Original Research Article

A study of barriers of by cervical cancers screening among nursing professionals at tertiary health care center

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Abstract

Background: Cervical cancer is an important public health problem. Globally, cancer cervix is one of the commonest cancers among women, with an estimate of 468000 new cases annually and 80% of these cases occur in developing and underdeveloped countries. **Aims and Objectives:** To study barriers of by cervical cancers screening among nursing professionals at tertiary health care center. **Methodology:** The present study was conducted in KLES Dr. Prabhakar Kore Hospital and Medical Research Centre and District Hospital Belgaum during the period of January 2010 to December 2010. The present study consisted of 400 participants done by convenient sampling. Female nursing working at KLES Dr.Prabhakar Kore Hospital and Medical Research Centre and District Hospital Belgaum. Group A (Consisted of female nurses working at KLES Dr. Prabhakar Kore Hospital and Medical Research Centre and District Hospital Belgaum) and Group B (consisted of female nurses working at District Hospital, Belgaum). The data obtained was tabulated and analyzed using rates, rations and percentages. **Results:** In this study we have seen most of the participants had age between 25 to 35 years (72% in group A and in group B). In this study most of the participants in both the groups indicated lack of awareness as the commonest barrier (49% vs 52%) . The other barrier were a feeling discomfort Pelvic examination 16.0 and 14.0; Male doctor 1.5 and 3.0; Fear of pain 4.0 and 0.5; Fear of test result 8.5 and 5.5; Feeling that women with complaints should undergo cervical cancer screening 20.0 and 14.0; Time / financial constraint 5.0 and 11.0 respectively in group A and B. **Conclusion:** In our study the most important barriers for the screening for cervical cancer were lack of awareness as the commonest barrier feeling discomfort Pelvic examination ,Male doctor , Fear of pain , Fear of test result, no any complaints, Time / financial constraint if these barriers are studied and implemented to encourage for screening to the women in reproductive age group

Key Word: barriers of by cervical cancers screening, Screening tests for cervical cancers.

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INTRODUCTION

Cervical cancer is an important public health problem. Globally, cancer cervix is one of the commonest cancers among women, with an estimate of 468000 new cases annually and 80% of these cases occur in developing and underdeveloped countries.[1] The burden of cervical cancer in India is enormous, accounting for about 20%of all cancer related deaths in women and is the number one cause of death in middle aged Indian women.2 The disease has a pre-malignant stage which usually occurs in younger women under the age of 40.3 Cervical cancer is a preventable disease and cured if detected early enough.4 The incidence of cervical cancer has declined in western countries due to introduction of screening programs. Pap smear is one of the modern success stories in the field of preventive medicine which detects cervical cancer in its early stage. In 1943, Dr George Papanicolau introduced this technique.5 Other methods of screening technique are colposcopy, visual inspection with acetic acid (VIA), visual inspection with lugols iodine (VILI), and Human Papilloma Virus (HPV) DNA testing.6-8 So we have tried

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to study the various barriers for the screening for cervical cancer among the nursing staff .

METHODOLOGY

The present study was conducted in KLES Dr.Prabhakar Kore Hospital and Medical Research Centre and District Hospital Belgaum during the period of January 2010 to December 2010 .The present study consisted of 400 participants done by convenient sampling . Female nursing working at KLES Dr.Prabhakar Kore Hospital and Medical Research Centre and District Hospital Belgaum during the study period were included into the study. Female nurses between 25 to 60 years were included while not willing to participate were excluded from the study. The ethical clearance was obtained from Institutional Ethical committee Jawaharlal Medical college Medical research centre, Belgaum and District hospital, Belgaum during the study period were screened for eligibility. The eligible participants were briefed about the nature of the study and written informed consent was obtained. Participants were randomized into two groups based on institution they were working for that is Group A (Consisted of female nurses working at KLES Dr. Prabhakar Kore Hospital and Medical Research Centre and District Hospital Belgaum) and Group B (consisted of female nurses working at District Hospital , Belgaum). The demographic data like age, educational qualification and years of service were recorded on predesigned and pretested proforma. In group A, test questionnaire about cervical cancer was given to study participants. A health talk was given regarding cervical cancer and cervical cancer screening. Then a post test questionnaire was given after the educational program to analyze the change in knowledge and attitude about cervical cancer. In group B, a pretest questionnaire about the knowledge, attitude cervical cancer was given to study participants. Further they were provided with pamphlet about barrier for the cervical screening. The data obtained was tabulated and analyzed using rates, rations and percentages.

