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**Research Article**

# ANALYSIS OF THE AWARENESS AND ATTITUDES OF FEMALE PATIENTS REGARDING BREAST SELF-EXAMINATION IN THE GYNECOLOGY CLINIC OF SHOHAHDAYE KARGAR HOSPIAL OF YAZD (IRAN) IN 2011-2012

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## ABSTRACT

Breast cancer is known as the most widespread malignancy among women, categorized as a slow-growing tumor. If the diagnosis happens in the early stages, the treatment will be easier. The best way for breast cancer screening is self-examination. As per this issue, a study is carried out on the female patients who were referred to the Gynecology Clinic of Shohahdaye Kargar Hospial of Yazd. The present study is descriptive-analytical carried out on 250 female patients in the Gynecology Clinic of Shohahdaye Kargar Hospial of Yazd. The sampling was random, based on a specific set of inclusion criteria. The data gathering instrument included questionnaires with approved validity and reliability. Data analysis was performed via the use of descriptive statistic and Chi-square test. The results show that regarding the awareness and knowledge of breast self-examination, 85.5% of the subjects possess poor knowledge 6.8% were in average level, and only 6.2% enjoyed a high level of knowledge. With respect to attitude, 38.8% had positive attitude, and 61.1% and 0.1% respectively had average and negative attitude toward breast self-examination. According to the above findings, it can be concluded that awareness and attitudes regarding breast self-examination is not proper among women, and appropriate policies should be adopted accordingly.

**Keywords**: Awareness, Attitude, Diagnosis, Breast self-examination.

## INTRODUCTION

Nowadays, cancer is the most common cause of mortality in human beings. Among different types of cancer, breast cancer is the most widespread in women, and it ends in thousands of deaths in different countries (Varricchio, 1997). Breast cancer is known as the most widespread malignancy among women, categorized as a slow-growing tumor. If the diagnosis happens in the early stages, the treatment will be easier. The best way for breast cancer screening is self-examination. Studies show that those women with early breast cancer diagnosis survived in 90% of the cases, while this percentage drops to 60 in those with delayed diagnosis (Harris and Leininger, 1995). During the past 20 years, the number of patients with breast cancer has been on rise. A majority of cases are found to the increase of the use of breast cancer screening. In 1990-1995, proper screening methods together with early diagnosis and appropriate treatment reduced the mortality rate. As a matter of fact, early diagnosis increased the chance of survival for five years to 97% (Ghanbary and Atrkar Roshan, 2004). Early diagnosis techniques include breast self-examination (BSE), clinical examination by doctors or health and mammography staff. BSE is a low-cost and safe technique to diagnose breast cancer in its primary stages. The studies show that breast cancer is recognized in early stages in those who perform BSE compared to those who do not examine themselves (Clarke and Savage, 1999).

BSE is a screening method done by the individuals themselves due to its cost-effectiveness, efficiency, and independence of medical staff and instruments. The studies show that those lumps discovered by mammography are likely more malignant than those discovered via BSE. If done properly, BSE is capable of diagnosing a lump smaller than one centimeter. Studies also show that women who know more about BSE perform are more likely to perform it correctly and regularly (Coa *et al.*, 1994). Our attitude toward a disease is an important factor in taking or not taking a preventive measure (Ghazanfaree *et al.*,1995).

Despite the existence of strong evidence that approve BSE as an efficient and low-cost method in preventing mortality caused by breast cancer, a majority of women do not practice it according to the standard set of maxims and regulations proposed by health organizations. It has been proved that only 25-35% of the women understudy performed BSE monthly on a regular basis (Sternberger, 1994). Due to the prevalence of breast cancer in many

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countries including Iran and because of the lack of regular education on screening methods and early diagnosis of the disease in Iran, it sounds necessary to search for a proper way to improve and extend education in this country. The present study analyzes the awareness and attitudes of female patients regarding breast self-examination in the Gynecology Clinic of Shohahdaye Kargar Hospial of Yazd.

