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AWARENESS, ATTITUDES AND PRACTICES ON CERVICAL CANCER AND ITS SCREENING AMONG WOMEN IN THIRAIMADU GRAMA NILADHARI DIVISION OF UNIVERSITY COMMUNITY PROJECT AREA

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Abstract

Introduction: The primary cause of cervical cancer is persistent infection with the carcinogenic type of Human Papilloma Virus (HPV); serotypes 16 and 18 account for 70% of all cervical cancers. This study was aimed to evaluate awareness, attitudes, and practices on cervical cancer and its screening among women in the University Community Project Area (UCPA).

Method: A descriptive cross-sectional study was conducted among 118 females aged 36-65 years living in UCPA from August 2020 to August 2021. Complete enumeration was performed to recruit the participants. A validated self-administered questionnaire was used as a data collection instrument. Statistical software (SPSS 26.0) was used to analyze the data, and p-value < 0.05 was considered significant for all analyses. Ethical approval was obtained from the Ethical Review Committee, Faculty of Health - Care Sciences, Eastern University, Sri Lanka-

Results: Majority (43.2%) of the respondents represented the age of 35-45 years age categories. Most participants (53.4%) had poor awareness about cervical cancer, while 29.7% and 16.9% had good and adequate awareness, respectively. The good, adequate, and poor levels of awareness among study subjects about the screening of cervical cancer were 31.4%, 12.7%, and 55.9%, respectively. The majority (75.4%) of the participants never experience the PAP smear test. Most (86.3%) of respondents were willing to perform the PAP smear test when they got opportunities with proper explanation.

Conclusion: Results of this investigation revealed that the participants had poor awareness about cervical cancer and its screening and had good attitudes and poor practices about cervical cancer screening.

Keywords: Cervical cancer, Screening Awareness, Attitude, Practices, Batticaloa, Sri Lanka

Introduction: Cervical cancer is the fourth most common cancer in women, with an estimated 570,000 new cases globally in 2018, accounting for 6.6% of all female cancers (WHO, 2019). Therefore, the main risk factors for the development of invasive cancer are directly related to HPV exposure, including early age at first intercourse, multiple sexual partners, male partners with multiple previous sexual partners, and persistent infection of high-risk papillomavirus strains (Kumar *et al.*, 2017).

It may take 10-20 years for the precancerous lesions caused by HPV to develop into invasive carcinoma (Guideline & Physicians, n.d.). The significance of cervical carcinoma is, even it is one of the world's deadliest, and they are preventable and curable with early detection and screening (WHO, 2019). Screening for cervical carcinoma in asymptomatic populations is one of the most effective strategies in controlling cervical cancer (Guideline & Physicians, n.d.).

Conventional PAP smear test is the screening method practised in Sri Lanka. It is offered to women over 35 years of age who are/were sexually active (Guideline & Physicians, n.d.). This service is provided free of charge at: Well women clinic at MOH areas, Well women clinic/Gynecological clinic in all government hospitals, National cancer institute, National cancer control program, Maharagama and National cancer early detection centre, Narahenpita (Bandara U, 2018).

However, still in Sri Lanka majority of cervical cancers are diagnosed at an advanced stage (Stage 3 and 4). This might lead to the poor prognosis. Therefore, this study was aimed to evaluate awareness, attitudes, and practices on cervical cancer and its screening among women in the University Community Project Area (UCPA).

Method: A community based descriptive cross-sectional study was conducted to assess the awareness, attitudes and practices on cervical cancer and its screening among females. Data was collected through a validated self-administered study questionnaire which contains three

sections such as socio-demographic factors (A), awareness on cervical cancer and its screening facilities (B) and attitudes and practices towards cervical cancer screening programs (C) and all together containing 30 questions. The ethical approval was obtained from the Ethics Review Committee, Faculty of Health-Care Sciences, Eastern University, Sri Lanka.

The score was given according to the correct answer; one correct answer brought 1 point, while one wrong answer brought zero. Furthermore, awareness, attitude and practices were classified as follows: good (>75%), adequate (50% - 75%) and poor (<50%). Collected data were analyzed using Statistical Package of Social Sciences (SPSSV26).

Results and discussion: Cervical cancer is a preventable disease, and an essential aspect of its prevention is detecting its' premalignant form by screening at an early age. In Sri Lanka, many studies have been done concerning cervical cancer-targeting females in the community (Gamage, 2009). Totally 118 participants were recruited for this study. A majority (43.2%) of subjects belongs to the 35-45 years old age category. 87.3% of participants are presently married. Most of the respondents (67.8%) were following Hindu religious activities. The majority (89%) of subjects represented the Tamil ethnic group.

Among the participants, educational levels were distributed as follows: 38.1% were below G.C.E Ordinary Level [G.C.E O/L], 40.7% were up to G.C.E O/L and 15.3% are educated up to G.C.E Advanced Level [G.C.E A/L] while only 5.9% of the participants were diploma or degree holders. Most of the respondents were housewives (73.7%). Around half (49.2%) of participants monthly income was below the 15,000 Sri Lankan Rupees.

Among the respondents, the awareness level was distributed as follows: 29.7% were good, 16.9% were adequate and 53.4% were poor. Findings of the present study contradict the study conducted by Gimba et al. in 2014, in which undergraduates in Peradeniya University showed a good (94.6%) knowledge about cervical cancer. this was probably because of the higher educational level of participants.

Concerning awareness of cervical cancer screening facilities, most (55.9%) respondents had poor awareness compared to 31.4% of them had good and 12.7% women had adequate awareness. This shows similarity with the research done among a group of teachers in the kingdom of Saudi Arabia

and, 66.2% of teachers were not aware of the screening methods (Aldhafar, Alhulaybi and Khan, 2016).

Only 24.6% of the study subjects had experience with the PAP smear test, while the majority (75.4%) have not had such experiences. However, most (86.3%) of participants who had never undergone a PAP smear test in the past are willing to perform the PAP smear test after obtaining a healthy explanation and getting an opportunity. Moreover, the absence of notification of any symptoms (38%) and lack of information about screening methods (35.4%) were the principal reasons for not being screened among the participants.

Conclusion: Around one-quarter of the women had undergone a PAP smear test in their lifetime. Awareness and practices on cervical cancer and its screening among women in the Thiraimadu Grama Niladhari division is poor, while the attitude for the performance of future PAP smear is good.

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