



Knowledge on Cervical Cancer among Rural Women

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ABSTRACT

Cervical cancer is one of the most common cancers among women worldwide. Much progress has been made in the prevention and control of cervical cancer. The data was collected from 102 women based on random sampling from rural areas of Chittoor district using a structured questionnaire. Majority (70.58 percent) of the respondents were not aware about the symptoms of cervical cancer. More than half of the respondents (51.38 percent) were not aware of the symptoms due to lack of education. Majority (60.00 percent) of the respondents are aware of treatment. Majority (96.08 percent) of the respondents were not undergone for screening for Pap smear test for cervical cancer. Advocacy regarding cervical cancer screening and prevention through mass media such as TV, Radio, and News paper are needed to increase the knowledge on cervical cancer.

KEYWORDS: Cervical Cancer, Pap Smear, Prevention, Radiation & surgery

INTRODUCTION

Cancer of the cervix is primarily caused by the Human Papilloma Virus (HPV) infection, for which there is now a vaccination available. Early screening of the disease has considerably reduced deaths in the developed world. Cervical cancer, the third most common cancer among women in the world, was responsible for 275,000 deaths in 2008, 88 per cent of which occurred in developing countries and 159,800 in Asia (Ferlay J., et. al., 2010). Cervical cancer has a major impact on woman's lives worldwide and one in every five women suffering from cervical cancer belongs to India. According to WHO estimates in INDIA every year 132,082 women are diagnosed with cancer and 74,118 women die from this disease. The growing risk of cervical cancer in India makes it necessary to develop methods for early detection of the disease and its subsequent treatment. Lack of knowledge is found to be the main reason for not having had of screening. reason for non participation include administrative failures, non availability of female screener, inconvenient clinic times, lack of awareness of the test indication and benefits, considering onset not a risk of developing cancer and fear of embranchment, detection of cancer are the factors, which has influenced cervical cancer screening. Over the past decade, the global health community has been giving increased attention to the importance of addressing cervical cancer prevention where the disease burden is greatest.

Hence, the objectives of this study is to find the knowledge on symptoms and treatment of cervical cancer among the rural women.

METHODOLOGY

The data was collected from 102 women based on random sampling from Tirupati town of Chittoor district using a structured questionnaire. The questionnaire consists of socio demographic profile includes age, educational status, occupation and habits of women, knowledge about cervical cancer, experience of abortions challenges to access the medical care etc.

RESULTS & DISCUSSION

1. Experience of Abortions

Nearly half (48.03 percent) of the respondents are experienced to abortions due to various reasons such as: preference for male child, economic reasons and ill health. Among those aborted more than half 57.14 percent had induced abortions and the remaining 42.86 had spontaneous abortions.

TABLE - 1 : Respondents experience of abortions

	Number of respondents	Percentage
Yes	49	48.03
No	53	51.96
Total	102	100.00

Yes	49	48.03
No	53	51.96
Total	102	100.00
Type of abortions		
Induced abortions	28	57.14
Spontaneous abortions	21	42.85
Total	49	100.00

2. Knowledge on Symptoms of Cervical Cancer & Reasons for not knowing

The possible withdrawal factor is the fear and embarrassment that may be associated with cervical cancer screening; this does not encourage women and health care workers to discuss the issue (F.M. Al-Meer, 2011). Majority (70.58 percent) of the respondents were not aware about the symptoms of cervical cancer. Lack of education is the main reason (51.38 percent) for not knowing about the symptoms of cervical cancer followed by more than quarter (26.38 percent) due to shyness, 13.88 percent due to negligence and few (08.33 percent) unable to notice symptoms which are warned for cervical cancer. The present results corroborated with other studies. (A. Sairafi M, Mohamed FA, 2009).

