



A PRE-EXPERIMENTAL STUDY TO ASSESS THE BREAST SELF EXAMINATION PRACTICE AMONG WOMEN IN SELECTED COMMUNITY OF LUDHIANA, PUNJAB.

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ABSTRACT

A study was conducted in selected community of Ludhiana, Punjab to assess the breast self examination practice among women. The purpose of the study was to assess the breast self examination practice among women with a view to determine the need and effectiveness of BSE demonstration. Research hypothesis was accepted i.e. posttest practice score was higher than the pretest practice score. A quantitative approach and pre-experimental research design was used in the study. Sample size was 84 women and was selected by purposive sampling technique. Observational checklist was used to assess the BSE practice. Findings of the study were in the pretest 100 % women performed BSE incorrectly, in posttest 94 % women performed correctly and 6 % women performed incorrectly. Teaching and demonstration had impact on BSE practice. Therefore it was concluded that teaching and demonstration was effective to improve the BSE practice.

KEYWORDS : Women, BSE Practice, Demonstration of BSE.

INTRODUCTION

Globally, over one million new cases of breast cancer among females are detected each year. It is the most commonly occurring neoplasm in women, accounting for over one-fifth of the estimated annual 4.7 million cancer cases diagnosed in females and the second most common tumour. Breast cancer is also the most common female cancer in both developing and developed countries, with most cases (55%) occurring in the latter regions, where age-standardized rates are three times higher than in developing countries (Freddie B, Peter M & Maxwell P, 2004)¹.

A breast self examination (BSE) is a technique that a woman can use to check her breasts and underarms using varying degree of pressure to monitor for any possible changes that might indicate breast cancer. Along with clinical breast examinations and mammograms, breast self examination are part of the main screening tools for breast cancer. The purpose of monthly breast self examination is for a woman to gain familiarity with her breasts so that any changes in texture, including the presence of a lump, can be detected as early as possible. The American Cancer Society recommends that women, starting at age 20, should be educated on the benefits and limitations of performing a monthly BSE (American Cancer Society, 2008)².

Need of the study

Breast self examination is also recommended by American Cancer Society since 1950 as a safe, non-invasive procedure for early detection of breast cancer. Although all women report knowing about breast self examination few know the correct technique of performing it. International Agency of Research of Cancer recommends that early detection through screening, particularly for cervical and breast cancers, allows for prevention and successful cure. Despite advancement and multifold improvement in scientific knowledge, presently there is no known method for primary prevention of breast cancer. Therefore, early detection and treatment of breast cancer as a secondary preventive measures seems to be the most appropriate approach for reducing mortality due to breast cancer and improving the quality of life and there is sound evidence that the recent decline in cancer mortality observed in several countries like North America, Western Europe and Australia is mainly due to improvement in early detection and treatment programmes. Responsible for this success are not only improvements in imaging studies but also a higher degree of disease awareness and educational programmes on typical early symptoms (Dhillon PK & Yeole BB, 2011)³.

The investigator found in the community that many women are not performing breast self examination and felt that a well-planned nursing intervention package for breast self examination which will help to develop skill to identify any significant change in the breast at the earliest. This will eventually lead to prevent consequences like breast cancer, so it is necessary to teach and demonstrate women about

breast self examination. It is true that media, illustrations and health magazines are making the public aware, but it is a one-way communication with no follow up measures. As the saying goes, "If you hear, you will forget; if you see, you will remember and if you do, you will learn". Learning by doing is possible only by means of live demonstration. Live demonstration is an effective method of teaching where by one can see practically with immediate clarification of queries. Moreover, unlike Medias, illustrations or health magazines, better follow up of the group is possible for proper health promotive aspect of the individual with this method of teaching.

Objectives:

1. To assess pre-intervention breast self examination (BSE) practice in women to identify the need of BSE teaching and demonstration.
2. To teach and demonstrate Breast Self Examination.
3. To assess post-intervention breast self examination (BSE) practice in women.
4. To compare pre and post-intervention breast self examination (BSE) practice in women and determine the effectiveness of BSE teaching and demonstration.
5. To determine the association of breast self examination (BSE) practice with selected socio demographic variables like age, education, occupation, marital status, source of information.

Hypothesis

H₀: There will be no statistically significant difference in the post-test mean practice score of women regarding breast self examination at p<0.05 level

H₁: The mean posttest practice score of women on breast self examination will be significantly higher than the mean pretest practice score at p<0.05 level.

Delimitation:

The study was limited to women who were:

- in age group 31-60 years
- willing to participate.

MATERIAL AND METHODS

Quantitative research approach was considered to be appropriate for the present study. One group pretest and posttest design was adopted for pre-experimental study. The target population of this study was all women who were in the age group of 31-60 years residing in Jamalpur areas of Ludhiana, Punjab. Purposive sampling technique was used to select a sample of 84 women. The purpose and objectives were discussed with the head of department, community medicine department, Christian Medical College & Hospital, Ludhiana and written permission was obtained to collect the data. Investigator selected Jamalpur area which is an urban area served by the Community Medicine Department of Christian Medical College and

Hospital, Ludhiana and is situated at a distance of nearly 5 kilometers from CMC. Self Structured checklist was prepared to assess the breast self examination practice among women. Observational technique was used as method of data collection. Pre-intervention and post-intervention observation was done after one to one planned teaching and demonstration given to women with the help of lesson plan and A.V. aids like scrap book and model to compare the data and to check the effectiveness of intervention.

