

# Knowledge Regarding Cervical Cancer Among Women at Selected Setting

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## Abstract

**Introduction:** Cervical cancer is a cancer arising from the cervix. It due to an abnormal growth of cells that have the ability to invade or spread to the other parts of the body. A descriptive study was conducted to assess the knowledge regarding cervical cancer among women. **Methods:** The research approach used in this study was quantitative approach. The research design was non experimental descriptive research design and 50 samples were selected by non probability sampling technique. The study setting was Nandhivaram village, Guduvancheri. **Results:** the study results showed that the knowledge level among women were inadequate knowledge (54%), moderate knowledge (40%), adequate knowledge (6%) regarding cervical cancer.

**Keywords:** Cervical cancer; Knowledge; Women.

## Introduction

Cervical cancer is the second leading causes for women death in the world. Cervical cancer is arising from the cervix. It is due to abnormal growth of cells that have the ability to invade or spread to other parts of the body. The current scenario of cervical cancer is fifty lakhs of death due to cervical cancer and it leads to increase of women mortality rate.<sup>1</sup>

Human papilloma virus (HPV) is a very common virus which is the most important etiological agent in the development of cervical cancer and pre cancer. HPV is also implicated in other cancers, including head and neck cancer, vulval, penile and anal cancer.<sup>2</sup> Certain HPV sub types are linked with cervical cancer linked with cervical cancer and pre cancer. In particular HPV 16 and 18 known to cause 70% of all cervical cancers as well as cancers of

anus, vulva, vagina and throat.<sup>3</sup> Human papilloma virus infection (HPV) causes more than 90% of cases. Most people who have had HPV infections, however, do not develop cervical cancer. Other risk factors include smoking, a weak immune system, birth control pills, starting sex at a young age, and having many manysexual partners but these are less important. Cervical cancer typically develops from precancerous changes over 10 to 20 years. About 90% of cervical cancer cases are squamous cell carcinomas, 10% are adenocarcinoma.<sup>4</sup>

The early symptoms are skin wart, genital warts and other minor changes in the body. In many cases the cervical cancer is asymptomatic, but later it shows the major complications such as menstrual disturbance, infertility, abdominal pain, unexplained fatigue, abdominal bloating and even

it cause a death. External genital warts, also known as condylomata acuminata, are extremely common, with between 500,000 to one million new cases diagnosed each year in the United States alone. To date, more than 120 distinct subtypes of human papillomavirus have been identified. Human papillomavirus types 6 and 11 rarely give rise to cervical cancers, but are responsible for 90 percent of the cases of genital warts.<sup>5</sup> While bleeding after sex may not be serious, it may also indicate the presence of cervical cancer. Burden of the disease is enormous in developing countries, where mortality rate is 10-30 per 10,000 women population as compared to developed countries.<sup>6</sup>

### Statement of the Problem

A Study to assess the knowledge regarding cervical cancer among women (18-49 years) at Nandhivaram village, Kanchipuram District.

### Objectives

To assess the level of knowledge on cervical cancer among the women (18-49 years).

To associate the level of knowledge on cervical cancer among the women (18-49 years) with their selected demographic variables.

### Hypothesis

H<sub>0</sub>: There will be no significant association on knowledge on cervical cancer among women in the selected demographic variables.

### Methodology

Quantitative research approach and non experimental descriptive research design was used for the study. After obtaining a prior permission from the Nandhivaram village counselor. The study was conducted in a Nandhivaram village. 50 women were selected by non probability convenient sampling technique. The data was collected by demographic variables and used of self structured questionnaire to assess the knowledge level on cervical cancer among women. The data was collected from the women for 2 days from 8.00 am - 12.00 pm. The descriptive statistical was Frequency and percentage distribution were used to determine demographic variables and to assess the level of knowledge among women regarding cervical cancer. Inferential statistics was chi square test were used to association the level of knowledge on cervical cancer among women with their demographic variables.

## Results and Discussion

Data was coded and entered in the excel sheet and analysed using the descriptive and inferential statistics. Distribution of demographic variables and level of knowledge were described using the mean and percentage values and the association of knowledge with the selected demographic variables was found using the chi square.

