

Awareness of About Breast Cancer among Dental Surgeons

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Abstract

Aim-To create awareness of breast cancer among dental surgeons

Objective – To know the frequency of people aware of breast cancer

Background- Breast cancer is a cancer that develops from breast tissue. Signs include lumps, swellings and indurations. Breast cancer awareness is an effort initiated to reduce the stigma through education on symptoms and treatment and to raise awareness among women and men. Through this programme, early detection of breast cancer, which is associated with higher long term survival rates is possible. The pink ribbon is the most prominent symbol of breast cancer awareness.

Reason- To provide information and raise awareness among dental surgeons about the symptoms, treatment , risk factors and complications of breast cancer

Keywords- Awareness, breast, Cancer,symptoms, Treatment,.

INTRODUCTION

Breast cancer is one of the most common and frequent malignancy affecting one million women worldwide (1). In India, it is reported for the second most common cancer in women. Around 80,000 cases are estimated to occur annually. The age-standardized prevalence rate of breast cancer among Indian women is 22.9 and the mortality rate is upto 11.19 (2). Industrialization, urbanization, change in life style, and increase in population growth have contributed to rise in epidemiological incidence of breast cancer in developing countries at present.

Breast cancer is differentiated from other types of cancer by the fact that it occurs in a visible organ and be detected and treated at an early stage (4). Prolonged exposure to endogenous estrogens such as early menarche, late menopause, exogenic hormones like oral contraceptive pills and hormone replacement therapy show high risk for breast cancer. Family history of breast cancer has shown an increase in cancer risk by two to three folds.

Suggested preventive techniques to reduce breast cancer mortality and morbidity include breast self-examination (BSE), clinical breast examination (CBE), and mammography (5). Most of the patients seek medical advice when the disease is fairly advanced. Late diagnosis is a major factor for the high mortality as most patients present in advanced stage of the disease (3). This is attributed to lack of awareness and non-existent breast cancer screening programs in India. Breast cancer is not freely discussed India because of cultural taboo and hence there is an urgent need of education on awareness of breast cancer and its early detection.

MATERIALS AND METHODS

This study was designed to evaluate the level of breast cancer awareness among dental population (dental surgeons). In particular, we focused on perceptions about the risk factors associated with breast cancer, source of

information, prognostic factors, treatment strategies, spread of breast cancer, complication of treatment modalities and investigations of breast cancer. The purpose of the study was explained to the participants and those who freely agreed to participate were enrolled in this study. Anonymity and confidentiality of the responses was assured. A total of 50 dental surgeons volunteered and successfully completed the survey.

Data were collected from self -administered close ended questionnaire. The questionnaire comprised of 20 items and categorical responses were applied (yes, no, don't know).

Data were analyzed using Statistical Package for the Social Sciences (SPSS). Descriptive statistics and frequencies were generated for categorical responses. Pearson Chi-square test was used to examine the association between variables, with significance level set at p.

RESULTS

The age of the participants were divided into 3 categories i.e 20-30 years, 30-50 years and 50-70 years. 92% of the population believe that breast cancer can cause death.

Age of the participants

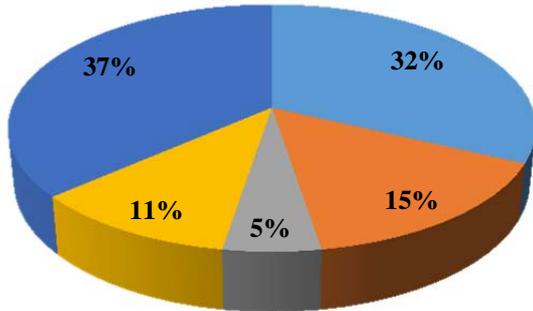
	Frequency	Percent	Valid Percent	Cumulative Percent
Valid 20-30 Years	19	38.0	38.0	38.0
30-50 Years	29	58.0	58.0	96.0
50-70 Years	2	4.0	4.0	100.0
Total	50	100.0	100.0	

SOURCE OF INFORMATION

32% of the population have heard about breast cancer through media/internet, 15% %from family members, 5% from their neighbors , 11% from friends, and 37% of the population from doctors and awareness programmes.

