Knowledge of Women about the Early Detection Methods of Cervical Cancer in Baghdad City

Iman A Jaber

Instructor, Baghdad college of medical sciences

Abstract

Background: Cervical Cancer is considering a public health problem, leading cause of mortality and morbidity among women.

Objective: To assess women's knowledge regarding cervical cancer and. early detection methods

Methodology: A descriptive study was conducted, included (200) women from different levels of education who work in the institute, from 5th November 2018 to 30 April 2019, by using interview technique and self-reporting technique . A non-probability (purposive) sample of (200) women. The questionnaire was used for data collection. The validity was estimated through a penal of experts related to the field of study, and so us the reliability was evaluated through a pilot study conduct included (10) women (except from the original sample). Data is analyst through the implementation of descriptive and inferential statistical analysis.

Results: The results of this study show that the knowledge of the study sample was low regarding early detection methods, prevention treatment and there was statistical significant relationship between level of knowledge, and some variables

Recommendations: It was recommended that increase coverage in cervical screening programs from Iraq ministry of health to encourage women in Iraq. In addition, training program should supply in educational institute

Key words: *Cervical Cancer, Knowledge Pap Smear and Women*

Introduction

Globally, they found cervical cancer is the fourth most frequent cancer among women [(1)].

Cervical Cancer was a public health problem and a leading cause of mortality and morbidity among women [(2,3)].and it is the fourth most frequently diagnosed cancer with an estimated 527,600 new cases in 2012worldwide. It is the fourth leading cause of cancer death with 265,700 deaths among women worldwide in 2012 [(4,5)] and so it was the fourth most frequent cancer in women with an estimated 570,000 new cases in 2018 appear 6.6% of all female cancers. Approximately 90% of deaths from cervical cancer occurred in developing countries. The high mortality rate from cervical cancer globally could be reduced through a comprehensive approach that includes prevention, early diagnosis, and effective screening and treatment programmers. There are currently vaccines that protect against common cancer that cause types of human papilloma virus and can significantly reduce the risk of cervical cancer [(1)].

There are contributory factors that make women vulnerable to develop cervical cancer, viral infections (HPV, HIV, and HSV), multiparty, early initiation of sexual activity, multiple sex partners, smoking, low socioeconomic status, diet low in antioxidants, poor hygiene, long-term use of oral contraceptives and immune suppression conditions [(6)].

The incidence of cervical cancer in Iraq it relatively low, as in most other Islamic countries, yet most of the cases usually present in advanced stages with poor prospects of cure. Earlier studies have illustrated un negligible rates of CIN lesions among Iraqi patients

complaining of gynecological problems (221) Incidence Rate 1.20 /100,000P [7].

Common risk factors include early age at first intercourse, having multiple sexual partners and a weak immune system. Research evidence has shown that Human Papilloma virus (HPV) is the most important etiologic agent in the vast majority of cases and the cause of 99.7% of cervical cancer cases, which is among the most frequent cancers in women [8,9].

Aim of study: To assess women's knowledge and attitudes regarding cervical cancer and early detection methods of cervical cancer for the teacher and employer who were working in Technical Medicine Institute, Baghdad

Methodology

A descriptive study was included (200) women from different levels of education who work in Technical Medicine Institute, Baghdad Through using the assessment approach for the period from 5th November 2018 to 30 April 2019. The questionnaire was used for data collection. The validity was estimated through a penal of experts related to the field of study, and so us the reliability was evaluated through a pilot study included 10 women. The questionnaire form was consisted of (3) main part. The data were collected by using interview method and self-report techniques with study participants after obtaining permission from each of them according to the inclusion criteria.

