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Assess the Knowledge of Breast Self Examination Due to Cancer, and to Find Out Relationship between Socio Demographic Variables

Mrs. R. Manohari

Principal, Saraswathi College of Nursing, Hapur, Uttar Pradesh, India

ABSTRACT

Carcinoma of the breast is an important public health problem and studies have reported low levels of awareness and practice of breast self examination as an important method of prevention. Breast self examination is a cost-effective method of early detection of cancer of the breast especially in resource-poor countries.

Breast cancer is the most common cause of death among women worldwide. Breast self-exam (BSE) is considered an important public health procedure; primary prevention should be given the highest priority in the fight against cancer.

Cancer is considered the second leading cause of death in developed countries there was some 6.2 million cancer related deaths, accounting for 12% of all deaths globally .Patients perception toward this disease and preference concerning the types and aims of their treatment vary. They may lose hopes and become devastated and crippled or even die earlier, if told about the diagnosis

I assessed knowledge and practice of breast-self examination (BSE) among females in selected areas of hapur, District

The study aimed to assess knowledge of females regarding BSE and to find the relationship between socio-demographic variables and breast self-exam.

One hundred females in selected areas of Hapur were selected to participate in the study. The questionnaire was designed for data collection. The data collection was from 1st July to 31th July, 2016.

The questionnaire consists of two parts related to socio demographic characteristics for the study sample and women's knowledge about breast self exam. The study revealed that female's knowledge about breast self- exam was reported poorly, and there were no significant differences among the study sample according to their age, marital status, and economic status.

The study recommended emphasizing the health workers for implementation of health education programmes among female employees about awareness of breast cancer, knowledge and prevention of BSE.

KEYWORDS: *knowledge, practice, breast self-exam; Cancer; urban, female, Hapur*

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INTRODUCTION

How is the Breast Designed the breasts sit on the chest muscles that cover the ribs. Each breast is made of 15 to 20 lobes. Lobes contain many smaller lobules. Lobules contain groups of tiny glands that can produce milk. Milk flows from the lobules through thin tubes called ducts to the nipple. The nipple is in the center of a dark area of skin called the areola. Fat fills the spaces between the lobules and ducts.

Cancer is a dreadful disease.80% to 90% of all cancers arethe result of the things we doto ourselves. Among womenbreast cancer is the secondmost common cancer. Breastcancer is the most common malignant condition of breast.

Breast cancer is the most common malignant condition of breast. Malignant means cells that grow harmfully and uncontrollably. Hormonal factors like when the cells come in contact with estrogen, Genetic factors like gene mutation Starting menopause at a later age, Having no children or having a first child after age 30, Women with previous history of breast cancer, Not breastfeeding, Using birth control pills, Being overweight after menopause, Having first menstruation before age 12 or entering menopause after age 55. Drinking alcohol (more than one drink a day) lack of exercise, New lump in the breast or underarm, Thickening or swelling of part of the breast, Mass which is hard with irregular borders, Irritation or dimpling of breast skin, Redness or flaky skin in the nipple area or breast, Pulling in of the nipple or pain in the nipple area, Nipple discharge other than breast milk, Any change in the size or the shape of the breast

RESULTS

Table1. Demographic characteristics of the study sample

Variable	frequency	Percentage
Age		
18-20 year	30	30%
21- 23year	10	10%
24-26 year	60	60%
Social status Single	56	56%
Marred	44	44%
Economic status High	48	48%
Medium	28	28%
Low	24	24%

It shows that the majority of female were between 18-20 years old, single and from low economic status.

Table2. Differences between mean of scores and theoretical mean

Variable	No.	Mean of score	Std. Dev.	Theoretical Mean	t-value	Sig.
Knowledge	100	5.8	1.817	9	9.089	0.001

No.=Number; Sig.= Significance; Std. Dev.= Standard deviation

Table (2) shows that the knowledge of female toward breast self-examination was poor.

Table3. Differences in knowledge according to age

Source of variance	Sum of Squares	df	Mean Square	F-value	P-value
Between Groups	27.858	4	12.8	1.813	0.085
Within Groups	361.122	44	8.1		
Total	388.980	48			

df= Degree of freedom; F-value= ; P-value= Level of probability

Table (3) shows that there were no significant differences among female students about breast self-exam knowledge according to age.

Table4. Differences in knowledge according to marital status

Socio status	No.	Mean	Sd.	t-value	P-value
Single	8	4.6	1.282	1.089	0.128
Marred	92	6.4	2.763		

df= Degree of freedom; F-value= ; P-value= Level of probability

Table (4) displays that there was no significant differences between two groups about knowledge of breast self exam according to marital status.

Table.5. Differences in knowledge according to economic status

Economic status	No.	Mean	Sd.	t-value	P-value
High	46	6.7	2.5843	1.064	0.287
Medium	34	5.2	2.6489		
Low	20	4.6	2.8021		

df= Degree of freedom; F-value= ; P-value= Level of probability

Table (5) displays as well that there was no significant differences between two groups about knowledge of breast self exam according to economic status.

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