

Practices of women for Breast - Self Examination in The Medical-Technical Institute in Baghdad

Dr. Huda, B. H.
Department of Adult Nursing, College of Nursing
University of Baghdad

الخلاصة :

تهدف الدراسة إلى التعرف على ممارسات النساء للفحص الذاتي للثدي ولإيجاد العلاقة بين ممارسات النساء وبعض المتغيرات وهي العمر والمستوى التعليمي ومستوى المعلومات المتعلقة بالفحص الذاتي للثدي والحالات المكتشفة من خلال الفحص.

أجريت دراسة وصفية تحليلية على 110 امرأة، بدأت الدراسة من 8 مايس 2009 ولغاية 29 من تشرين الثاني 2009 التعرف على ممارسات النساء للفحص الذاتي للثدي، وقد تضمنت إستبانة البحث على المعلومات الديموغرافية للنساء و 20 فقرة متعلقة بالمعلومات وممارسة النساء للفحص الذاتي للثدي. أشارت نتائج الدراسة أن معظم العينة كانت ضمن الفئة العمرية 31-40 سنة وغالبية النساء حاصلات على الدراسة الجامعية ومعظم نساء العينة يمتلكن معلومات تتعلق بالفحص الذاتي للثدي وأن النساء اللواتي يمارسن الفحص الذاتي للثدي قد اكتشفن العقد في الثدي وكانت 23% من العقد المكتشفة من خلال الفحص هي خبيثة وتبين من خلال الدراسة بوجود علاقة قوية ذات دلالة إحصائية بين ممارسات النساء للفحص الذاتي للثدي والعمر والمستوي التعليمي والمعلومات المتعلقة بالفحص الذاتي للثدي والحالات المكتشفة أثناء الفحص بمستوى معنوي 0,05.

Abstract:

The objective of this study is to identify the practices of women for Breast self examination, and to find out the relationship between women practices and some variables (Age, level of education, information concerning to BSE, and case discovered.

Descriptive analytical design of the study conducting on 110 woman's, starting from May 8th 2009 to the October 29th 2009, the questionnaire was composed of socio-demographic characteristics and 20 Items related to knowledge and practices of women regarding to BSE.

It was found that most of the study sample at 31-40 years old and the majority of them have college education, Majority of the study sample have information about BSE, most of the study sample who were doing BSE was discovered breast mass during examination and 23% of mass discovered during examination was malignant, and there were highly significant between women

practices of study sample for BSE and age, level of education, information concerning BSE and case discovered during examination at $P \leq 0.05$ level.

Keywords: Breast self- examination, women health, Breast cancer, women health promotion.

Introduction:

Breast self-examination (BSE) is an important component of any program for the early detection of breast cancer. Compared to clinical breast examination and mammography, BSE is relatively safe, low cost, offers monthly assessment, and does not require overcoming barriers associated with access to the medical care system (unless an abnormality is discovered)^[1].

BSE involves checking your breasts for lumps or changes while standing and lying in different positions and while looking at your breasts in a mirror to note any changes in their appearance. Once you know what your breasts normally look and feel like, any new lump or change in appearance should be evaluated by a health professional. Most breast problems or changes are not because of cancer ^[2].

All women are at risk for developing breast cancer. The older a woman is, the greater her chances of developing breast cancer. Approximately 77% of breast cancer cases occur in women over 50 years of age ^[3].

According to the American Cancer Society, about 1.3 million women will be diagnosed with breast cancer annually worldwide, and about 465,000 will die from the disease. Breast cancer death rates have been dropping steadily since 1990, according to the Society, because of earlier detection and better treatments^[4].

Women should know how their breasts normally look and feel. Doing regular breast self-exams is the best way to know this. They also help to notice any changes in the breasts. This is also true for women who have breast implants. A change can be a sign of a problem it is evident that BSE functions as an effective preventive health behavior. Only 19% to 40% of women practice BSE on a monthly basis, and there is no strong evidence that women who practice monthly BSE perform the procedure correctly ^[5].