Reliability of the questionnaire was estimated through the use of Alpha Cronbach for the test-retest approach , descriptive statistics (frequency, percentage Cum. Percent, Mean of score (M.S.), and Relative Sufficiency (R.S.)) and inferential statistics (Alpha Cronbach, Reliability Coefficient, Chi Square).The items of women documentation were rated on two level know, and don't know, and scored as , 2 and 1, respectively). Mean of score Low (1-1.49), Moderate (1.5 – 1.75), and High (1.76 –2]

Results of the Study

Table (1): Assessment of women' knowledge related to the early detection

N	Items	N =200				
		Know	I do not know	M S	R S	Asses.
1.1	Cervical cancer is: Cervical cancer is a cancer that affects the cervix	74	126	1.37	68.5	L
1.2	Cervical cancer usually develops very slowly	80	120	1.4	70.0	L
1.3	Cancer changes can take years to develop into cervical cancer	77	123	1.38	69.0	L
2	Risk factors for cervical cancer:					
2.1	The majority of cervical cancers are caused by HPV,	78	122	1.39	69.5	L
2.2	Early marriage (early sex).	123	77	1.6	80.75	M
2.3	Smoking	149	51	1.75	87.25	M
2.4	HIV infection (the virus that causes AIDS)	52	148	1.26	63	L
2.5	Use pills for a long time (five years or more).	100	100	1.5	75	M
2.6	Multiple births.	112	88	1.65	78	M
2.7	Couples who engage in high-risk sexual activities.	131	69	1.65	82.5	M
2.8	- Lack of personal hygiene and neglect	160	40	1.8	90	H
3	Symptoms of cervical cancer:					
3.1	Persistent pelvic pain	80	120	1.4	70.0	L

Cont... **Table (1): Assessment of women' knowledge related to the early detection**

3.2	Persistent vaginal secretions,	99	101	1.49	74.75	L
3.3	Pain during intercourse.	112	88	1.65	78	M
3.4	abnormal vaginal bleeding (bleeding after sex, bleeding after vaginal washing,	86	114	1.43	71.5	L
3.5	Rapid weight loss	66	134	1.33	66.5	L
	Total	1,579	1621	1.49	74	L

Table (1) demonstrate that there is Low knowledge of women, in total mean of scores (MS) which was (1.49) (74%) respectively.

Table (2): Women's knowledge about methods, treatment and prevention of cervical cancer

N0	Items	N =200				
		Know	I do not know	M S	R S	Asses.
1.1	- If cervical cancer is suspected, the doctor will ask the woman \ about the family's medical history.	121	79	1.6	80.0	M
1.2	- do pap smear test (Papa Nicolao smear)	114	86	1.57	78.5	M
1.3	Every married woman should undergo cervical screening at least every two years,	120	80	1.6	80.0	M
2	Treatment of cervical cancer:					
2.1	Electrical surgery	91	109	1.45	72.7	L
2.2	Laser surgery	66	134	1.33	66.5	L
2.3	Cryotherapy: Cold is used to eliminate abnormal cells.	74	126	1.37	68.5	L
2.4	Conical dislocation: The doctor removes a piece of cervical cone, to remove abnormal cells.	52	148	1.26	63	L
2.5	Hysterectomy	120	80	1.6	80.0	M
2.6	Curing overwhelming cancer: - Surgery	72	128	1.36	68	L
2.7	Radiation therapy	71	129	1.35	67.75	L
2.8	Chemotherapy	72	128	1.36	68	L
3	Prevention of cervical cancer:					
3.1	Obtain vaccination of HPV	43	157	1.1	56.0	L
3.2	- Pap smear examination	128	72	1..64	82	M
3.3	Chastity and non-sexual intercourse by both parties.	130	70	1.65	82.5	M
3.4	Quit Smoking.	150	50	1.75	87.5	M
	Total	1424	1576	1,47	73.7	L

Table (2) demonstrate that there is Low knowledge to women, in the total mean of scores (MS) which was (1.47); (73.7%) respectively.

Table (3) Association between Level of Knowledge of Study Sample and Studied Variables

Studied variables		Knowledge level		$\chi 2$	d. f	P-value	Sig.
		unacceptable	Acceptable				
		No	No				
Age / Years	20-29	14	37	19.288	3	.000	S
	30-39	30	37				
	40-49	34	18				
	50-above	20	10				
Level of education	Read and write	8	0	35.774	4	.000	S
	Primary	17	5				
	Secondary	5	23				
	Institute & college	19	90				
	higher education	5	28				
Occupational status	Teacher	28	42	17.298	2	.001	S
	technician	61	35				
	employee	9	25				
Economic states	good	9	30	19.397	2	.000	S
	moderate	72	68				
	under moderate	17	4				

Table (3) demonstration that there was statistically significant relationship among studied variable, and level of knowledge

Discussion

1 -Demographic characteristics of study sample.