Source of knowledge obtained

- source media /internet
- source through family members
- source through neighbours
- source thro friends
- source thro doctors and awareness programmes

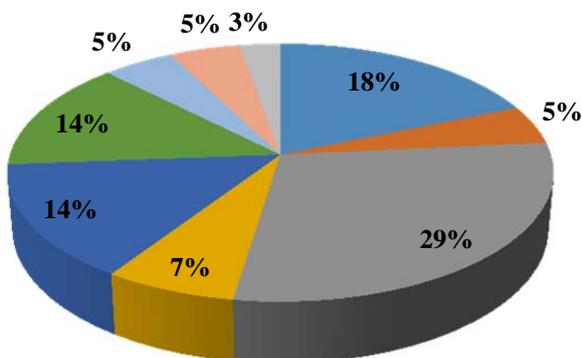


RISK FACTORS OF BREAST CANCER

18% of the population believed that breast cancer was caused by improper breast feeding, 5% through tight dresses , 29% due to genetic reasons, 7% due to nulliparity, 14% due to family history , 14% due to prolonged hormonal treatment , 5% due to radiation exposure , 5% high and low fibre diet, 29% due to obesity.

Awareness of risk factors

- cause thro improper breast feeding
- cause thro tight dresses
- cause by genetic reasons
- nulliparity
- family history of breast cancer is a caause
- prolonged hormonal treatmnt
- radiation exposure
- high fat and low fibre diet
- obesity is a cause

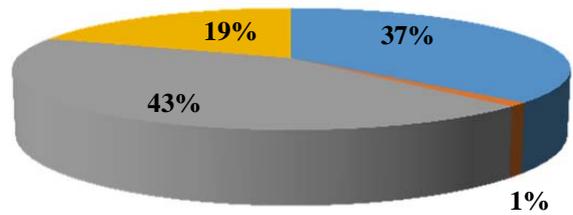


SCREENING METHODS

37% of the population have heard about self -palpable examination (spe) , 1% of the population know how to do self -palpable examination, 43% of the population has heard about mammogram and 19% know what mammogram is about.

Knowledge about screening methods

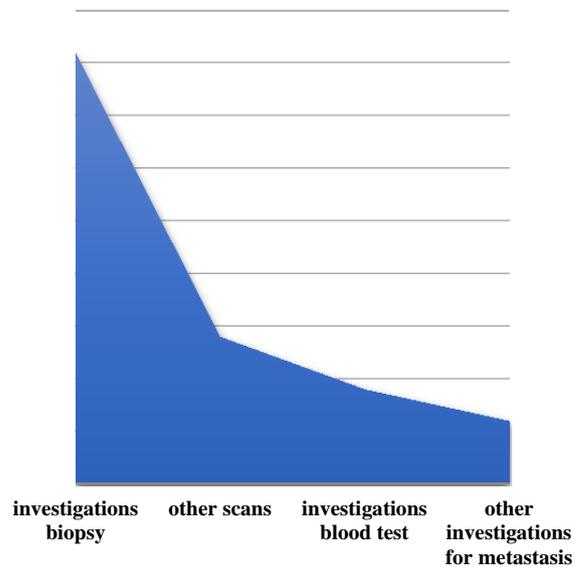
- heard of the name spe
- hw to do spe
- heard about mammogram
- what is mammo



INVESTIGATIVE METHODS

58% of the population assume that breast cancer can be detected through biopsy, 20% through other scans, 12%% through blood test and 8% through other investigations for metastasis.

Percentage awareness about investigations

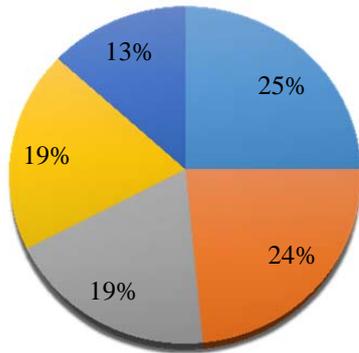


TREATMENT MODALITIES

25% of the population believe that breast cancer can be treated by performing surgeries, 24% by chemotherapy , 19% by radiotherapy , 19% by both chemo and radiotherapy , 13% by all (surgery, chemotherapy and radiotherapy).