TABLE -2: Respondents knowledge on symptoms

Knowledge	Number of respondents	Percentage
No	72	70.58
Yes	30	29.41
Total	102	100.00
Reasons		
Lack of education		
Due to negligence	37	51.38
Due to shyness	10	13.88
Unable to notice warning symptoms	19	26.38
	06	08.33
Total	72	100.00

3. Knowledge & Mode of Treatment

Among the respondents who are aware of cervical cancer interestingly majority (60.00) of the respondents aware about the treatment and remaining (40.00) were not aware. With regard to the mode of treatment, half of the respondents (50.00 percent) stated drugs are the main course of action for the cervical cancer and more than one third as surgery only (33.33 percent). Very few stated both surgery & radiation (11.11 percent)..

TABLE -3: Respondents Knowledge on Mode of Treatment

Knowledge	Number of respondents	Percentage
Yes	18	60.00
No	12	40.00
Total	30	100.00
Mode of Treatment		
Drugs	09	50.00
Surgery & Radiation	02	11.11
Surgery only	06	33.33
Radiation only	01	05.55
Total	18	100.00

4. Screening of Pap smear & challenges for screening

The most frequently reported obstacles to screening in Kolkata included not knowing where to obtain a Pap test; the test is painful, anxiety about results and cost. Some other determinants included being scared of the tests, feeling shy, etc (Roy B, Tricia ST, 2008).

In the present study, a major portion (96.08 percent) of the respondents had not undergone for screening for cervical cancer. With regard to the reasons, more than one third (38.78 percent) feared of limited family support, followed by more than one fifth (22.44 percent) due to cost, followed by pain during the screening (18.37 percent) and very fewer proportion (09.18 percent) adue to anxiety of results. A minor proportion (11.22 percent) of the respondents do not know where to go.

TABLE -4: Respondents knowledge on Screening & Challenges

	Number of respondents	Percentage
No	98	96.08
Yes	04	03.92
Total	102	100.00
Challenges		
Not known about where to go	11	11.22
Painful	18	18.37
Anxiety of results	09	09.18
Cost	22	22.44
Fear of limited family support	38	38.78
Total	98	100.00

Fear of discomfort and embarrassment were most important barriers for women in Singapore having an organized screening program (Seow A, et. al., 1995).

5. Awareness of Preventive health practices

Cervical cancer is a malignant neoplasm of the uterine cervix or cervi-

cal area. It may present with vaginal bleeding but symptoms may be absent until the cancer is in its advances stages. Treatment consists of surgery in early stages and chemotherapy and radiotherapy in advanced stages of the disease (Richard N. 2007). More than half (62.74 percent) of the respondents were aware about preventive health practices which to lead healthy life. More than one third of the respondents (37.50 percent) express that early detection is the main preventive practice, followed by more than a quarter (26.56 percent) as prompt treatment. 18.75 percent stated that Pap smear, early detection, prompt treatment are best practices and very few as only Pap smear (17.18 percent).

TABLE - 5: Respondents awareness on cervical cancer prevention

Awareness	Number of respondents	Percentage
Yes	64	62.74
No	38	37.25
Total	102	100.00
Preventive Practices		
Pap Smear	11	17.18
Early detection	24	37.50
Prompt treatment	17	26.56
All of the above	12	18.75
Total	64	100.00

There is compelling evidence that cervical cancer is one of the most preventable and treatable forms of cancer, as long as it is detected early and managed effectively (WHO, 2006).

CONCLUSIONS & RECOMMENDATIONS

There is a need for the health care providers to associate with the policy makers in our country make it a priority through health education at all levels and availability of the screening facilities at the door steps of the people living in rural areas. Health education combined with availability of the screening at affordable costs are major concerted and sustained efforts are not geared towards factors in reducing the scourge of the disease in this part of the world. Cervical cancer screening program such as Pap smear, VIA should be integrated into existing health facilities. Advocacy regarding cervical cancer screening and prevention through mass media such as TV, Radio, Newspaper etc are the need of the our. In addition to the above, Cervical cancer screening and treatment should be heavily subsidized in resource poor countries. There is urgency and need for uniformity of National screening programs to create awareness and screen the women.

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