Cervical cancer was the second most common cancer in women, cause high morbidity and mortality worldwide[10)]

In Iraq, significant knowledge gaps about the relative importance of cancer among the Iraqi community have been demonstrated suggesting a potential to take practical policy decisions that aim at promoting screening though elevating the level of awareness[15)] Throughout the present study,) Regarding age group, more than half of women their ages were between (20-39) Years old. This result is agreeing with a study done in Kenya to assess women's knowledge and attitudes related to cervical cancer the median age of sample was (66.3%) there aged18 to 39 years[(11)]

Regarding to the level of education, the majority of them were Institute & college graduates. This result is similarly with a study it was done in Baghdad to assess teachers' Knowledge regarding cervical cancer. [(13)]

Furthermore, the study indicated that more than half of sample study in Moderate economics status.

This result agree with study done In Egypt shown that economic status(56%) had enough monthly income. [12]

According to Distribution of reproductive health history for women most of them (96.5%) was (12-14years) (Age at begin first menstrual cycle /years) this result disagrees with study done in Baghdad City who they found that the (2.5 %) had no pregnancy, 40%) had just one. [13] (and ((37.0%) of them had Family history of cancer the (14.5%) with Breast. Study done in Sudan states that can prevent cervical cancer, by prevent smoking, use oral contraceptive, and unsafe sex. [17]

2. Discussion of women' knowledge related to the early detection.

There is Low of women knowledge, (table 1). this study also disagrees with study in

Addis Ababa show that the odds of good knowledge about cervical cancer among government and nongovernmental organization employees were two times higher than among unemployed participants. [18] So, us study done in Chania assess that a total of 15.3% of the participants in this study indicated that they had never heard of cervical cancer previously. [19] so, us there is a deficit level of knowledge and awareness was documented concerning the epidemiology of cervical cancer [15]

3-Discussion the Women's knowledge about methods, treatment and prevention of cervical cancer

There is low knowledge of women, regarding the total mean of scores (73.7%). In our study the results showed a deficiency in knowledge about methods, treatment, prevention cervical cancer some of the sample had less than (50%) from mean of scores the researcher opinion that the medical worker is one of the most important health knowledge provider and promoter. So, if the medical workers have unsatisfactory knowledge, inappropriate attitude and practice, they would not be spread the knowledge to the community , this study agree with study in Ethiopia, " that women's knowledge on cervical cancer was low, despite the high incidence of the disease in Ethiopia. Relatively, a large proportion of the study participants had favorable attitude towards cervical cancer screening attending primary, secondary school and college. [16]

4. Discussion the Association between Level of Knowledge of Study Sample and Studied Variables

There is a statistically significant relationship between studied variable, and level of knowledge this was not agree with study in Tanta, they found no statistically significant difference was found in relation to response to change, and a significant difference was found in relation to education and work. so, education and working environment increase all knowledge and awareness on cancer especially among married women as sexual health constitutes a taboo in our culture. and agreement to our findings, knowledge, Pap smear test were not associated with demographic variables as reported. [14] In addition, this result is corresponding with the study done in Baghdad, which revealed the educational status is positively associated with total knowledge of women on cervical cancer. who have primary, secondary and college/ university education were more likely to have best knowledge on cervical cancer than those who did not have. [15]

Conclusion

It was concluded is that that educated women of sample have deficit knowledge, towards cervical cancer and Pap smear.

Conflict of Interest: Nil

Source of Funding: the source of funding is self

Ethical Clearance: is obtained from the Technical Medicine Institute, Baghdad

Recommendation

1- increase coverage in cervical screening programs from Iraq ministry of health and directed towards women medical practitioners participants in the research - have been approved before the questionnaire is started

2- Long-term education programs should be made available to encourage the female population in the Iraq

3- Training should be supplied to nurses and primary care physicians to motivate screening.

