



ISSN: 0976-3031

Available Online at <http://www.recentscientific.com>

CODEN: IJRSFP (USA)

International Journal of Recent Scientific Research
Vol. 9, Issue, 9(C), pp. 28843-28846, September, 2018

**International Journal of
Recent Scientific
Research**

DOI: 10.24327/IJRSR

Research Article

STUDY OF KNOWLEDGE ON SCREENING AND ASSOCIATION OF VISUAL INSPECTION AND PAP SMEAR OUTCOME OF CERVICAL CARCINOMA AMONG WOMEN ATTENDING A SCREENING CAMP AT MARATHWADA REGION: A CROSS SECTIONAL STUDY

Preeti.M.Shetty., Swati Shiradkar., Shubhangi Mande and Lakshmi Rachakonda

MGM Medical College and Teaching Hospital Aurangabad

DOI: <http://dx.doi.org/10.24327/ijrsr.2018.0909.2744>

ARTICLE INFO

Article History:

Received 06th June, 2018

Received in revised form 14th July, 2018

Accepted 23rd August, 2018

Published online 28th September, 2018

Key Words:

Cervical cancer, pap smear,
camp-approach.

ABSTRACT

Background: Cervical cancer is the commonest malignancy among women in India. It is also a major cause of deaths due to cancer in women in developing countries. Cervical carcinoma is caused by a virus called HPV virus. Screening of cervical carcinoma can be done as there is a lead time between the appearance of symptoms and the actual progression from abnormal cell cytology to invasive carcinoma. The knowledge about the same is lacking among the individuals.

Methodology: The study was conducted among the patients attending the camp. After considering the inclusion and exclusion criteria the final sample size was 33. These people were screened for carcinoma using pap smear and also were assessed for their knowledge about pap smear.

Results: The mean age of women attending was found to be 46±8.4 years. Majority 30.3% thought method of detecting carcinoma to be attending the doctor's clinic at regular interval. There were only 9.1% who knew pap smear as a method of detection. The knowledge was mostly obtained from ASHA workers 24.2%. 39.4% didn't test for carcinoma as there were no symptoms. Visually most common finding was of hypertrophy and erosion. Least were bleeding on touch and infection. There was no correlation between visual inspection and PAP smear findings.

Conclusion: Knowledge was better in the current study but there was no association between knowledge and source of knowledge and visual inspection and pap smear finding. Hence, more studies with specific screening criteria must be done.

Copyright © Preeti.M.Shetty *et al*, 2018, this is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution and reproduction in any medium, provided the original work is properly cited.

INTRODUCTION

Cervical cancer is the major cause of cancer in women in developing countries. Cervical cancer is the commonest malignancy among women in India. It is also a major cause of deaths due to cancer in women in developing countries. The highest incidence and mortality rates are in sub-Saharan Africa, Latin America, and South Asia^{1,2}. The age adjusted incidence rate for cervical cancer has been reported to vary from 19 to 44/100 000 women in various cancer registries in India.³ The estimates indicate approximately 122,844 women are diagnosed with cervical cancer and there are 67,477 deaths annually in India, which account to nearly one third of the global cervical cancer deaths.⁴

Cervical carcinoma is caused by a virus called HPV virus. This can be prevented by limiting number of sexual partners, using barrier contraceptive methods, avoiding smoking, getting a pap smear and a follow up on abnormalities done, maintaining a healthy diet, a good physical regime and getting the HPV

vaccine.⁵ Screening of cervical carcinoma can be done as there is a lead time between the appearance of symptoms and the actual progression from abnormal cell cytology to invasive carcinoma. To support this, studies have shown that carcinoma *in situ* can be detected for several years before it progresses to invasive cancer by cytological screening.⁶ Studies have also shown the ability to reduce the incidence and mortality from cervical cancer by 60% through screening every five yearly.⁷

Still greater part of women are not aware about the different ways of preventing it or have any knowledge about its screening. Hence the current study was planned to see for knowledge about the screening tool for cervical carcinoma that is pap smear. After knowing the knowledge we will be able to make policies to sensitize women through awareness campaigns to undergo cervical screening at regular intervals

*Corresponding author: Preeti.M.Shetty

MGM Medical College and Teaching Hospital Aurangabad

Objectives

To access the knowledge on screening test for cervical cancer among the women attending the camp.

METHODOLOGY

The current study was a cross sectional study conducted at a camp area in marathwada. The study was conducted among women attending the camp. There were 629 people who attended the camp. The study provide questionnaire to all the 101 women who were screened. From the 101 patients, we conducted pap smear of 33 patients among them as many of the patients were not willing for the examination , due to privacy issues, fear of testing. So after using the inclusion criteria of women who have symptoms of cervical carcinoma like unusual vaginal discharge, vaginal bleeding between periods, after sexual intercourse or post-menopausal bleeding, pelvic pain radiating to the thighs, pain after sexual intercourse, unexplained weight loss, fatigue, leakage of urine or faeces from the vagina and bone fractures and women willing to participate in the study, the total sample size was 33. Exclusion criteria included women not willing to participate in the study and women already diagnosed of cervical carcinoma. After considering the inclusion and exclusion criteria 33 women were examined and the knowledge about pap smear was accessed among them through a pretested semi-structured questionnaire. The study was conducted from february 2018 to july2018. Data was analysed using Microsoft excel and SPSS version 16. Consent was obtained from patients before obtaining the data.

