

Knowledge Of Cervical Cancer And Pap Smear Among Indian Women

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Abstract: Introduction: Cancer of the uterine cervix is an important cause of morbidity and mortality among women worldwide and a leading public health problem. Currently cervical cancer is potentially curable, but still continues to be the second most frequent cause of death by neoplasia in women and the survival rate in 5 years varies from 44 to 66%. Method: This study was carried out during the period of January 2012 to June 2012 in one of the tertiary care teaching hospital. In depth interview of 100 women were taken before and after awareness program in the form of lecture on cervical cancer- the occurrence and prevention. The data before and after were compared and analyzed. Results: most of the patients are in 4th decade of life (59 %). The educational level of respondents ranged from primary to tertiary level. Only a few patients (20 %) were aware that early detection and treatment regarding cervical cancer. Risk factors for cervical cancer were known by less than 35 % of the patients. Only 8 % of the respondents had heard of HPV or knew about its association with cervical cancer. Twenty-seven patients asserted that they had knowledge of the Pap smear test. Conclusion: By improving their knowledge and awareness regarding cervical cancer, we are able to reduce the incidence. [Parikh U NJIRM 2016; 7(5):60-63]

Key words: CERVICAL CANCER, PAP SMEAR, HPV INFECTION.

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Introduction: Cancer of the uterine cervix is an important cause of morbidity and mortality among women worldwide and a leading public health problem. It is the second most common cancer in women, but the most common in developing countries.¹

In developed countries, breast cancer is the most common in women, whereas cancer cervix occupies the top rank among cancer in women in developing countries.² Globally, cervical cancer is one of the most common cancers in women, with an estimate of 440,000 new cases annually, and 80% of these cases occurring in developing and undeveloped countries.³ According to the World Health Organization, cervical cancer is the second most common type of cancer among females, and was responsible for over 250,000 deaths in 2005.⁴ In many countries it is the most common cancer among women while in some countries it is down at 10th place. About 86% of the cases occur in developing countries. The variation in incidence rate between countries is striking. Socioeconomic and cultural aspects are a factor in this unequal distribution of this neoplasia around the world. However, a preponderant factor in the areas of low incidence is the level of information from the feminine population regarding the disease and the continual screening of this population. On the other hand, in developing countries, the low level of awareness of the problem, the lack of interest of the sanitary authorities, and the use of opportunist screening favours the continuance of this

unfavourable situation and indicates the urgent need for the public health authorities to find a solution.⁴

In Africa the age standardized incidence rate is 25 per 100,000 per year; in some countries on that continent it is more than double that rate. In India the rate is 27 while it is 5.7 in USA and 3.7 in Finland.⁵ Cervical cytology is an effective means of screening for cervical premalignant and malignant conditions. An important number of risk factors for cervical carcinoma have been identified and can therefore be controlled, avoiding the progress of pre-neoplastic lesions. These factors are early start to sexual activity, multiple partners, and the number of partners a man has, infection by oncogenics HPV, precarious genital hygiene, and smoking. Papanicolaou stained cervical smears (Pap smear) is a simple and highly effective procedure for detection of premalignant cervical disease.⁶ Two types of specimen are available for cervicovaginal cytology: smear for the conventional Pap (CP) and liquid-based preparation (LBP), which emerged as an alternative sampling and preparation method in the 1990s. Current guidelines recommend that women should have a Pap test every 3 years beginning at age 21. These guidelines further recommend that women ages 30 to 65 should have HPV and Pap co-testing every 5 years or a Pap test alone every 3 years. Women with certain risk factors may need to have more frequent screening or to continue screening beyond age 65. Women who have received the HPV vaccine still need regular cervical screening.¹⁰

Currently cervical cancer is potentially curable, but still continues to be the second most frequent cause of death by neoplasia in women and the survival rate in 5 years varies from 44 to 66%.⁷

Method: This study was carried out in one of the tertiary care teaching hospital. In depth interview of 100 women who attend the Gynecology department of our hospital, were taken during the period of January 2012 to June 2012. The semi structured interview guide(Performa) is used for data collection and consistency of data. The interview was conducted in Gujarati- the local language. Questions regarding demographic characteristics, knowledge, attitudes and beliefs towards the cancer in general, and about cervical cancer screening and barriers to screening were asked during the interview. Knowledge regarding Importance of Pap smear and cervical cancer etiology is also checked. After collection of data, the data was analyzed using Microsoft excel.

After collection of data the awareness program in the form of lecture on cervical cancer- the occurrence and prevention was taken. And the same data is collected after that seminar. The data before and after the lecture were compared and analyzed.

Table I: Demographic Characteristics Of Patients

Demographic characteristics	No. of patients	Percentage (%)
Hindu	60	60
Muslims	20	20
Sindhis	09	09
Panjabi	08	08
Other ethnic groups	03	03
Total	100	100

Table II: Age Of Patients

Age Group (Years)	No. of patients	Percentage (%)
10-19	01	01
20-29	11	11
30-39	59	59
40-49	17	17
50-59	09	09
60-69	03	03
Total	100	100

Table III : Marital Status Of The Patients

Marital status	No. of patients	Percentage (%)
Single	15	15
Married	80	80
Widow	05	05
Total	100	100

Table IV Knowledge Regarding Cervical Cancer

	Before Lecture		After Lecture	
	No. of patients	Percentage (%)	No. of patients	Percentage (%)
Knowledge regarding Symptoms				
Vaginal discharge	10	10	80	80
Dyspareunia	08	08	70	70
Intermittent Vaginal Bleeding	25	25	85	85
Knowledge regarding Etiological factors				
Early Sexual intercourse	34	34	98	98
Early Marriage	26	26	92	92
Multiple sexual partners	30	30	90	90
Children of multiple sexual partner parents	10	10	86	86
Relation to HPV infection	08	08	65	65
Knowledge of Pap smear as a screening test	27	27	92	92
Premalignant conditions of cervical cancer	12	12	76	76
Knowledge of cervical cancer and treatment	20	20	82	82

Results: The present study was carried out at one of the tertiary care teaching hospital during the months of January 2012 to June 2012. Result of the present study was as follows. Respondents comprised patients from different community in India. (Table I)

The youngest patient was 18 year old girl while the eldest women was 66-year-old lady, (Table II) with most of the patients are in 4th decade of life (59 %). The educational level of respondents ranged from primary to tertiary level, but the majority of the

patients had primary education. The majority of the patients were housewives.