Women ages 20 to 39 should have a clinical breast exam at least once every 3 years. Once a woman turns 40, she should have a clinical breast exam each year and a screening mammogram every 1 to 2 years. Breast self-exams are an option for women starting in their 20s ^[6].

Confidence in BSE performance, prior to BSE instruction, and finding some way to remember to do BSE were the factors most positively associated with frequent BSE practice. Women need to be given the facts about breast cancer and information about early detection methods and also need to be taught BSE in such a way that they feel confident in their BSE skills. The most effective way to teach BSE is to teach the woman on her own breasts. Since

BSE is a skill, an accurate assessment of the learners' BSE techniques is necessary to adequately evaluate BSE teaching methods ^[7].

Materials and Methods:

Descriptive analytical design of the study starting from May 8th 2009 to the October 29th 2009 in order to identify the practices of women for Breast self examination.

The present study was carried out in the Medical Technical Institute in Baghdad.

A non- probability (purposive) sample of 110 women works in Medical Technical Institute in Baghdad.

The questionnaire was composed of two parts and introductory page that invite the women who participate in the study.

Part I: Demographic-characteristics Sheet: It was consisted of 9 items which included: age, and level of education.

Part II: Included 20 Items related to Knowledge and practices of women s regarding to Breast self examination

The face validity of the instrument was established through a panel of (5) expert. They were (5) faculty members specialized in maternity. These experts had more than 10 years of experience in their Job with mean (20.72) year, and they were asked to review the questionnaire whether they agree or disagree with its content. (Standard deviation of expert =7. 9).

The researcher used the appropriate statistical methods in the data analysis which include the following:

1 - Descriptive data analysis: this approach was performed through the determination of: Frequencies (F), and Percentage (%).

2 - Inferential data analysis: Paired t- tests sample.

The results of the study revealed that most of the study sample were at 31-40 years old (39%) and the majority of the sample has College graduated, 72.7% of them have information about the Breast self examination, 34.5% of the women was doing the practices, and the 34.2% of the study sample who performing BSE was discovered breast mass during examination.

Results:

Most of the study sample at 31-40 years old of 39% and the majority of the sample has college graduated

Variables	Number	Percent
Age :		
- 20-30 yrs.	20	18.0
- 31- 40 yrs.	43	39.0
- 41-50 yrs.	39	35.5
- 51- 60 yrs.	8	7.5
Total	110	100%
Educational Level		
- Primary graduate	1	0.9
- Intermediate graduate	10	9.1
- Secondary graduate	2	1.8
- Diploma graduate	40	36.4
- College graduate	57	51.8
Total	110	100%

Table-1: Demographic-Characteristics of the study sample

Majority of the study sample has information about BSE were of (72.7%), 34.5% of them was performing test, and 39.5% of them starting for BSE at age 28-37 years old.

Variables	NO.	%
1- Information of women's related to BSE		
- Yes	80	72.7
- No	30	27.3
Total	110	100
2- Performing BSE		
- Yes	38	34.5
- No	72	65.5
Total	110	100
3- Age of performing for BSE		
- 18- 27 yrs.	12	31.5
- 28-37 yrs	15	39.5
- 38-47 yrs	11	29.0
Total	38	100