RESULTS

The study consisted of 33 participants. The mean age of women attending was found to be 46 years with a standard deviation of 8.4 years. The study had majority 29(87.9%) Hindus and 4(12.1%) Muslims. The study had different age distribution as seen in Table 1. Majority of the study participants were married who were 27(81.8%), there was only one study participant who was unmarried and 3 (9.1%) who were widowed and 2 (6.1%) who were separated. Table no 2 shows the education status of the study participants, majority 9(27.3%) had primary level of education. The age of marriage of the participants showed that most 19 (57.6%) of the participants were married between the age of 13-19 years. This shows that the early marriage could be a factor which is responsible of symptoms among the participants. The study participants had several symptoms (Fig 1) among them the commonest was vaginal discharge 15 (45.5%) followed by abnormal vaginal bleed 6(18.2%) and foul smelling discharge 6(18.2%) abdominal pain patients were 5 (15.2%) and intermenstrual bleed was among 1(3%) participant.

Table 1 Age wise distribution of study participants

Age in years	Number (N)	Percentage (%)
20-29	9	27.3
30-39	16	48.5
40-49	6	18.2
50-59	1	3.0
60-69	1	3.0
>70	Nil	0
Total	33	100

Table 2 Education wise distribution of study participants

Education	Number (N)	Percentage (%)
Primary	9	27.3
Secondary	7	21.2
12 th	8	24.2
Illiterate	9	27.3
Total	33	100

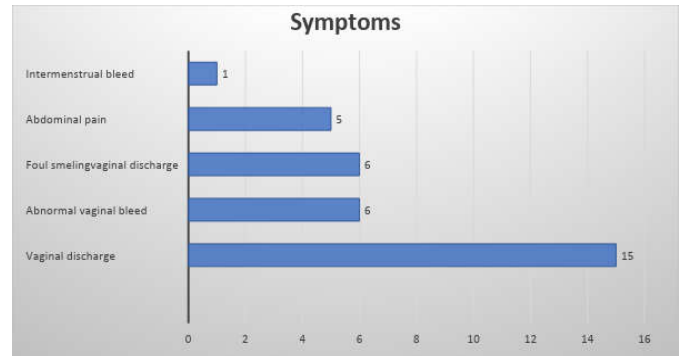


Figure 1 Distribution of participants according to their symptoms.

Table 3 Knowledge of participants on different methods of screening

Methods of detection	Number (N)	Percentage (%)
Seeing doctor at regular intervals	10	30.3
Biopsy	5	15.2
PAP smear	3	9.1
Scanning	2	6.0
Don't know	13	39.4
Total	33	100

The knowledge using questionnaire found that participants didn't know different methods of early detection (table 3) 13 (39.4%), among the participants who knew different methods of detection thought that 10 (30.3%) seeing a doctor frequently at regular intervals would detect cervical cancer. About 5 (15.2%) thought that biopsy was a method of early detection. There were only 3 (9.1%) participants who had knowledge about PAP smear. This shows the poor knowledge among the participants and the need to increase awareness among the population.

The knowledge about screening (table 4) was obtained mostly from ASHA workers 8 (24.2%), this is followed by doctors 4 (12.1%) and anganwadi workers and friends 3 (9.1%). There were further enquiry done among study participants about reasons why the screening test not done before (table 5), it was found that no symptoms and not knowing that this as to be done were the majority causes. Followed by fear of pain during the procedure and fear of results and finally non availability of test to be the reasons.

Table no 4 Source of knowledge about screening among participants.

Source	Number (N)	Percentage (%)
ASHA worker	8	24.2
Doctor	4	12.1
Friends	3	9.1
Anganwadi worker	3	9.1
Family	2	6.1
Don't know	13	39.4
Total	33	100

Table no 5 Reason for not doing the test among the study participants.

Reasons	Number (N)	Percentage (%)
No symptoms	13	39.4
Didn't know	12	36.4
Fear of pain during the test	5	15.2
Fear of results	2	6.0
Non availability of tests	1	3.0
Total	33	100

The study examined the participants, this included visualization of the vagina and also the pap smear. The pap smear showed majority were normal 15(45.5%) followed by 9(27.3%) endocervicitis and minimal 1 (3.0%) atrophic findings. The visual findings showed majority hypertrophy and erosion 14 (%) and one case each of blood on touch and infection (figure 2 and table 6).