Most of the women in this study had poor knowledge and awareness of cervical cancer. When they had been asked about cervical cancer, they often referred their knowledge to cancer in general. Most had them heard about cervical cancer, but awareness regarding prevention is poor.

After collection of data the awareness program in the form of lecture on cervical cancer- the occurrence and prevention was taken. And the same data is collected after that seminar. The data before and after were compared.(Table IV)Only a few patients (20 %) were aware that early detection and treatment regarding cervical cancer and knew that pre malignant lesion detection can save lives. The others lacked true information regarding cervical cancer. Many of the patients regarded cervical cancer as one of the sexually-transmitted disease.

Risk factors for cervical cancer were known by less than 35 % of the patients. Risk factors for cervical cancer that included being sexually active, having multiple sexual partners were known by many patients. Many patients give importance to inheritance, but only 8 % of the respondents had heard of HPV or knew about its association with cervical cancer. Many patients believed that failure to maintain hygiene or "dirtiness" was a factor for cervical cancer development. Therefore, they give importance to keep the area clean, maintain proper hygiene especially during menstruation and washing away the partner's semen after sexual intercourse. Twenty-seven patients asserted that they had knowledge of the Pap smear test. But their knowledge regarding existence of the Pap smear, purpose of the test and follow up examination was poor. Many of the patients believed that Pap smear test was used to detect the cervical cancer, but thought that the test screens for sexually transmitted infections, the human immunodeficiency virus or any growth in the uterus. Many patients believed that the Pap smear is a diagnostic test used to detect existing cervical cancer and other reproductive health problems. Still the knowledge regarding treatment, premalignant lesion diagnosis and follow up pap test is poor in our study group. This all is due to lack of information regarding pap smear by health care provider.

Discussion: The present study was carried out at one of the largest tertiary care teaching hospital during the months of January 2012 to June 2012 with the aim to know the knowledge regarding pap smear and cervical cancer in the society. The similar study was carried out by Wong et. Al.³ during the present study, different ethnical patients was selected to know the knowledge regarding cervical cancer. This is because India comprises of different ethnical groups and so the representative sample is selected.

During the present study different age group patients was selected. All the patients who come to gynecological OPD of our hospital was selected to study the knowledge. Maximum numbers of the patients are in 4th decade of life (59 %). Our is government hospital where the patients are usually from poor socio-economic class and so they are less educated. Over and above this their knowledge regarding cervical cancer was poor. With the help of this study we try to educate them regarding risk factors for cervical cancer and their preventive measures by regular Pap smear test.

The importance of detecting marital status is to know who have more knowledge regarding cervical cancer and preventive measures, and according to that some activities in the form of CME can be carried out at large scale. The same questionnaire is asked before training and after training (Lecture) and it suggests improvement in the knowledge regarding cervical cancer, its risk factors and preventive measures. (Chart III) As cervical smears is easily treatable condition if diagnosed early and it is possible by an experienced person to take pap smear so as to avoid an inadequate material and with the help of this study we try to educate the people regarding pap smear. Because of the phases that precede the lesion in the natural progress of invasive cervical cancer, and because they can be easily discovered and treated, the disease is well suited to screening programs.⁴ It is now recommended that all patients with abnormal cytology should undergo further investigations.⁴ Although cytological screening programs using Pap smears have dramatically reduced cervical cancer incidence and mortality in developed nations, single Pap tests suffer from suboptimal sensitivity, limited reproducibility, and many equivocal results.⁷ The knowledge regarding HPV infection and its association with cervical cancer is poor, although natural history studies have demonstrated that most HPV infections

produce only transient minor lesions,⁸ untreated infections may persist and progress to cervical intraepithelial neoplasia (CIN) 3, a cancer precursor. With the help of this study we try to educate the people regarding HPV infection and also early detection of carcinoma cervix and due to this cervical cancer is curable and the 5-year survival rate is as high as 92%.⁵ The idea behind the PAP-test is that cellular changes that may develop into cancer are detected at such an early stage that they can be removed through a simple operation, thus preventing the cancer.⁵ Thus, Papanicolaou (Pap) screening has spread, it has become common to detect pre-invasive lesions rather than invasive cancer, and so, the incidence rates have been fallen steadily.⁹ Evidence for the importance of the PAP-test can be found in statistics from many countries where the PAP-test is used in systematic, comprehensive screening programs.⁵ A detected high grade premalignant lesion typically leads to the woman being offered a colposcopy and, if a lesion is confirmed, an operation to remove it. The detection of a low-grade lesion may lead to a follow-up smear being taken after a shorter time interval than the normal 2-3 years. In principle, the screening task is straight forward.⁵

Conclusion: The knowledge regarding Pap smear should be increase in the society to prevent the cervical cancer and its early detection. Because of the phases that precede the lesion in the natural progress of invasive cervical cancer, and because they can be easily discovered and treated, the disease is well suited to screening programs. The Papanicolaou test is an established method for examining the cells collected from the cervix to determine whether they show signs of pre-neoplastic differentiation.

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