**Table 1:** Frequency and percentage distribution of the demographic variables.

Demographic Variables	Frequency	Percentage
<b>Age (in Years)</b>		
18 - 29 years	19	38%
30 - 39 years	18	36%
40- 49 years	13	26%
<b>Marital Status</b>		
Married	47	95%
Widow	03	6%
Divorced	0	0%
<b>Educational Status</b>		
No formal education	14	28%
Primary and secondary education	25	50%
Degree	11	22%
<b>Occupation</b>		
Employee	28	56%
Unemployee	22	44%
<b>Religion</b>		
Hindu	33	66%
Christian	12	24%
Muslim	5	10%
<b>Number of Children</b>		
One	11	22%
Two	32	64%
Three	7	14%
<b>Menstrual Cycle</b>		
Regular cycle	47	94%
Irregular cycle	3	6%
<b>Age of Marriage</b>		
14 - 20 year	19	38%
21 - 25 year	25	50%
26 - 30 year	6	12%
<b>Family History of Cervix Cancer</b>		
yes	2	4%
no	48	96%
<b>Source of Health Information</b>		
Mass media	0	0
Health care	12	24%
None	38	76%

Shows that demographic information of women who participate in this study. According to the age distribution, higher proportion 19(38%) belongs the year 18-29 years. According to marital status 47(94%) married. According to educational status 25(50%) primary and secondary education. According to occupation 28(56%) employee.

According to religion 33(66%) Hindu. According to number of children 32(64%) two children. According to menstrual cycle 47(94%) have a regular menstrual cycle. According to age of women at marriage in year 25(50%) 21-25 years. According to family history of cervix cancer 48 (96%) no family history of cervix cancer. Source of health information 38(76%) none of information.

The Study findings revealed that (54%) of women had inadequate knowledge, (40%) of women had moderate knowledge and (6%) women had adequate knowledge on cervical cancer.

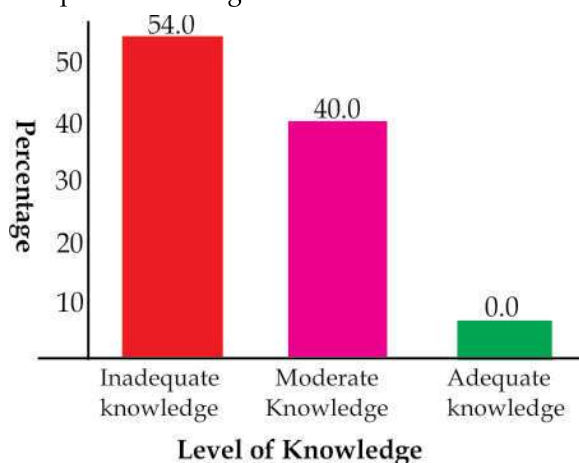


Fig. 1: Distribution of level of knowledge on cervical cancer.

There was a significant association between level of knowledge with age, menstrual cycle, family history of cervical cancer and source of health information and hence null hypothesis was rejected for age, menstrual cycle, family history of cervical cancer and source of health information and accepted for all other demographic variables such marital status, educational status, occupation, religion, number of children, age of marriage

A similar was conducted by, Tongue liu (2014), the conducted a study to assess the knowledge and attitude towards cervical cancer screening among rural women in Easter China, cervical cancer remains a major problem in Chinese women in especially in rural area they conducted a cross sectional study on rural women. The using multi stage sampling technique. Data were collected using a self administered questionnaire. The questionnaire includes specific section to test

the participants knowledge, attitude on screening on cervical cancer. Data analysis was done using descriptive statistics. The total sample was 495. The results were, the approximately half 51.9% of the study sample were classified with the higher knowledge level, only 67.3% of participants indicated that undergone cervical cancer screening.<sup>7</sup>

## Conclusion

The study finding concluded that (54%) samples had inadequate knowledge, (40%) samples had moderate knowledge and (6%) had adequate knowledge on cervical cancer. Hence, the study concluded that most of the women had inadequate knowledge regarding cervical cancer. Hence the community health nurse planned to create a awareness program and health camp regarding cervical cancer to promote health, to prevent the illness, to restore health, to rehabilitate the defects and reduce the women mortality rate due to cervical cancer. It help the women to ensure the healthy life.

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