## MATERIALS AND METHODS

The research population included 300 females who were referred to the Gynecology Clinic of Shohahdaye Kargar Hospial of Yazd and who also met inclusion criteria of the study. The inclusion criteria were obtaining the participants consent, age range of 25-65 years and having at least a diploma. Sampling method was target-oriented. Data gathering instrument was a questionnaire with three sections. The first section recorded the demographic information of the participants (age, marital status, education, family backgrounds and sources of information regarding breast cancer). The second section included 13 questions evaluating the awareness and 7 measuring the attitudes of the subjects. With respect to awareness, the correct, incorrect and I-don't-know answers were respectively given three, zero and one points. In attitude section, items were given the following grades: completely agree (5), agree (4), I have no idea (5), disagree (2), completely disagree (1). The instrument validity was approved by using content validity method. The research studies the required resources and articles on the issue in question, and then she designed the questions and sought the approval of 10 university professors. The professors commented on some questions and the questionnaire was revised accordingly. The reliability of the instrument was found using test-retest. The gathered information was analyzed using SPSS software via Chi-square and Fisherman test.

## RESULTS

The findings showed that the highest percent achieved by the subjects (53.3%) were within the age range of 35-45 years. 78% of the population were married. 64% of the subjects had no history of breast cancer in their family, and the majority of them had diploma degree (63%). A majority of the population (49.4%) gained their information via mass media especially TV (Table 1).

Regarding their awareness, 85.5% of the subjects possess poor knowledge 6.8% were in average level, and only 6.2% enjoyed a high level of knowledge. The mean score of the subjects was 4.7 with standard deviation of 7.4 (Table 2).

With respect to attitude, 38.8% had positive, 61.1% average and 0.1% negative attitude toward BSE. The mean score of the subjects was 54.3 with standard deviation of 7.1.

**Table 1.** Absolute and relative frequency distribution of the sample according to demographic characteristics.

| Variable | Percentage | Frequency |
|---|---|---|
| **Age** | | |
| 25-35 years | 13 | 5.0 |
| 36-45 years | 134 | 53.3 |
| 46-55 years | 81 | 32.1 |
| 56-65 years | 22 | 9.6 |
| **Marital Status** | | |
| Married | 195 | 78 |
| Single | 55 | 22 |
| **Education** | | |
| Diploma | 176 | 63 |
| BA, BS or higher | 74 | 37 |
| **Familial background of breast cancer** | | |
| positive | 90 | 36 |
| Negative | 160 | 64 |
| **Information source** | | |
| Friends | 98 | 38.8 |
| Mass media | 123 | 49.4 |
| Doctors | 29 | 11.8 |

**Table 2:** Absolute and relative frequency distribution of the sample according to awareness.

| Frequency / Attitude | Number | Frequency |
|---|---|---|
| Positive (more than 70%) | 95 | 38.0 |
| Average (30-60%) | 153 | 61.1 |
| Negative (0-30%) | 2 | 0.8 |

## DISCUSSION

The results showed that 85.5% of the subjects possessed low awareness of BSE and its significance. As per attitude, 61.1% of the subjects had an average (modified) attitude toward this method. In study entitled as the analysis of awareness and performance of BSE among Chinese immigrants in San Francisco, it was found that the Chinese immigrants enjoyed a rather high awareness of BSE (Wong-Kim and Wang, 2006). Another study in Austria entitled as the analysis of awareness and attitudes of women toward BSE, it was demonstrated that the majority of women had a high awareness of BSE, especially the young generation of females (Janda *et al.*, 2000). In 2001, Abedzadeh (2003) also found that 67% of the subject did have the required awareness (Abedzade, 2003). In Saudi Arabia, a study done on 300 females between 20-70 years showed that 69.7% of the participants never even heard of BSE, and generally speaking their knowledge of BSE and breast cancer was not adequate at all (Jahan *et al.*, 2006). Another study in Tabriz showed that only 18.8% of the subjects knew about BSE (Farshbaf Khalilic *et al.*, 2009). In Nigeria, a study on 200 female subjects showed that 85% of them had heard about BSE, yet 76% of them did not put what they knew into real practice; their knowledge on the correct way of performing BSE was very poor (Jebbin and Adotey, 2004). In 1999, Jokar and Ghiasi (2000) showed that the majority of women in Ilam (57.3%) had poor information and only 11.9% possess enough knowledge on BSE (Jokar, 2000).

## CONCLUSION

A look at all of the early breast cancer diagnosis methods as well as the relevant studies reveals that the best way for saving women from breast cancer treats is providing them with knowledge, and the early and dangerous symptoms of this disease. They should also know about the screening techniques used to diagnose the disease. The findings showed that Iranian women are in need of further education and information on BSE. It is important that the officials and government spares more attention to this disease and diagnosis method.

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