Awareness about the treatment modalities

- treatment with surgery
- treatment with chemo
- treatment with radiotherapy
- both surgery and chempotherapy
- all surgery achemotherapy and radio is the treatment

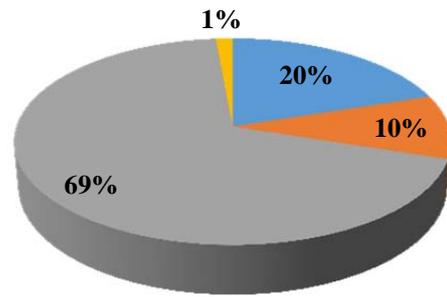


COMPLICATIONS

20% of the population were aware of complication of surgery, 10% of myelosuppression infections, 69% of (hairloss,depression, psychological side effects), 1% of toxicity to organs

Percentage awareness about the complications of the treatments

- complication of surgery
- myelosuppression infections
- hairloss, depression,psychological side effects
- toxic to organs

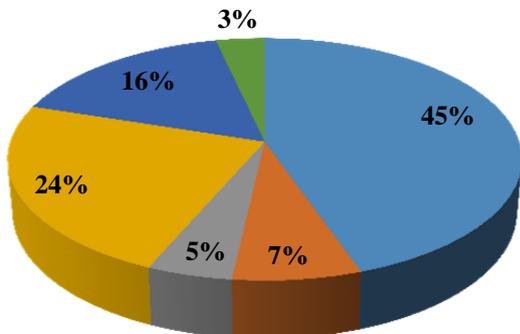


SPREAD OF BREAST CANCER

45% of the population think that breast cancer spreads to lymph nodes, 7%to bone, 5% to brain , 24% to any part of the body, 16% to uterus and ovaries, 3% to liver.

Percentage awareness of Spread of the breast cancer

- spread to lymph nodes
- spread to bone
- spread to brain
- spread to any part of the body
- spread to uterus and ovaries
- spread to liver

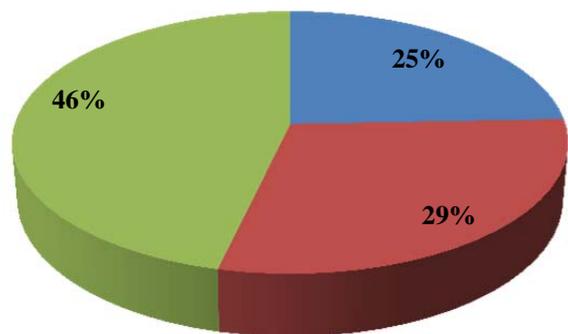


MAIN CAUSE OF DELAY IN TREATMENT

24% of the population believed that the main cause of delay of treatment was due to hesitation, 29% due to fear about neighbours and cost and treatment, 46% due to carelessness and unawareness

Main cause of delay for the treatment

- main cause for delay is hesitation
- fear about neighbours cost and treatment
- unawareness or carelessness



DISCUSSION

Breast cancer is a multi -etiological disease that has caused deteriorating health problems worldwide (2). It starts when the cells in the breast grow out of control. Breast cancer spreads through lymph nodes (axillary, supraclavicular, infraclavicular nodes) and lymph fluid present in the lymphatic system. The most effective way to detect breast cancer is through mammography and through breast self-examination to look for changes like lumps, distortions or swellings. Breast self- exam is more or less ignored and not followed by women all over the world (4). Breast awareness is an unstudied alternative to structured breast self examination. Incidence of breast cancer has been significantly increasing over the past two decades. Since there is a sequential rise in the incidence of breast cancer and also absence of national screening tests in India, the need for awareness programs regarding diagnostic tools, screening, new advancements to prevention, early recognition and treatment modalities becomes a necessity to control breast cancer. Early diagnosis of breast cancer plays a pivotal role in decreasing the mortality rates and in improving patient's prognosis.

This study involved dental surgeons as it can motivate them in practicing the preventive health behavior on a regular basis. Being a part of health care providing team, they can spread the information to the patients as well as family and friends.

Results of the current study showed that awareness about breast cancer among the dental population was unexpectedly poor in which (mean) n=22.15 of the population has high knowledge and the remaining (mean) n=26.06 had weak awareness levels. Using Chi square test for the correlation between the age groups and the

knowledge of breast cancer among dental surgeons, ($p>0.01$) was obtained which denotes that the study is statistically insignificant.

CONCLUSION

In conclusion, result of the present study showed low awareness levels regarding therapeutic procedures, screening methods, investigations, risk factors and sources of breast cancer. The study also highlights the need for educational programs to create awareness mainly among students. Since the information was obtained from dental population, it is vital to update them with important health measures which are not part of their course. The sample of the study population was confined to dental population and hence the results of the study cannot be generalized to a larger population in India.

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