Table-2: Information of the study samples about BSE

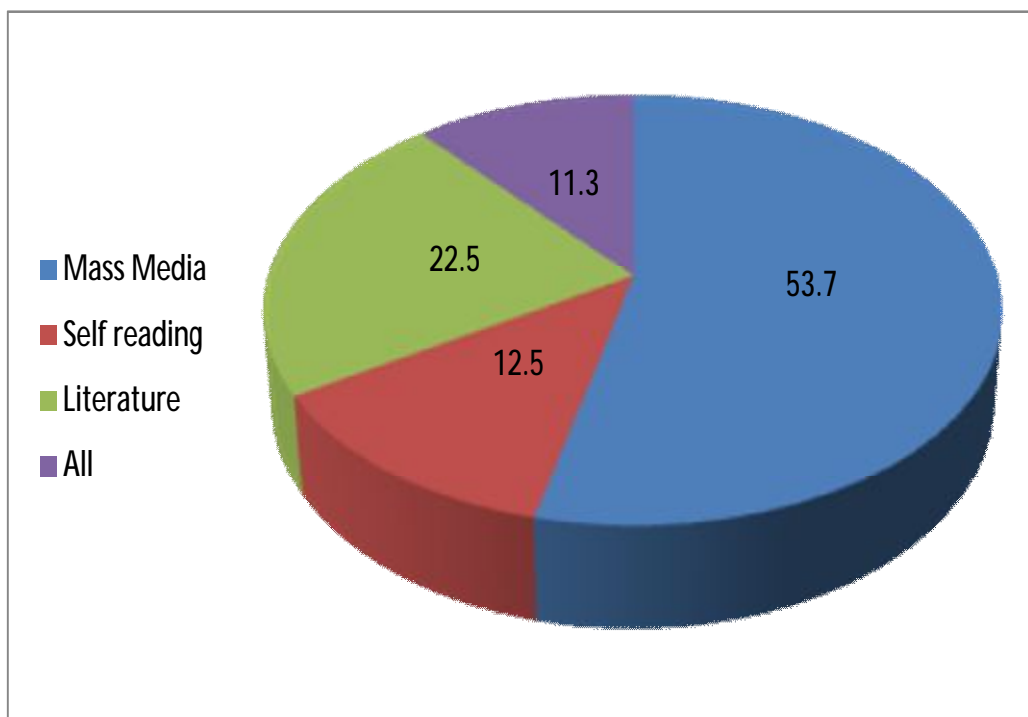


Figure-1: Source of Information for BSE

Figure-1 shows that the mass media is a main source for BSE information for the study sample were of 53.7%

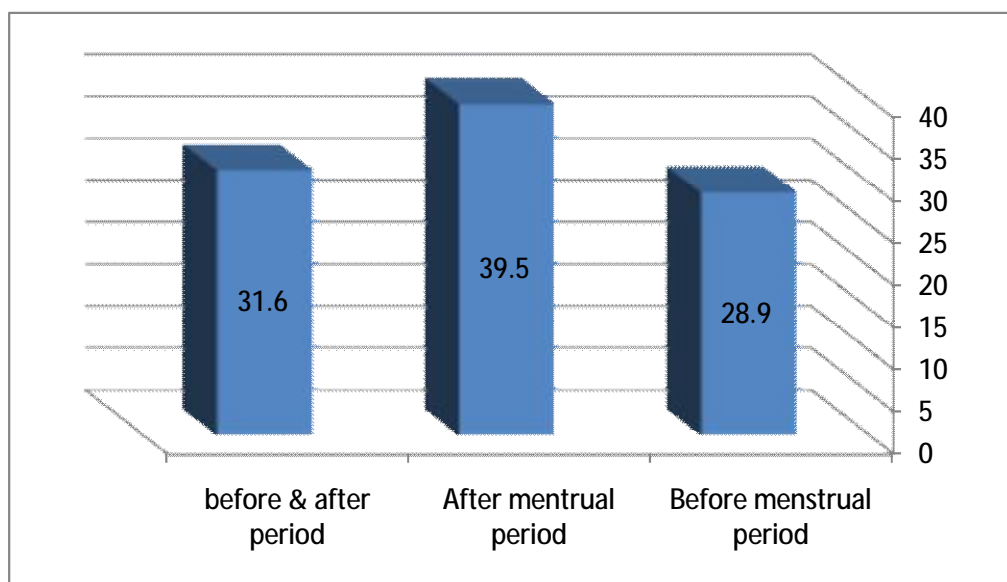


Figure-2: Time of women s Practices for BSE

Figure-2 shows that most of the women were doing the BSE after menstrual period was of (39.5 %).

