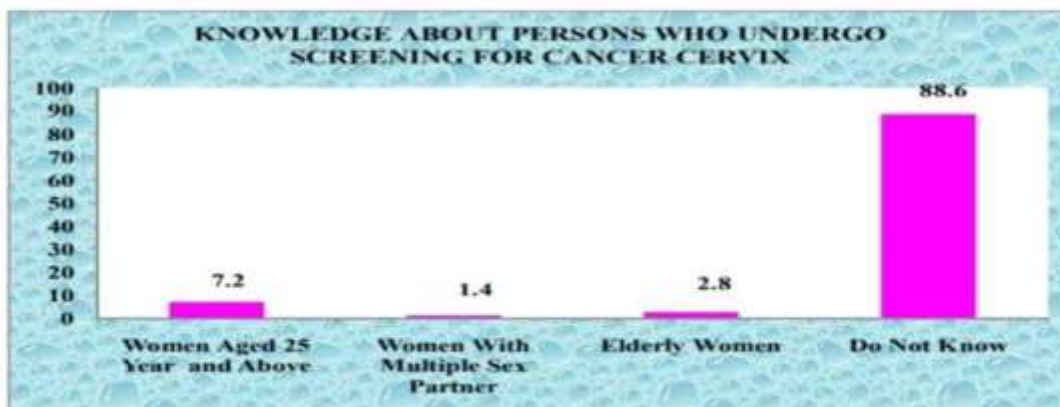


Table 2. KNOWLEDGE ABOUT SCREENING FREQUENCYIN CANCER

	Frequency	Percent
Once A Year	12	4.1
Once Every 5 Year	1	.3
Do not Know	277	95.5
Total	290	100.0

In our study, 95.5% subjects had no knowledge about how often the screening for cancer cervix should be done.

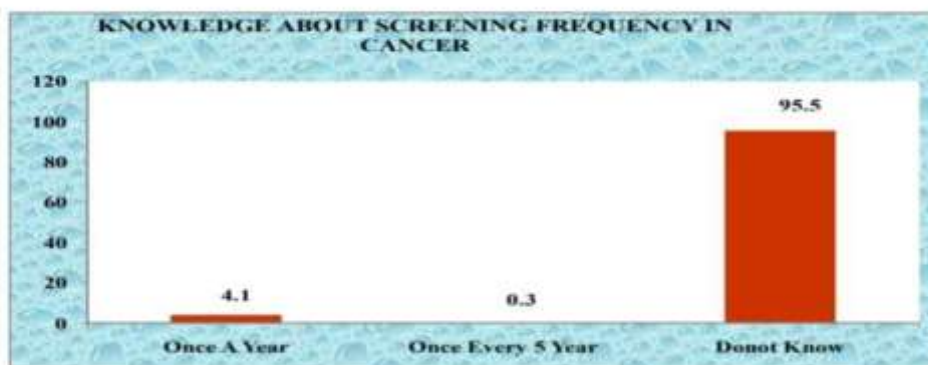


Table 3 DISTRIBUTION OF STUDY SUBJECTS BASED ONINDIVIDUAL SCREENED FOR CANCER CERVIX

	Frequency	Percent
ONCE A YEAR	161	56%
DONOT KNOW	129	44%
Total	290	100%

In our study, 56% study subjects were screened for cancer cervix once a year and 44% did not know about it.



Table 4 INFORMATION BASED ON WHETHER STUDY PARTICIPANT HAVE EVER BEEN SCREENED FOR CANCER CERVIX BY PAPTEST

	Frequency	Percent
YES	160	55%
NO	130	45%
Total	290	100%

In our study, 55% study subjects knew that they have been screened for cancer cervix by pap test. Rest 44% study subjects did not knew.

