Abstract

Female breast has been regarded as a significant component of feminine beauty; sexuality and motherhood. Breast tissues undergo abnormal changes ranging from benign to malignant. Breast self examination enables women to detect changes in her breast and is useful in the early detection of breast cancer.

Need for the study: Breast cancer is one of the largest killer diseases next to the heart disease. Despite an increase in women literacy rate and knowledge about breast cancer and embarrassment, there are certain barriers to practice breast self examination which may include lack of time, unpleasant procedure, lack of privacy, fear of discovery of a lump and unfavorable attitude towards breast self examination.

Statement of the Problem: “A study to assess the knowledge attitude and practice on breast self examination among the students in an urban Hospital, Coimbatore”

Objectives: To assess the knowledge, attitude and practice on Breast Self Examination.

Design and Sampling: Design was descriptive. Students who were under reproductive age were selected for the study.

Instruments: Consisted of demographic proforma, questionnaire to assess knowledge, attitude and practice on breast self examination. Data was collected and analyzed using descriptive statistics. Discussion: Among 60 samples 12% had excellent knowledge, 20% of them had adequate knowledge and remaining 68.33% had inadequate knowledge. Regarding attitude 9% had excellent attitude, 23% had adequate attitude and remaining 68% had inadequate attitude.15% had excellent practice, 13.33% had adequate practice and remaining 71.6% had inadequate practice on BSE.

Conclusion: As students lacked in knowledge, BSE was demonstrated on a module and return demonstration was carried away to enhance the knowledge, attitude and practice on breast self examination.

Keywords: Breast self examination

Introduction

Feminine appearance is said to be enormously important to the self image of every women. Female breast has been regarded as a significant component of feminine beauty, sexuality and motherhood. Breasts are a pair of mammary glands that develop in response to secretions from the hypothalamus, pituitary gland and ovaries. Breast tissues undergo abnormal changes ranging from benign to malignant changes. Breast cancer is one of the largest killer diseases next to the heart disease. Saxena (2006).

As etiology of breast cancer is unknown; primary prevention is not yet possible, on the contrary there is statistical evidence to show that available therapeutic method can cure breast cancer in its earliest stage if examination is practiced monthly, which is a valuable health practice. Breast self examination enables women to detect changes in her breast which helps to pick up the abnormalities that may be an early indication of breast cancer (Marlik 1992).
Need for the study

Breast cancer is one of the commonest causes of death in many developed countries among the middle aged women. It affects 5, 19,000 population each year worldwide and about 9,000 women are diagnosed every year with the disease. More than one half of these cases are in industrialized countries, about 2, 20,000 in Europe and about 1, 80,000 in North America. Mortality rates from breast cancer have increased during the past 60 years in every country. (Park 2011). Cancer is a disease characterized by uncontrolled growth and spread of abnormal cells. It is one among three leading cause of cancer death in women between ages of 14-54. One of the eight women will develop breast cancer in her life time.

Progress of improvement of survival with present therapy depends upon the early diagnosis. BSE is inexpensive and safe and could conceivably be done nearly by all adult women if they were adequately motivated and trained (Huguley and brown 1981). Early diagnosis and interventions is the corner stone’s of treatment for breast cancer. Despite an increase in women literacy rate and knowledge about breast cancer and embarrassment, there are certain barriers to practice breast self-examination which may include lack of time, unpleasant procedure, lack of privacy, fear of discovery of a lump and unfavorable attitude towards breast self examination.

Statement of the problem

A study to assess the Knowledge Attitude and Practice on breast self examination among the Allied Health Students in KMCH college, Coimbatore.

Objective: To assess the knowledge, Attitude and Practice on Breast Self Examination.

Assumption: Adequate knowledge and practice on BSE will help in early detection and prevention of breast cancer and will help in adoption of positive attitude towards health practices.

Review of literature

Rosmawathi, (2004) conducted a cross sectional study to determine the knowledge, attitude and practice towards breast self examination amongst aged 15 years and above women. They found that breast care awareness and focusing on recognized barriers by health care professional with an involvement of spouses, family and community would have a substantial beneficial impact on BSE practice. Kayode et al., (2005) conducted a descriptive cross sectional study to determine the level of knowledge and practice of BSE among 406 secondary school female teachers. It was found out that 95.6 percent of respondents were aware of BSE but practice was found to be low 54.8 %. They suggested that the public awareness on the importance of BSE, should promote breast self examination during their contacts with females.

Materials and Methods

A descriptive cross sectional survey design was implemented. 60 females who were students of allied health science department at KMCH were selected using convenience sampling technique. They were of reproductive age group between 18 - 20 years and were willing to participate in the study were included, while the students with existing breast complaints were excluded from the study. Development of tool for data collection: Knowledge, attitude and practice were measured using a researcher developed questionnaire. Tool was translated from English to the local language Tamil; back translation was done to establish language validity. It was pretested on five students, after which, reliability was established using split half technique, which yielded an r = 0.90. The questionnaire consisted 25 items with three sections. First section had 15 questions which assessed knowledge. Section 2 consisted of 12 items and measured the attitude on BSE. Section 3 had seven items to assess regarding practice of BSE.

Data collection and analysis

The investigator introduced herself to each subject and explained the purpose of doing research. They were assured anonymity and confidentiality. Informed consent was taken. Self administered questionnaire was distributed and collected after completion.