Description of tool

The tool was consist of the following two parts:

- Part I – Sample Characteristics: This part of tool consists of 5 items for obtaining the personal information of subjects which includes age, education, occupation, marital status and source of information.
- Part II – Observational checklist to assess the breast self examination practice: Observational checklist contains 16 items related to the breast self examination practice among women. Items were scored as “Yes” or “No”. The score was computed as maximum 16 and minimum 0 score. “Yes” was scored as 1 and “No” as 0.

RESULTS

Findings related to sample characteristics: Maximum women (59.52 %) were in the age group 31-40 years and minimum (14.29 %) were in the age group of 51-60 years. Most of the women (48.81 %) were illiterate and least (7.14 %) were having education graduate and above. Most of the women (76.19 %) were housewives and only few (3.57 %) were in service. Regarding marital status 91.67 % were married and 8.33 % were widow. Maximum (78.57 %) women had no information and least (21.43 %) had health professionals as a source of information regarding breast self examination.

Findings related to information regarding BSE: Maximum women (79.76%) did not know about BSE and minimum (20.24 %) knew BSE, regarding practice most of the women (83.33%) were not practicing and least (16.67 %) were practicing occasionally and regarding reason to perform BSE, maximum women (80.95 %) did not know the reason and least women (19.05%) said to detect breast lump.

Findings related to BSE practice: The pre-intervention mean practice score was 0.39 and post-intervention mean practice score was 12.38. All the women (100%) had performed incorrectly in pre-intervention. In post-intervention majority of women 94.05 % had performed correctly and 5.95 % women had performed incorrectly. The pre-intervention mean percentage was 6.55 % in the area of inspection and zero in palpation, the post-intervention mean percentage was highest 91.66 % in the area of inspection and least 70.40 % in area of palpation.

Findings related to comparison and relationship of BSE practice with selected variables: The post-intervention mean BSE practice score was higher than the pre-intervention mean BSE practice score. Teaching and demonstration had impact on breast self examination practice among women, therefore teaching and demonstration was effective. Age, education, occupation, marital status and source of information showed no significant relationship with breast self examination practice among women.

Table: 1 Comparison of Pre-intervention and Post-intervention Breast Self Examination Practice Score of Women

N=84

Intervention	BSE Practice Score			
	Mean	SD	df	't'
Pre	0.39	0.91	83	49.88***
Post	12.38	1.72		

Maximum Score = 16
Minimum Score = 0

***Significant at $p < 0.001$ level

Table 1 depicts that the comparison of pre-intervention and post-intervention breast self examination practice score of women. The pre-intervention mean BSE practice score was 0.39 and the post-intervention mean BSE practice score was 12.38. The difference between pre-intervention and post-intervention mean BSE practice score was compared which was found statistically highly significant at $p < 0.001$.

So, it can be concluded that teaching and demonstration had impact on breast self examination practice among women. Hence, research hypothesis was accepted and null hypothesis was rejected.

Table: 2 Frequency and Percentage Distribution of Women According to Level of Breast Self Examination Practice

N=84

Level of Practice	Score	Women			
		Pre-intervention		Post-intervention	
		f	%	f	%
Correct Practice	≥10	-	-	79	94.05
Incorrect Practice	≤9	84	100	5	5.95

Maximum Score = 16

Minimum Score = 0

Table 2 depicts that, 84 (100 %) women had incorrect pre-intervention of Breast Self Examination practice and none of them practiced correctly. In post-intervention of Breast Self Examination, 79 (94.05 %) women performed correctly and 5 (5.95 %) woman practiced incorrectly.

Hence, it can be concluded that majority of the women performed correctly after BSE teaching and demonstration.

DISCUSSION

The findings of the study revealed that 84 (100 %) women had incorrect pre-intervention BSE practice. Similar study was conducted by Gupta SK (2010)⁴ who reported that no one performed BSE correctly in pretest.

Similar study was conducted by Oezaras G, Durualp E, Civelek FE, Gul B & Uensal M (2010)⁵ who reported to teach and demonstrate the breast self examination to enhance the BSE skills.

The findings of the study revealed that 79 (94.05 %) women performed correctly and 5 (5.95 %) woman practiced incorrectly after the intervention. Similar study was conducted by Lu Jz (2003)⁶ who reported that the mean accuracy score was higher in post test.

The findings of the study revealed that 84 (100 %) women had incorrect pre-intervention BSE practice. In post-intervention, 79 (94.05 %) women performed correctly and 5 (5.95 %) woman practiced incorrectly. Similar study was conducted by Amudha P (2010)⁷ who reported that posttest practice score was higher than the pretest practice score which showed high level of significance.

Findings related to association of variables with mean breast self examination practice score among women. There was no impact of age, education, occupation, marital status, source of information on BSE practice of women but teaching and demonstration had impact on breast self examination practice among women. Study was supported by Al-Naggar RA, Bobryshev YV & AL-Jashamy K (2012)⁸ for age, study was opposed by Tasci A & Usta YY (2010)⁹ for education, study was supported by Seif NY & Aziz MA (2000)¹⁰ for occupation, study was supported by Ertem G & Kocer A (2009)¹¹ for marital status, study was conducted by Karayurt O, Ozmen D & Cakmakci AC (2008)¹² for source of information respectively.

Conclusion

Present study revealed that Majority of women 100% had performed incorrectly before intervention. Majority of women 94.05 % had performed correctly and least 5.95 % women had performed incorrectly after intervention. Teaching and demonstration had significant relationship with breast self examination practice. Variables such as age, education, occupation, marital status and source of information had no significant relationship with breast self examination practice. Teaching and demonstration was effective in improving the breast self examination practice. Variables i.e. age, education, occupation, marital status and source of information had no impact on breast self examination practice among women of age group 31-60 years.

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