



## ASSESS KNOWLEDGE REGARDING BREAST CANCER AMONG WOMEN IN DIFFERENT AREAS OF GURDASPUR, PUNJAB

### Nursing

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### ABSTRACT

Breast cancer is a proliferation of neoplasm epithelial cells may confined to the mammary ducts or lobules, respectively without demonstrable evidence of invasion through the Basement Membrane. Possible causes are estrogen therapy, antihypertensive agents, high fat diet, obesity, fibrocystic breast cancer, genetic mutations in BRCA 1 and BRCA 2 gene. It is manifested by lump formation, mastalgia, nipple discharge, skin changes and disfigurement of Breast the diagnosis included mammography and treatment includes chemotherapy and mastectomy. A non experimental descriptive design was used with purposive sampling technique. A self structured questionnaire was used to collect the data. Findings revealed that majority (89%) of women had poor knowledge and 11% of women had good knowledge regarding breast cancer.

### KEYWORDS

Knowledge, Women, Breast Cancer, Chemotherapy.

### Introduction

*"My Cancer Scare changes my life. I am grateful for every new, healthy day I have. It has helped me Prioritize My life"*

- Olivi Newton john

Kaur (2012) explained that cancer is a group of disorders in which certain cell grow and proliferate uncontrollably. It occurs when an abnormal cell is transform by mutation of the cellular DNA. Barry *et al* (2004) revealed that Breast cancer is a proliferation of neoplasm epithelial cells may confined to the mammary ducts or lobules, respectively without demonstrable evidence of invasion through the Basement Membrane is known as carcinoma in situ. National cancer institute (2007) described that cancer that forms in tissues of the breast, usually the ducts (tubes that carry milk to the nipple) and lobules (glands that make milk). The breast is made up of lobes and ducts. Each breast has 15-20 sections called lobes, which have many smaller sections called lobules. Lobules end in dozens of tiny bulbs that can make milk. The lobes, lobules and bulbs are linked by thin tubes called ducts. Williams and Wilkins (2009) revealed that breast cancer growth rates vary. Its spreads by way of the lymphatic system and bloodstream to the other breast, chest wall, liver, bone and brain. Breast cancer originates in the epithelial lining of the breast. This illustration shows the intraductal changes, with transformation of benign cells to atypical cells to malignant cells. Lobe leads to interlobular duct leads to lacoferous duct leads to normal duct leads to hyperplasia leads to atypical hyperplasia leads to ductal carcinoma in situ leads to invasive ductal carcinoma. Siddharth *et al* (2016) was conducted a cross sectional descriptive study to evaluate the current status of knowledge, related to breast cancer and breast self examination among 360 women in central India by using random sampling technique. Self administered questionnaire was used for data collection. The study findings revealed that 81% of women did not have any knowledge about breast cancer and all the women though that CBE by doctors was the only way for screening breast cancer. It was concluded that knowledge regarding breast cancer was very low. Lemlem *et al* (2011) was conducted a cross sectional descriptive study to assess the knowledge regarding breast cancer and screening methods among 281 nurses in ethiopia were selected by using simple random sampling technique. Structured questionnaire method was used for data collection. The findings of this study revealed that only 156 (57.8 %) of them were knowledge about breast cancer and its screening and 114 (42.2%) were not having knowledge. It was concluded that the knowledge of nurses was not satisfactory.

### Need of the Study

*"Attitude is a little thing that makes big differences"*

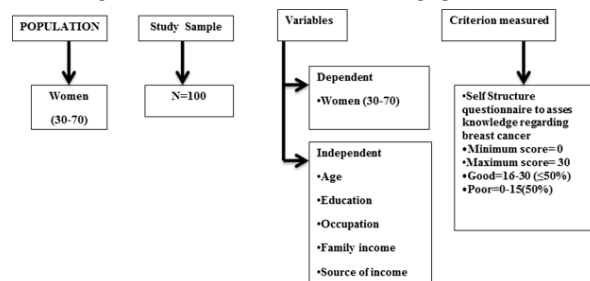
-Winston churchill

Smyer and Stenvig (2007) Asian Indian women especially who immigrate to united states have higher risk 77% for breast cancer rates than their corresponds place in India. Shadap *et al* (2014) According to Indian statistics the number of new breast cancer cases as about 115,000 per year and is expected to rise to 250,000 new cases per year

by 2015. Breast cancer has overtaken the cervical cancer to become the leading site of cancer in Delhi, Bangalore, Bhopal, Allahabad, Mumbai, Chennai etc with relative population ranging from 21.7% to 28.7%.