Data Analysis and Interpretation

This chapter deals with the analysis and interpretation of data collected to evaluate the achievement of the objectives of the study.

Section 1: Assessment of mean for Knowledge, Attitude and Practice.

Distribution of percentage of samples according to their knowledge about BSE

Figure 1: Represent the distribution of percentage of samples according to their knowledge; among that 12% had excellent knowledge, 20% of them have adequate knowledge and remaining 68.33% had inadequate knowledge.
Distribution of percentage of samples according to their attitude about BSE

Figure 2: Represents the distribution of samples according to their attitude; among that 9% had excellent attitude, 23% had adequate attitude and remaining 68% had inadequate attitude.

Table 1: Distribution of percentage about the practice level on BSE

| S. No | Practice | No of students(n) | Percentage(%) |
|-------|----------|-------------------|----------------|
| 1     | 15-21    | 9                 | 15%            |
| 2     | Aug-14   | 8                 | 13.33%         |
| 3     | 0-7      | 43                | 71.60%         |

Table 1 represents that distribution of samples according to their practice about 15% had excellent practice, 13.33% had adequate practice and remaining 71.6% had inadequate practice.

Analysis and Interpretation

Among the 60 participants in the study only 11.7% students had excellent knowledge and about 20% had adequate knowledge on breast self examination. Remaining 68.3% were having inadequate knowledge. Despite the inadequate knowledge their attitude and practice also showed inadequacy. The persons having the inadequate attitude and the practice were 68.3% and 71.7% respectively. Structured teaching module was prepared to enhance the knowledge, attitude and practice on breast self examination.

Limitations

- The study was confined to 60 class IV workers from selected regional settings of Coimbatore.
- Standardized tool could not be located by the investigator, so developed the tool for the study.
- Non-probability purposive sampling limits the generalization of findings.

Recommendation

- The study can be replicated within larger sample

| ITEMS | STRONGLY AGREE [3] | AGREE [2] | DISAGREE [1] | STRONGLY DISAGREE [0] |
|-------|---------------------|-----------|--------------|-----------------------|
| 1.    | BSE should be done every 2 months |           |              |                       |
| 2.    | BSE must be done between day 7 until day 10 after menses | |              |                       |
| 3.    | BSE should be done in front of the mirror |           |              |                       |
| 4.    | Undress until the waist when doing the BSE |           |              |                       |
| 5.    | Hands should be raised up alternately above the head when doing the BSE infront of the mirror |           |              |                       |
| 6.    | BSE should be done from the front view only |           |              |                       |
| 7.    | BSE can be done in a supine position |           |              |                       |
| 8.    | Palpate in the right breast while left-sided lying when doing the BSE |           |              |                       |
| 9.    | Use finger pulps to examine any lumps or thickening of the skin |           |              |                       |
| 10.   | BSE can be done using the vertical strip and circular technique |           |              |                       |
| 11.   | Need to press on the nipple to check any unusual discharge |           |              |                       |
| 12.   | BSE includes arm-pit examination to check for any lump |           |              |                       |
| 13.   | Need to observe any unusual change in the shape and size of breast |           |              |                       |
| 14.   | Retraction of the nipple is a warning sign that should be observed |           |              |                       |
| 15.   | Lump is the early sign for cancer |           |              |                       |

Total Knowledge Score
Attitude Questions

1. Doing BSE makes me feel so funny *
2. BSE will be embarrassing to me *
3. Doing BSE is wasting time *
4. Doing BSE makes me feel unpleasant *
5. If there is a lump, I prefer to get treatment from a traditional healer *
6. Feel uncomfortable, can’t do BSE once in a month *
7. All women should do BSE
8. I really care about my breasts
9. I am not afraid to think about the breast cancer *
10. Avoid BSE because I worry about having breast cancer *
11. Interested in doing BSE
12. Always search for information regarding BSE from the internet, magazines, and newspaper
13. Discuss with my friends about BSE

Total Attitude Score

Practice questions:

1. Do BSE once a month
2. Avoid learning the correct method of BSE *
3. Parents or partner always advise to do BSE
4. Advise friends to do BSE
5. Discuss the importance of BSE with friends
6. Have been taught on BSE by health staff
7. If notice any breast abnormality, directly go to public health care

Total Practice Score

**Likert Scale to Measure the Knowledge, Attitude and Practice on Breast Self Examination**

**Steps In Breast Self-Examination**
Steps

Hands at Side
- Compare for symmetry look for changes in shape and colour.
- Check for dimpling skin changes and nipple changes.

Hands over Hand
- Check front and check side view for symmetry and dimpling.

Bend Forward
- Check for symmetry nipple direction and general appearance.

Lie Down
- Towel under right shoulder raise the right arm above the hand.
- Examine area from under arm to lower bra line across to breast
- Bone up to collar bone back to nipple.

Nipple Squeezing
- With the thumb and little finger squeeze nipple and observe for any discharge from the nipple.
- Use the pads of the three middle fingers of the left hand hold hand on towel position more fingers in dime size circles. Feel and observe for other breast also.

Conclusion

The study was conducted to assess the knowledge, attitude and practice on breast self examination among the female students at KMCH Institute of Allied health sciences. The study showed that the majority of the students were having inadequate Knowledge, Attitude and Practice regarding the breast self examination.

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