

TITLE: KNOWLEDGE AND PREVALENCE REGARDING BREAST CANCER

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ASSESSMENT OF KNOWLEDGE AND PREVALENCE REGARDING BREAST CANCER AMONG WORKING WOMEN.

ABSTRACT

Non-experimental – Descriptive Cross-sectional research was conducted to assess the knowledge and prevalence regarding breast cancer among working women at J.J. Group of Institution, Tiruchirappalli. The obtained overall level of knowledge were 8(20%) had inadequate, 2(52.5%) had moderate and 11(27.5%) had adequate knowledge. The overall estimated prevalence were 15(37.5%) were have minimal and 3(7.5%) were in high risk. The findings revealed that there was no significant association between the knowledge and demographic variables. It revealed that breast cancer can develop in earlier age group and the family history of breast cancer is not a major criterion to develop breast cancer.

KEY WORDS: *Breast cancer, Knowledge, prevalence*

INTRODUCTION

Cancer is a leading cause for morbidity and mortality both in developing and developed world. The increasing burden of cancer in absolute numbers of new cancer cases and cancer deaths in India due to population growth and changing life styles. Cancer prevention and control consists of a continuum of preventive, early detection, treatment and palliative care intervention that aim to reduce the occurrence, suffering and death from cancer while improving survival and quality of life of cancer patients. **According to WHO** In 2022, there were 2.3 million women diagnosed with breast cancer and 670 000 deaths globally. Breast cancer occurs in every country of the world in women at any age after puberty but with increasing rates in later life. Lack of education on breast cancer and breast screening techniques used for early diagnosis is recognized as one of the major barriers to early detection of breast cancer. Breast screening is crucial for early breast cancer detection, allowing for more effective treatment and potentially saving lives, as early detection leads to better outcomes.

STATEMENT OF THE PROBLEM

A study to assess the knowledge and prevalence regarding breast cancer among working women at selected area.

OBJECTIVES

- To assess the level of knowledge regarding breast cancer among working women.
- To estimate the prevalence of breast cancer among working women.
- To find out the association between the knowledge of breast cancer with their selected demographic variables.

HYPOTHESIS

H1: There is statistically significant association between the level of knowledge regarding breast cancer among working women with their selected demographic variables.

H2: There is significant prevalence regarding breast cancer among 35-60 years of women.

RESEARCH METHODOLOGY

To accomplish the objectives of the study, Non-experimental – Descriptive Cross-sectional research design was used to find out the knowledge and prevalence regarding breast cancer among working women. 40 samples were selected from J.J. Group of institution selected by convenient sampling technique. After obtaining the setting permission and informed consent from the participants, the data was collected by administration of structured knowledge questionnaire in 5 consecutive days. On the same day the sample were taken to the Harshamitra Cancer and Multi-specialty hospital, Tiruchirappalli for cancer screening like Thermo gram, Mammogram, USG of breast. After that the tool was verified and the results of screening were collected from the hospital. Descriptive and inferential statistics was used to analyze the data.

RESULTS AND DISCUSSION

Table 1: Frequency and percentage distribution of the selected demographic variables
N= 40

S.No	Demographic Variables	Frequency	Percentage
1	Age in years		
	a) above 35	13	32.5
	b) above 40	21	52.5
	c) above 50	6	15
2	Religion		
	a) Hindu	35	87.5
	b) Christian	4	10
	c) Muslim	1	2.5
3	Food habits		
	a) Vegetarian	2	5
	b) Non vegetarian	38	95
4	Residence		
	a) Rural	24	60
	b) Semi urban	8	20
	c) Urban	8	20
5	Economic status		
	a) High	0	0
	b) Middle	33	82.5
	c) Low	7	17.5
6	Body mass index		
	a) 18 -24	19	47.5
	b) 25- 30	10	25
	c) Above 30	11	27.5
7	Oral contraceptive pills		
	a) Yes	3	7.5

	b) No	37	92.5
8	Delayed puberty		
	a) Yes	6	15
	b) No	34	85
9	Early menopause		
	a) Yes	9	22.5
	b) No	31	77.5
10	No of children		
	a) 1	4	10
	b) 2	28	70
	c) 3	8	20
11	History of breastfeeding		
	a) Yes	36	90
	b) No	4	10
12	Information regarding cancer		
	a) Yes	22	55
	b) No	18	45

Table .1 shows frequency and percentage wise distribution of demographic variables among working women. Out of 40 women majority of them 21 (52.5%) were in the age of above 40 years, regarding religion most of them 35 (87.5%) belongs to Hindu, majority of them 38(95%) took non vegetarian. Majority of them residing 24(60%) in rural, most of them 33 (82.5%) belongs to middle class, with regards to body mass index 19 (47.5%) were 18-24, most of them 37 (92.5%) haven't took oral contraceptive pills , regarding to delayed puberty 34 (85%) has no history of delayed puberty ,with regards to early menopause 31 (77.5%) has no history of early menopause. Most of them 28 (70%) has 2 children and majority of them (90%) has gave breast feeding, with regards to information regarding cancer 22 (55%) has knowledge about cancer.

