



## KNOWLEDGE, ATTITUDE AND PRACTICE OF BREAST SELF-EXAMINATION AND BREAST CANCER AMONG FEMALE HEALTHCARE WORKERS IN SUPERCARE HOSPITAL: A PILOT STUDY

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### ABSTRACT

**Objective:** Breast cancer is the leading cause of mortality and morbidity among the females in India. Breast Self-examination (BSE) can play a huge role in early detection and diagnosis thereby significantly reduce morbidity, and prompt timely treatment. The main aim of the study was to access the Knowledge, attitude and practice of breast self-examination and cancer awareness among the female healthcare workers. **Methodology:** The cross-sectional pilot study was conducted in Supercare hospital, Shillong and 27 female workers responded to the questioner. The questioners were divided into three categories to access the Knowledge, attitude and practice of BSE and awareness of breast cancer. **Results:** 22.22% of the participants had very good knowledge of breast cancer and BSE, 74% had good knowledge and 3.7% had average knowledge.  $40.51 \pm 4.9$  is the mean and SD for the knowledge for breast cancer and self-breast awareness. 48% respondents average practice BSE and 11% good and 41% poor practice of BSE was observed. The female healthcare workers attitude towards BSE was overall good. **Conclusion:** Majority of the respondents are aware of breast cancer but very few practice breast self-examination. It is recommended to educate and train female health worker to act as peer educator who are agent of health care information to the community and the society at large.

**KEYWORDS :** Knowledge, attitude & Practice of Self breast examination, Breast cancer, Awareness, Female Healthcare workers

### INTRODUCTION

Breast cancer is one of the leading causes of mortality and morbidity worldwide according to WHO with nearly 10 million deaths in 2020. Breast cancer among female has outnumber lung cancer as the most diagnosed cancer, with an estimated 2.3 million new cases (11.7%), followed by lung (11.4%), (Sung et al. 2021). In 2018, over 2 million new cases of breast cancer were diagnosed globally adding to 11.6% of all cancers. Breast cancer is also the most common cause of cancer-related deaths among women (Ferlay et al., 2015) Among Indian women, breast cancer is the most common cancer. India has seen 11.54% increase in incidence and 13.82% increase in mortality due to breast cancer during 2008–2012 (Ferlay et al., 2015)

Breast cancer is now the most common cancer both in developed and developing regions with 690,000 new cases estimated in each region. —(Fletcher & Elmore, 2003) In 2020, there were 2.3 million women diagnosed with breast cancer and 685 000 deaths globally. And 1,918,030 new cancer cases and 609,360 cancer deaths are projected in 2022, to occur in the United States. (Siegel et al., 2022) By the end of 2020, there were 7.8 million women survivor who were diagnosed with breast cancer in the past 5 years, making it the world's most prevalent cancer.

Breast cancer awareness (BCA) is essential in countries with low income to reduce the population of advance state breast cancer. —(Malik et al., 2020) The national cancer registry program (NCRP) states, it's likely to increase with an estimate from 13.9 lakh in 2020 to 15.7 lakh by 2025 of cancer in India. Breast cancer is the second most cause of death (Dagne et al., 2019) the prevalence of breast cancer is more among women in rural area then is urban area due to many reason one of which is lack of education, lack of awareness and lack of facility for detection and treatment. India has the highest cause of cancer-related mortality which is breast cancer. (Hortobagyi et al., 2005) Meghalaya east Khasi hills district has the second highest cancer incidence rate in the country as per NCRP and breast cancer is among it, and the highest tobacco related cancer cases in the country stated the Hindu. (Hindu, 2021)

Important strategy to tackle is to early detection through diagnosis, so that proper and timely treatment can be provided. Various screening methods such breast self-examination (BSE), Clinical breast examination and mammography are employed to detect breast pathology Although BSE dose not prove to be as effective for screening, but it is a means to improve self-care for women. BSE is also considered simple, inexpensive, quick, non-invasive, intervention to examine any breast lump. The main objective was to assess the knowledge, attitude and practice of cancer awareness and BSE among female health care professional, as health care professional are the best agent of awareness to the community and nation at large, and also it will be indicator towards awareness as well as a reminder on the needs and importance of BSE and breast cancer, which will enhance the awareness and detection of early breast cancer.