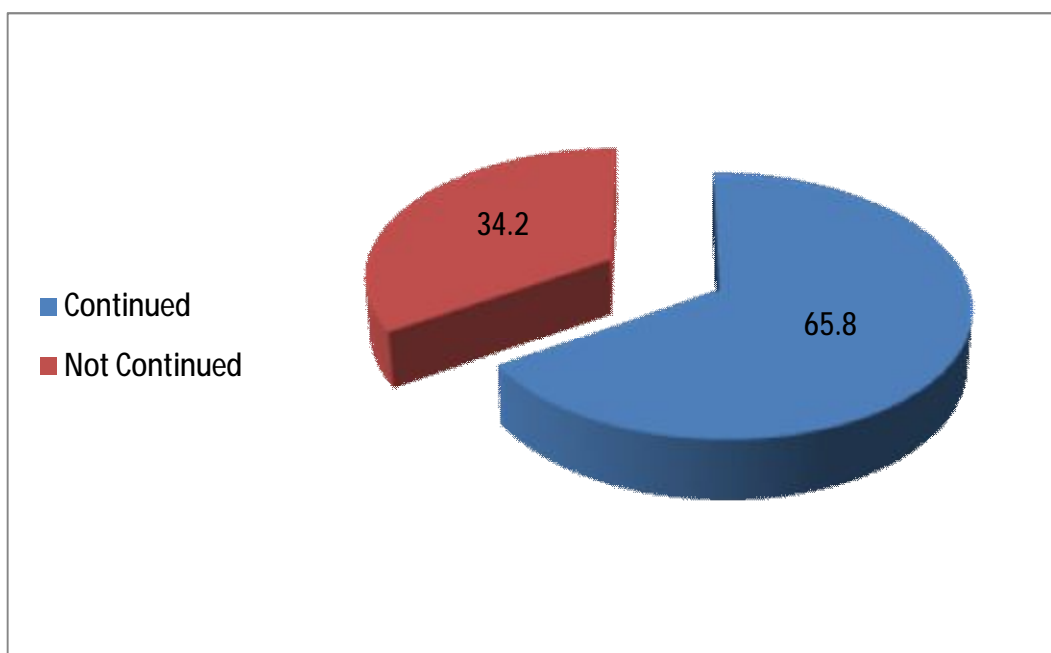


Figure-3: Continuity for BSE

Figure-3 shows that the 65.8% of the study sample was not continuing to BSE.

The findings revealed that 34.2% of the study sample who performing BSE was discovered breast mass during examination, and 23.0% of the mass discovered was Malignant

Detected masses during BSE	F	%
- Yes	13	34.2
- No	25	65.8
Total	38	100
Types of Mass	No.	%
- Malignant	3	23.0
- Benign	10	77.0
Total	13	100

Table-3: Mass discovered during BSE

The findings of table 4 indicated that there were highly significant between women's practices of study sample for BSE and age, level of education, information concerning to BSE and case discovered during examination at $P \leq 0.05$ level.

	Variables	t. test	Sig.	C.S. P≤0.05
1	Practices of BSE -Age of the study sample	7.05	0.00	H.S
2	Practices of BSE - Educational level	10.4	0.007	H.S
3	Practices of BSE- Information concerning to SBE	- 6.9	0.006	H.S
4	Practices of BSE - Case discovered	-7.8	0.00	H.S

Table-4: Statistical Differences between performing BSE and some variables for Study Sample.

The findings of table5 presented that there were highly significant between case discovered during examination and age of practices, Timing of practices, and the continuity of BSE at P≤0.05 level.