RESULTS

Table 1: Age distribution

Age (Yrs.)	Group A(n=200)		Group B (n=200)	
25 to 35	144	72.00	131	65.50
36 to 45	39	19.50	29	14.50
46 to 55	17	8.50	40	20.00
Total	200	100	200	100

In this study most of the participants had age between 25 to 35 years (72% in group A and in group B).

Table 2: Distribution of the patients as per the barriers in screening for cervical cancer

Barriers	Group A (n=200)		Group B (n=200)	
	Number	Percentage	Number	Percentage
Lack of awareness	98	49.0	104	52.0
Pelvic examination	32	16.0	28	14.0
Male doctor	03	1.5	06	3.0
Fear of pain	08	4.0	01	0.5
Fear of test result	17	8.5	11	5.5
Feeling that women with complaints should undergo cervical cancer screening	40	20.0	28	14.0
Time / financial constraint	10	5.0	22	11.0

In this study most of the participants in both the groups indicated lack of awareness as the commonest barrier (49% vs 52%). The other barrier was a feeling discomfort Pelvic examination 16.0 and 14.0; Male doctor 1.5 and 3.0; Fear of pain 4.0 and 0.5; Fear of test result 8.5 and 5.5; Feeling that women with complaints should undergo cervical cancer screening 20.0 and 14.0; Time / financial constraint 5.0 and 11.0 respectively in group A and B.

DISCUSSION

Cervical cancer is the second most common cancer in the women worldwide and the leading cause of cancer deaths among women in developing countries[9]. The burden of cervical cancer in India is enormous accounting for about 20 percent of all cancer related deaths in women and is the number one cause of death in the middle age Indian women[10]. It is paradoxical that so many deaths are occurring whilst being a preventable disease. Organized population based screening linked to treatment of the detected neoplasias can lead to more than 70 per cent reduction of disease related mortality[11]. Where screening quality and coverage have been high, invasive cervical cancer has been reduced by as much as 90 percent. This indicates the usefulness of screening in the population, but with major barriers towards lower screening coverage[12]. There are no effective, organized populationbased high-level opportunistic screening programs for cervical cancer in any of the states in India contemporary to developed nations [10,13- 15], due to which routine screening of asymptomatic women have been almost non-existent[20]. For a screening program to be successful, a good attending rate of women undertaking the test is must in context to which complete thorough exploration of their socio-economicdemographic profile is a preliminary requirement [17]. Several factors influencing cervical cancer screening have been reported which includes lack of awareness, inadequate access to healthcare facility with poor infrastructure in addition to unawareness among the doctors at rural areas regarding importance of early diagnosis and treatment, existence of alternative medicinal systems and quacks[18], deficient

economic and moral support from husband and family[19-20] and an inappropriate demand for providing cervical cancer screening from the potential beneficiaries could be enumerated as the chief causes[15]. In this study we have seen most of the participants had age between 25 to 35 years (72% in group A and in group B). In this study most of the participants in both the groups indicated lack of awareness as the commonest barrier (49% vs 52%). The other barrier were a feeling discomfort Pelvic examination 16.0 and 14.0; Male doctor 1.5 and 3.0; Fear of pain 4.0 and 0.5; Fear of test result 8.5 and 5.5; Feeling that women with complaints should undergo cervical cancer screening 20.0 and 14.0; Time / financial constraint 5.0 and 11.0 respectively in group A and B . These findings are similar to Tessaro IA *et al*, the respondents reasons for not being screened were not feeling at risk, lack of symptoms, carelessness, fear of vaginal examination, lack of interest, test being un pleasant and not being risky age. Another study by Nganwai P *et al* showed that majority (89.2%) of those who had never had Pap test did not feel risk of developing cervical cancer.

CONCLUSION

In our study the most important barriers for the screening for cervical cancer were lack of awareness as the commonest barrier feeling discomfort Pelvic examination ,Male doctor , Fear of pain , Fear of test result , no any complaints, Time / financial constraint if these barriers are studied and implemented to encourage for screening to the women in reproductive age group

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