LEVEL OF KNOWLEDGE

Fig.1. Distribution of sample based on their level of knowledge regarding breast cancer among working women.

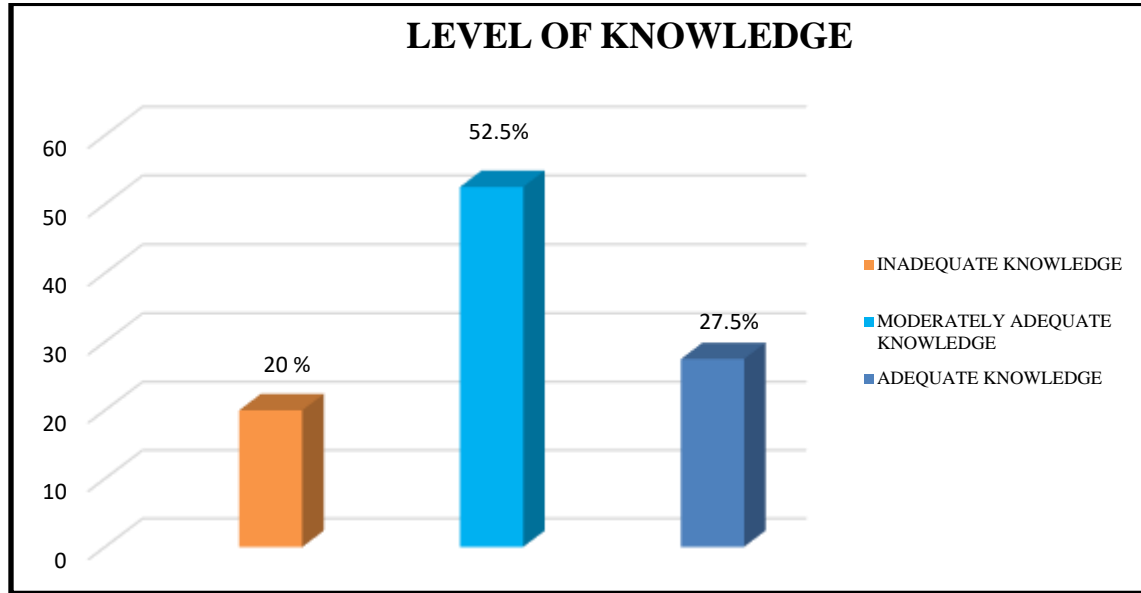


Figure shows that, 8 (20%) had inadequate knowledge, 21 (52.5%) had moderately adequate knowledge and 11 (27.5%) had adequate knowledge regarding breast cancer.

Table 2: Data on Estimation of breast cancer prevalence among working women.

N =40

NORMAL		MINIMAL		HIGH RISK	
f	%	f	%	f	%
22	55	15	37.5	3	7.5

The table shows that majority 22 (55%) were normal and 15 (37.5%) were have minimal risk and 3(7.5%) were in high risk.

Regarding association the findings revealed that there was no significant association between the level of knowledge regarding breast cancer and demographic variables such as age in years ($\chi^2 = 1.877$), religion($\chi^2 = 4.987$), food habits ($\chi^2 = 1.189$), residence ($\chi^2 = 8.249$),economic status ($\chi^2 = 4.583$),body mass index ($\chi^2 = 7.724$), oral contraceptive pills ($\chi^2 = 0.551$), delayed puberty ($\chi^2 = 2.989$),early menopause ($\chi^2 =0.314$), number of children ($\chi^2 = 2.518$), history of breastfeeding ($\chi^2 = 1.29$), information regarding cancer ($\chi^2 = 0.6234$) is lower than the table values which is not significant at $p>0.05$ respectively.







DISCUSSION

This study authenticated that the breast cancer can develop even in earlier age group. We have to start screening for breast cancer earlier. The high-risk women are instructed to go for FNAC to confirm the breast cancer. In this study, there is no family history of breast cancer for high-risk women. Hence, we highlighted the family history of breast cancer is not a major criterion to develop the breast cancer.

Conclusion

The findings of the study indicated a noticeable prevalence of breast cancer among working women. This highlights the importance of early screening, awareness, and preventive strategies. There was no significant association between levels of knowledge regarding breast cancer with their demographic variables. The study underscores the need for workplace-based health initiatives to combat the rising risk of breast cancer among working women.

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