### MATERIALS AND METHOD:

The cross-sectional pilot study was conducted from 28<sup>th</sup> May to 15<sup>th</sup> June 2022 among the female healthcare workers of Supercare Hospital Shillong. The study was approved by the Institution Ethical Committee, Martin Luther Christian University, Shillong. A total of 27 Female Healthcare workers belonging to different categories such as Nurses, pharmacist, Radiographer and Laboratories technologist responded to the Questioners in the study. Each participant was given self-administered questionnaire and the responses were analysed for knowledge of Self breast examination and breast cancer awareness. The questionnaire was divided into different parts, to assess the Knowledge, attitude and practice of Breast cancer and Breast self-examination. The collected data were organized and analysed using descriptive statistics such as mean, SD, percentage, chi-square test was performed.

### RESULTS

#### Knowledge of breast cancer and breast self-examination:

22.22% of the participants had very good knowledge of breast cancer and breast self-awareness and 74% had good knowledge and 3.7% had average knowledge, and majority of the female health professional had only heard about breast cancer from medical professionals.  $40.51 \pm 4.9$  is the mean and SD for the knowledge for breast cancer and self-breast awareness.

**Table 1: Distribution of the participants according to the socio-demographic variables.**

Parameters		Numbers (n=27)	Percentage (%)
Age	Below 25 years	5	18.51
	Above 25 Year	18	66.66
	Above 30 Year	4	14.81
Academic Qualification	Diploma	17	62.96
	Bachelor	8	29.62
	Master	2	7.40
Profession	Nurses	13	48.14
	Radiographer	6	22.22
	Pharmacist	3	11.11
	Laboratories	5	18.51
Marital Status	Single	21	77.77
	Married	6	22.22
Children	Yes	4	14.81
	No	23	85.18
Year Of Experience	1year	10	37.03
	2year	5	18.51
	3y	6	22.22
	Above 3 Years	6	22.22

**Attitude of female health worker:**

70.37% strongly agree to the necessity of BSE on the contrary 29.62% only agree to BSE. 59.25% agrees strongly to report if any lump is found while BSE, 66.66% strongly agrees and 25.92 agrees that BSE is good practice and women's must be taught, on the contrary 7.40% strongly disagrees to the same. 33.33% strongly disagrees that BSE is time consuming, but 25.92% respondents agrees that it is time consuming. We also observed that 37.03% strongly disagrees that BSE will help detect breast lump only 3.7% strongly disagrees.

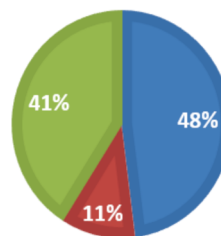
**Table 2: Assessment Of Attitude Of Female Health Worker**

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Is BSE Necessary	0	0	0	8 (29.62%)	19 (70.37%)
I will immediately report if there is lump in my breast	0	0	0	16 (59.25%)	11 (40.74%)
BSE is good practice, and all women must be taught	2 (7.40%)	0	0	7 (25.92%)	18 (66.66%)
I think BSE is time consuming	9 (33.33%)	4 (14.81%)	4 (14.81 %)	7 (25.92%)	3 (11.11%)
BSE will help detect breast related abnormality	1 (3.7%)	0	4 (14.81 %)	12 (44.44%)	10 (37.03%)
You like to know more about BSE?	0	0	1 (3.7%)	14 (51.85%)	12 (44.44%)

**DISCUSSION**

In the present study majority 22.2% of the participants had very good knowledge of BSE and breast cancer awareness and 74% have good knowledge and 3.7% have average knowledge, and majority of the female health professional have heard about breast cancer from medical professionals. Majority of the participant have good knowledge which is similar to a study conducted by (Dagne et al., 2019) (Ibrahim & Odusanya, 2009) where Majority (86%) had satisfactory knowledge of risk factor of breast cancer.

