Introduction

Cervical cancer is one of the most common cancers in women, especially in developing countries, including Asia and South America [1]. The mortality rate and disability due to cancer worldwide this year is 235,000 women. In this case, most of the deaths are from Asian countries and Mexico [2]. Each year, nearly 10,000 American women are diagnosed with cervical cancer and More than 3,700 patients die. Many science centers consider doing the regular pap smear as the best solution for controlling and reducing mortality from cervical cancer [3]. Annually, approximately 17.3 percent in every 100,000 women regardless of age and 27% in women older than 20 years per 100,000 women is reported the invasive cervical carcinoma [4-5]. One of the main reasons women deaths approximately 500,000 people annually is the cervical cancer [6]. According to the survey, one third of all cancers can be prevented. Over malignancies in women, diagnostic methods are capable of detecting premalignant conditions, may play an important role in preventing, one of these methods is the pap smear. If sampling is done correctly and with the proper tool, the most important test is to detect changes in cervical cells. In Iran, cancer diagnosis and treatment are attempting to determine on clinical symptoms and pap smear, the rate of sensitivity and accuracy of these methods were 45 and 65 percent. [7]. The various studies have shown that to perform this test decrease incidence and mortality of cervical cancer by up to 90 percent effectively [8]. American College of Obstetrics and Gynecology recommends that women who are active sexually (65-18 ages) should do the pap.
smear once a year, and if they had three times normal pap smear, the test should be repeated every three years [9]. Augurto and et al. in 2002 concluded that 60-20 percent mortality from the cervical cancer can be prevented by screening programs [10]. The World Health Organization recommended by 2010, about 97 percent of married women aged over 18 years and women who start their sexual activity before age 18, must to do pap smear once a year, and 90% of women must have a pap smear test every three years [11].

According to a study in the U.S. Disease Control Center (CDC), one in five American women have not done pap smear, and 50 percent of these women have reported they are unaware of how to do pap smear, 88% of people have announced that they have not done it annually due to lack of medical advice [12]. A study by coughlin on nearly 14,000 women in the U.S. in 2000 showed that About 83 percent of women at least once in three years to do pap smear, And 17% have not had a pap smear even during his lifetime [13]. Given the importance of cervical cancer screening based on the policies of the Ministry of Health and Medical Education, pap smear test for women in the age group 65-20 years admitted is done for free. Pap smear is one of the easiest and least painful and least-cost of medical tests, with regard to the conditions and features, a large number of women do not welcome the cervical screening programs. The aim of this study was to investigate the extent and causes of cervical cancer screening for women in Ardabil.

Materials and Methods

This cross-sectional study was conducted among women referred to health centers of Ardabil for one month multi-stage sampling in 2012, characteristics of subjects were being married, being of Iranian descent, having the physical and mental health, and having the ability to read and write, the data collection tool was the researcher made questionnaire, the scientific validity of the questionnaire was confirmed by content validity and so reliability of the method obtained for determining the retest interval in two weeks 0.93 and 0.95. The number of samples used in the study by Cochran sample size was 300. Information individually through their responses to the questionnaires was collected. After completing the sample and data was taken to the software version 18, also the descriptive and inferential statistics were used for data analysis.

Results

Total of subjects were 300 in the study aged 33.5 ± 8.74 years. All of them were married. 37.7% of the total sample were employed (n = 113), and 62.3% was non-employee (n=187), 20.3% of those under diploma (n = 61), 32.7% of high school graduates (n=98) and 47% higher diploma (n = 141). 46% of the total sample, her husband occupation (n=138) employed, 50% free job (n=151) and 3.7% of husbands were unemployed (n = 11). 68.7% of the population over the wife’s education were high diploma (n=206), 29% of school education (n = 87) and 2.3 % illiterate (n = 7), respectively.

According to Table 1, the results of this study showed that the rate of cervical cancer screening tests among women was 48 percent. The role of knowledge as factors of pap smear screening test was statistically significant (Table 1) (P<0.05).

The statistical results in Table 2 and 3 indicate that, at a significance level of 0.05 between diseases of the uterus, there is a significant relationship between number of pregnancies and pap smear. (Table 2 and 3) (p <0.0 5)

In the study, of the social and family factors on women’s education and employment, occupation and level of education was no significant relationship with pap smears. However, between ethnic history of cancer and pap smear showed a significant relationship (Table 4) (p <0.0 5).

Discussion

Our findings showed that the mean age of the sample

| Table 1. Distribution of Studied Women than Cervical Cancer Screening Tests and Women’s Knowledge and Attitudes Toward the Test |
| Percent | Number | Cervical screening history |
| 52% | 156 | No |
| 48% | 144 | Yes |
| 100% | 300 | Total |
| $\chi^2 = 2.982$ | Sig = 0.003 | Result of Test $\chi^2$ |

| Table 2. Distribution of Women Based on Pap Smear Screening Test and Uterine Disease |
| Percent | Number | Cervical screening history |
| 79% | 237 | No |
| 21% | 63 | Yes |
| 100% | 300 | Total |
| $\chi^2 = 4.581$ | Sig = 0.000 | Result of Test $\chi^2$ |

| Table 3. Distribution of Women Based on Number of Pregnancies and Cervical Cancer Screening Tests |
| Percent | Number | Number of pregnancies |
| 7.13% | 41 | Not pregnant. |
| 45% | 135 | Less than twice |
| 3.41% | 124 | More than twice |
| 100% | 300 | The total |
| $\chi^2 = 0.258$ | Sig = 0.000 | Result of Test $\chi^2$ |

| Table 4. Distribution of Women According to Ethnic history of Cancer and Pap Smear |
| Percent | Number | Ethnic history of cancer |
| 86% | 258 | No |
| 14% | 42 | Yes |
| 100% | 300 | Total |
| $\chi^2 = 0.175$ | Sig = 0.01 | Result of Test $\chi^2$ |
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