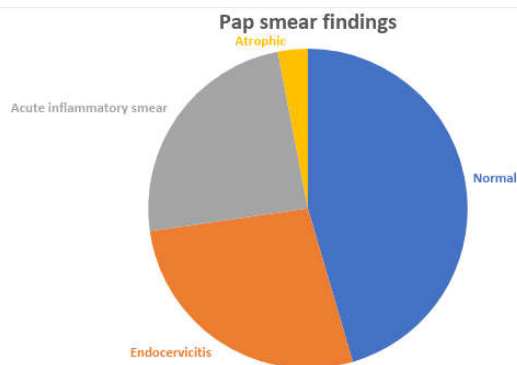


Figure 2 Pap smear findings of study participants.

Table no 6 Visualisation findings of the study participants

Visual findings	Number (N)	Percentage (%)
Hypertrophy	14	42.4
Erosion	14	42.4
Discharge	3	9.1
Blood on touch	1	3.05
Infection	1	3.05
Total	33	100

The study was used to see for any correlation between the level of knowledge and it's source and it was found that mostly good knowledge was obtained from health workers rather than any other source. The table 7 shows the finding.

Table no 7 Correlation between source and level of knowledge

Knowledge level	Source		Total
	Health worker	Non-health worker	
Good	14	6	20
Poor	0	13	13
Total	14	19	33

We also tried to find out that weather there was any correlation between the visual inspection and that of pap smear but no correlation was found statistically. This is shown in table number 8

Table no 8 Correlation between visual inspection and PAP smear

Visual inspection	PAP smear		Total
	Normal	Abnormal	
Hypertrophied	8	6	14
Erosion	6	8	14
Infection	1	4	5
Total	15	18	33

P = 0.3 using chi square = no significance as >0.05

DISCUSSION

The current study had mean age 46 ± 8.4 years greater than that of Smitha et al² which was 38.83 ± 6.57 . In our study there were 87.9% Hindus comparable to the study by Smitha et al², who were 90.6%. The current study had 81.8% who were married.

The study had 39.4% who didn't do screening as there was no symptoms which is similar to Smitha et al, but the findings differ from Chamani et al,⁸ where major reason for not participating was lack of knowledge. Current study had 36.4% participants who didn't do screening as they were not aware. The study showed 60.6% knowledge about pap smear. This percentage is less among studies by Singh et al and Smitha et al². Pap smear was told as a method of screening among 9.1% of the study participants which was higher among study conducted by Shrestha which was 53% and lesser in study by John,⁹ which was 2.9%.

CONCLUSION

The study saw that even though the knowledge about screening is better than other studies but the knowledge that pap smear as the appropriate test for screening was found less among the participants. So there is need to improve the knowledge about exact screening tests. The study found no correlation between knowledge and source and also between visual inspection and pap smear. Hence we need more studies which can give us more appropriate guidance on the group of individuals on whom tests have to be conducted. As the study had age group > 40 years but still findings were inconsistent. There could be a possibility that now in India the incidence of cervical cancer is coming down as the knowledge about hygiene is increasing, also we need to step up in finding newer screening methods for the diagnosis of cervical cancer.

References

- Desai M. An assessment of community based cancer screening program among Indian Women Using the Anganwadi Workers. *J ObstetGynecol Ind* 2004;54:483-7.
- Shrestha S, Dhakal P. Knowledge, Attitude and Practice Regarding Cervical Cancer Screening Among Women Attending a Teaching Hospital, Bharatpur, Chitwan. *J Fam Reprod Health* 2017; 11(1): 18-23.
- National Cancer Registry Programme, Ten year Consolidated report of the Hospital Based Cancer Registries 1984-1993. Indian Council of Medical Research; p. 32-3.
- ICO Information Centre on HPV and cancer (Summary Report 2014-08-22). Human Papillomavirus and Related Diseases in India. 2014.
- Cherian Varghese, 50 Years of Cancer Control in India; cancer prevention and control in India, Supportive care in Oncology: Historical perspectives and future options; MOHFW India.
- World Health Organization. Cervical Cancer Screening Programme Managerial Guidelines. Geneva: WHO; 2006.
- IARC. Working Group on Cervical cancer screening (1987). Summary Chapter. In: Hakama M, Miller AB,

- Day NE, Eds. Screening for Cancer of the Uterine Cervix. Lyon, International Agency for Research on cancer: No.76 IARC Scientific publications; p. 133-44.
8. Chamani SR, Charandabi SMA, Kamalifard M. Knowledge, attitudes and practice about Pap smear among women referring to a public hospital. *Journal of Family and Reproductive Health*. 2012;6:177-82.
9. Chamani SR, Charandabi SMA, Kamalifard M. Knowledge, attitudes and practice about Pap smear among women referring to a public hospital. *Journal of Family and Reproductive Health*. 2012;6:177-82.

How to cite this article:

Preeti.M.Shetty *et al.*2018, Study of Knowledge on Screening and Association of Visual Inspection and Pap Smear Outcome of Cervical Carcinoma Among Women Attending A Screening Camp At Marathwada Region: A Cross Sectional Study. *Int J Recent Sci Res*. 9(9), pp. 28843-28846. DOI: <http://dx.doi.org/10.24327/ijrsr.2018.0909.2744>