References

1. World Health Organization (WHO): Human papilloma virus and cervical cancer 2016 ; fact sheet Geneva: World Health Organization,.
2. Torre, LA.; Bray, F.; Siegel, RL.; Ferlay, J.; Lortet-Tieulent ,J.; Jemal, A. Global cancer statistics CA Cancer J. 2015 ; 65:87–108
3. Ferlay. J.; Soerjomataram ,I.; Dikshit ,R.; Eser ,S.; Mathers, C.; Rebelo, M.; et al. Cancer incidence and mortality worldwide: sources, methods and major patterns in GLOBOCAN In J. cancer . 2015 ;36: E3: 59–86
4. World Health Organization (WHO): Cervical Cancer: Estimated incidence, mortality and prevalence worldwide; Accessed 2015; 25 Nov.
5. American cancer society. Global Burden of cancer in , Current status, trends, and interventions from Merck KGaA, Darmstadt, Germany; 2016.
6. Duraisamy, K.; Jaganathan, KS.; Jagathesh CB. Methods of Detecting Cervical Cancer. Advances in Biological Research.2011; 5: 226-32.
7. Republic of Iraqi. Ministry of Health\ Environment; Iraqi Cancer Board Annual Report Iraqi Cancer Registry 2015.
8. World Health Organization (WHO) Comprehensive cervical cancer control. A guide to essential practice – 2nd ed. Library Cataloguing-in Publication Data, 2014.
9. Yanıkkerem, E. Piyan, G. & Kavlak, T. :Assessing the Role of Education on Turkish University Students', Asian Pacific J Cancer Prev.,2010 ; 11: 1703-11.
10. Murithi G; Abdul-Rauf S. and Andrew S.: Women's knowledge and attitudes related to cervical cancer and cervical cancer screening in Isiolo and Tharaka Nithi counties, Kenya: BMC Cancer. 2018; 18: 745
11. Hana, A.; Nuha, A.; Wafaa, M; Knowledge, Attitude and Practice of Workers about The Cervical Cancer and Pap Smear in The College of Nursing ISSN. 2014 ; 4 (3): 141-7
12. Doaa, M.; Shisha, E.; Mansour, Nahed, F.; Kheder, M.; Mohammad, A.: Accuracy of Visual Inspection with Acetic Acid in Cervical Ectopy Evaluation. Journal of Nursing Education and Practice. 2016 ; 6 (3): 334-43
13. Sarah, A.; Iqbal, M.: Assessment of Teachers› Knowledge Related to Cervical Cancer at Secondary Schools in Baghdad City. IOSR-JNHS. 2017; 6 (1): 81-7. www.iosrjournals.org
14. Latifa M. and Entisar A.: The Impact of an Educational Intervention on Women›s Knowledge and Perception Regarding Cervical Cancer and Human Papillomavirus Vaccines in Tanta City: Applying Health Belief Model ,Life Science Journal. 2013 ; 10(12s)
15. Alwan, N.; Al-Attar, W.; Eliessa, R.; AlMidfaei, Z. and Nidhal, F.: Knowledge, Attitude and Practice regarding Breast Cancer and Breast Self-Examination among a Sample of the Educated Population in Iraq. Eastern Mediterranean Health Journal, WHO, EMRO.2012 ; 18 (4):337-45.
16. Bishaw, G.;A,bebaw,;A.Telake,(2018) A..Comprehensive knowledge on cervical cancer, attitude towards its screening and associated factors among women aged 30–49 years in Finote Selam town, northwest Ethiopia. Reproductive Health. 2018 ;15:29
17. AbdAllah, A.; Moawia ,J. and Imad M. :Awareness and Attitudes of Nursing Students towards Prevention of Cervical Cancer . Cervical Cancer, an open access . 2016 ; 1 (1) : 1000-106
18. Shiferaw A.; Addissie M. and Gizaw , S.: Knowledge about cervical cancer and barriers toward cervical cancer screening among HIV-positive women attending public health centers in Addis Ababa city, Ethiopia. Cancer Medicine. 2018 ; 7(3): 903–12
19. Tongtong L.; Shunping L.; Julie, R. and Gang C.: Assessing Knowledge and Attitudes towards Cervical Cancer Screening among Rural Women in Eastern China. August International journal of environmental research and puplic health..2017;14:967. Available www.mdpi.com/journal/ij. Assessed on 20/4/2019