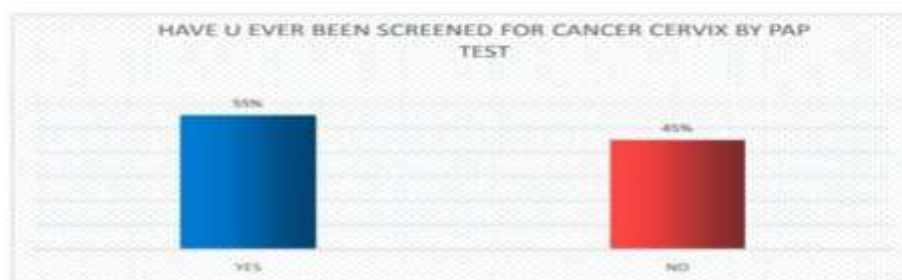
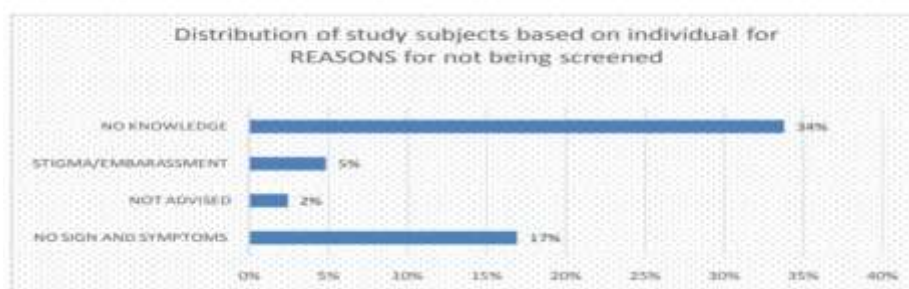


Table 5 DISTRIBUTION OF STUDY SUBJECTS BASED ON INDIVIDUAL FOR REASONS FOR NOT BEING SCREENED

	Frequency	Percent
NO SIGN AND SYMPTOMS	49	17%
NOT ADVISED	7	2%
STIGMA/EMBARASSMENT	14	5%
NO KNOWLEDGE	98	34%



DISCUSSION-**Socio-Demographic Variables**

In the present study total 290 female were interviewed

- 94.4% participants were belong to age of 20-49year.
- 77.6% were Hindu and 22.4 % Muslim.
- 86.2% women were from urban locality and only 13.8% were from rural area.
- All participants were married and 92.8% were home maker.
- 21% were illiterate, 32.4% were studied up to primary school, 35.5% were educated up to middle school, only 5.9% were studied till high school and 5.2% were educated up to graduate.
- Parity of the participants 60% of participants was having parity of > 2.

Knowledge regarding the Cervical cancer screening Knowledge regarding whom should go for screening of CA-cervix 88.6% participants were unaware, 7.2% answered women of age above 25 years, 2.8% were know that elderly women must go for screening and 1.4 % were aware about the screening is must for women whom having multiple sex partner.

Knowledge regarding screening frequency of cancer cervix 95.5% of women were unaware, 4.1% were know once in a year and only 0.3% were aware that it should be once in a three year.

The knowledge about screening in our study was between 1- 12% . study by kumar and Tanya in year 2014[6] knowledge of screening was about 14.45% which is close to our study.

Elamurugan *et al* in year 2016 [7] Knowledge of Screening was 84% which is much higher than our study.

Knowledge of HPV Vaccine

In our study 100% women were unaware about HPV vaccine Bathija *et al* [8] reported Knowledge of HPV Vaccine 0.5% and study done by sidharthar *et al* in year 2014[9] Knowledge of HPV Vaccine-2.8% which is very close to our study. Which is in contrast with Ramavath and Olyai in year 2013 observed Knowledge of HPV Vaccine-32.8% in their study population.

Showket Hussain *et al*[10] in 2014 Knowledge of HPV Vaccine-10.31%. Montgomery *et al* in 2015 [11] observed Knowledge of HPV Vaccine-36%. Arunadevi and Prasad [12] in same year found 6.5%. Varughese *et al* [13] in 2016 found 6.6%. Narayana *et al* in year 2017[14] found 74.6 % awareness about HPV vaccine

Practice regarding the cervical cancer screening

Only 55.2% of participant were ever tested for cervical cancer among them 56.1% women go for screening every year while 43.9% were go for screening once in 2-3 year. Among the non-screened 61 % women not come for screening as they not having any knowledge. 12.6% were not screened as they are not having any sign or symptoms . In our study the 55.2% female were gone the pap smear test once in their life time. study by kumar and Tanya in year 2014[15] observed practice was only 7.2%, Singh *et al* [16] it is 19.6% Montgomery *et al* in 2015 only 5%, Bansal *et al* was 9.5%. Elamurugan *et al* in year 2016 [7] was 25% , Narayana *et al* in year 2017[14] observed practice was 13.4%. Nelson *et al* in year 2018 [10] it is only 8%.

CONCLUSION-

Cervical cancer remains the leading cause of death among women in developing countries, owing largely to the lack of effective cytology-based screening programmes. As per the findings of our study, women had very little and varying degrees of knowledge about the various aspects of cervical cancer. Due to the nature of cancerous lesions and other common symptoms of this disease, there is a need to provide more detailed information about the signs and symptoms of cervical cancer, as well as the availability of various screening measures for early detection of this disease.

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