■ Average Practice ■ Good Practice ■ Poor Practice



**Figure 1: Practice of breast self-examination among female health workers**

Similar findings can be seen to that of the study by (Ayed, Ahmad, Faeda Eqtaït, Lubna Harazneh Imad, Imad Fashafsheh Sewar, Sewar Nazzal, Bian Talahmeh, Deena Hajar, 2015) show that participate have limited knowledge of BSE, the study shows 15.5% of the respondent had very good overall knowledge on breast cancer and 15.5 % had good knowledge, but its shows that majority 43.3% had average knowledge on BSE which is similar to present study. Our observation proved good knowledge of breast cancer but average knowledge by 22.2 %.

have not hear about breast self-examination, the poor knowledge level is assumed to be due lack of awareness and ignorance among the women healthcare workers.

The finding of the present study shows 77.8% of the participate believe in early detection have better or higher rate of recovery and survival. Which is also similar to study conducted (Ibrahim & Odusanya, 2009) where they found that the subject believe that early detection of breast cancer have higher rate of survival (86%). We observed that bachelor and master participate have better knowledge compare to the participate with diplomas, the finding is similar to the study conducted by conducted (Ibrahim & Odusanya, 2009) and (Fotedar et al., 2013). The knowledge of breast cancer and risk of breast cancer and BSE was higher among nursing graduate staff as compared to GNM nurses, where is show 16.3% of the nurses have excellent knowledge about the breast cancer and its risk and the method on early detection. We also found that there is positive relation between qualification and knowledge or awareness of breast cancer and BSE was observed better among participants with higher qualification, which is similar to a study done by (Oswal et al., 2020), where it was found that female living in the urban with higher education showed more awareness on breast cancer then those living in the rural area.

Majority of the participate have heard about breast cancer but only 77.8% have heard about SBE and know how to performed, in a similar study by (Alqahtami et al., 2021) irrespective of the level of qualification 93.93% were aware of breast cancer out of which 78.2% girls knew about breast cancer, 19.2% of these were aware of BSE, and 22.9% of BSE knowing ever performed it, (Biswas et al., 2020) reported that 15% of the participant have not heard of BSE.

We observed that 70.37 % of the participate strongly agree that BSE is necessary, and 40.74% strongly agree to immediately report if any lump is notice in their breast, and 66.6% of the female health worker strongly agrees that BSE is a good practice and women should be taught about it. While to our utter surprise we also saw that 7.40% strongly disagree that BSE is a good practice and 51.85% of the participate wants to know more about BSE. A similar finding was seen in a study conducted by (Ayed, Ahmad, el. al , 2015) where 42% believe that all women should do BSE, generally many show a positive attitude toward Breast self-examination. According to

—(Manzour & Gamal Eldin, 2019) education level have influence on the attitude toward BSE. (Schelter et al., 2008) and (Kumar et al., 2009) reported that female health worker thus have good knowledge and attitude toward breast self examination but over all practice reflected is not adequate to the knowledge they have on breast self examination. We have seen that most of the respondents had positive attitude overall towards BSE and breast cancer awareness.

The present study shows that majority 48% of the participants have average practice of BSE and 41% have very poor practice or no practice and only 11% have good practice of BSE which is similar to the finding of (Biswas et al. 2020) where out of the 22.9% of the participants who know BSE only 3.5% have performed BSE and 62.9% have not performed BSE one a month and 43.3% is found to have never know how to perform BSE correctly or have ever been taught by any health professional and many responded they have never discussed the importance of BSE to their fellow friend or neighbor. (Ayed, Ahmad, Faeda Eqtaït, Lubna Harazneh Imad, Imad Fashafsheh Sewar, Sewar Nazzal, Bian' Tlahmeh, Deena Hajar, 2015) The present study shows that only 59.3% of the total participants know how to performed BSE properly and only 37% of the participants have performed BSE in the last one month which is lesser than a study which was conducted by (Fotadar et al., 2013), where the study shows that 54% have performed BSE at least once a month. In another study conducted by (Kumar et al., 2009) on practice among public health nurse is much higher with 66% who practice BSE once a month.

## CONCLUSIONS

This study reveals that majority of the participants are aware of breast cancer but number of participants aware of BSE are lesser and the number of participants performing regular BSE are even lesser. Therefore, there is need for awareness programs that emphasize the need to teach breast self-examination and the benefits of early detections, right technique to performed BSE regularly. It is recommended to educate and train female health worker to act as peer educator who are agent of health care information to the community and the society at large.

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