	Variables	t. test	Sig.	C.S. P≤0.05
1	Case discovered - Age of Practices	2.4	0.02	S.
2	Case discovered – Time of BSE Practices	2.8	0.003	H.S.
3	Case discovered - Continuity of BSE Practices	- 3.1	0.000	H.S

Table-5: Statistical Differences between Case discovered and some variables for Study Sample.

Discussion:

The findings of the present study indicated that most of the study sample at age 31-40 years old (39%), and the majority of them have College learning (table-1). Janz, et al., (1990) clarify that every woman should practice monthly breast self-exams at the age of 20 and begin a routine program of breast health, including scheduling physician performed clinical breast exams at least every three years. As a woman ages, her risk of breast cancer also increases. About 77% of women with breast cancer are over age 50 at the time of diagnosis ^[1].

Majority of the study sample has information about BSE were of (72.7%) (table-2), and the mass media is a main source for their information (figure-1), Ceber, et al., (2010) concluded in their study to determine the effectiveness of an educational program concerning knowledge of breast cancer, early detection practices, and health beliefs of nurses and midwives. They showed that

educational intervention had a positive impact on knowledge of breast cancer, on practices related to breast cancer, on early detection and on the health beliefs^[2].

Thirty four and a half percent of woman's was doing Breast Self Examination, (39.5%) of them starting for BSE at age 28-37 years old, (table-2), most of them was performing after menstrual periods were of (39.5 %), (figure-2), 65.8% was not continuing to BSE (figure-3). (IAFRC, 2008) stated that the best time to examine the breasts is usually one week after the menstrual period begins, when the breast tissue is least likely to be swollen or tender. If the menstrual cycle is irregular, or if stopped menstruating due to menopause or the removal of the uterus (hysterectomy), the performing of examination on a day of the month that's easy to remember. Women who are pregnant or breast-feeding can continue to examine their breasts every month. Breast-feeding mothers can examine their breasts after a feeding or after using a breast pump so that the breasts have as little milk as possible, making the examination easier and more comfortable^[10].

Thirty four percent of women's was discovered breast mass during examination, (23.0%) of mass discovered was malignant (Table 3) Montazeri, et al., (2008) presented in their study to determine the self-reported practice of breast self-examination in Iran, they shows that the most women (44%) perceived a painless mass as a breast cancer symptom. Overall, 61% of the respondents stated that they knew about breast cancer screening programs and most indicated that electronic media (television 34% and radio 14%) were their source of information. Only 17% of women said that 'they were conducting regular breast self-examination'. The main reason for women not doing breast self-examination was due to the fact that they did not know how to do it (64%). The findings indicated that performing breast self-examination is significantly related to: age, education, knowledge of breast cancer and knowledge about breast cancer screening programs at ($P \leq 0.05$).^[5]

The study presented that there were highly significant between women's practices for BSE and age, level of education, information concerning to BSE and case discovered during examination at $P \leq 0.05$ level. Tasci , and Usta, (2010) reported in their study on 252 woman to determine BSE knowledge and practice of middle-aged females their results revealed a highly significant relation was identified between increasing age in women and lack of BSE and improper practice of BSE steps ($P \leq 0.05$), and between a higher degree of education and presence of breast cancer in the family and knowledge and practice of BSE ($P \leq 0.05$)^[8].

The study presented that there were highly significant between case discovered during examination and age of the practices, time of practices, and the continuity of SBE at $P \leq 0.05$ level. Sreedharan, et al., (2010)^[9] Stated in their study on 154 nurses to explore the knowledge and practices for BSE, the age ranged from 20 to 59 years, with a mean age of 24.1 years. 96.1% of the

participants were aware of the ideal age to start BSE, while 87.7% respondents knew that women with regular menstruation should perform BSE monthly on a particular day, preferably on the fifth or seventh day after menstruation. With regard to BSE technique, 68.8% knew that both inspection and palpation were the ideal methods to detect any change in the breast. A high proportion, 84.4% of the respondents, reported performing BSE.

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