A descriptive study to assess the Knowledge regarding Breast Cancer among Women in selected Rural Area of Gurdaspur, Punjab. The main aim of the study is to assess the knowledge regarding breast cancer among women in selected rural area of Gurdaspur, Punjab. The objectives for the study are as:

1. To assess the knowledge regarding breast cancer among women in selected rural area of Gurdaspur, Punjab.
2. To find out the association of knowledge regarding breast cancer among women in rural area with socio demographic variables.



### Result

Objective 1: To assess the knowledge regarding breast cancer among women.

**Table 1: Frequency and percentage distribution according to knowledge regarding cancer**

**N=100**

Level of knowledge	Frequency (n)	Percentage
Good	11	11
Poor	89	89
Total	100	100

Maximum score = 30

Minimum score = 0

Table (1) and Fig. 1 depicts the frequency and percentage distribution according to knowledge regarding breast cancer among women. It shows that majority 89 % of women had poor knowledge followed by 11 % women had good knowledge regarding breast cancer. Hence it is concluded that majority of women had poor knowledge regarding breast cancer.

Objective 2: To determine the association of knowledge regarding breast cancer with socio demographic variables.

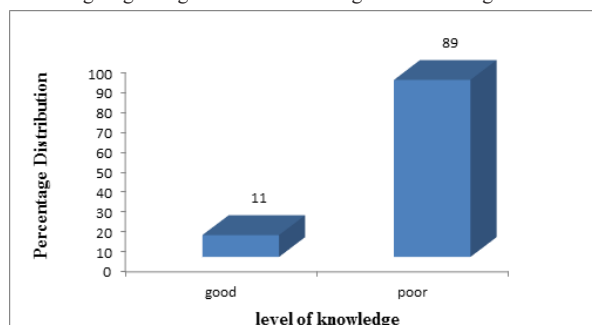
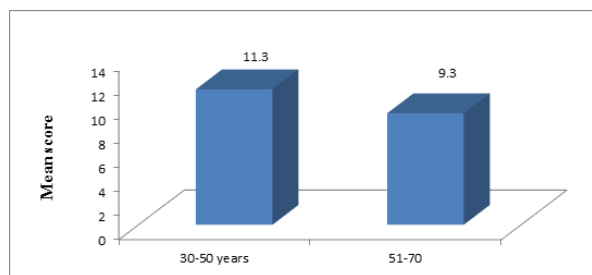
**Table 2: Association of level of knowledge regarding breast cancer with age.**

N=100

Age (in years)	n	mean	SD
30-50	31	11.3226	4.13430
51-70	69	9.3188	3.40628
Total	100	9.9400	3.74387
Variance	df	F	
B/W group	1	** 0.885	
W/group	98		

Maximum score = 30 \*\* Significant at 0.01 level of significance  
Minimum score = 0

Table 2 and Fig. 2 depict the association of level of knowledge regarding breast cancer among women with age. It shows that the mean score 11.3226 was higher in age 30-50, followed by 9.3188 in age 51-70. on applying ANOVA test it was found to be significant at 0.01 level of significance. Hence it is concluded that there had association of knowledge regarding breast cancer among women with age.

**Figure 1: Frequency distribution of women according to Knowledge regarding breast cancer****Figure 2: Mean score of knowledge regarding breast cancer among mothers according to age**

The study concluded that 11% women had good knowledge regarding breast cancer and 89% women had poor knowledge regarding breast cancer.

According to association of knowledge regarding breast cancer among women with selected demographic variables such as age of women, education level of women, occupation of women, monthly family income, source of information. The data of present study revealed that association of knowledge regarding breast cancer among women with age, education are significant whereas, association of knowledge regarding breast cancer among women with occupation, monthly family income, source of information are non significant

### Recommendation

On the basis of findings of the study, it is recommended that:

1. A similar study can be undertaken with a large sample for better generalization of the findings.
2. An effect of self structured teaching program can assessed regarding knowledge of breast cancer.

### Discussion

Objective 1: To assess the knowledge regarding breast cancer among women in selected rural area of Gurdaspur, Punjab.

In present study, 89% had poor knowledge and 11% had good knowledge regarding breast cancer. As contradictory study reported by Siddharth R to evaluate the current status of knowledge, related to

breast cancer among 360 women in central India. The study findings revealed that 81% of women did not have any knowledge about breast cancer and 19% of women had good knowledge regarding breast cancer. It was concluded that knowledge regarding breast cancer was low.

Objective 2: To find out the association of knowledge regarding breast cancer among women in rural area with socio demographic variables.

The findings of present study related with age of women, education level of women, occupation of women, monthly family income, and source of information. The data of present study revealed that association of knowledge regarding breast cancer among women with age, education, occupation, monthly family income, source of information are significant. The findings are similar to Vijender Kaur, Kanchan Kumari concluded that the age, education, occupation, family income and source of information had influence on the knowledge regarding breast cancer among women.

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