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Preventing and Screening for Breast Cancer in Women of Reproductive Age

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Introduction

The number of women living with breast cancer is not well documented, despite the fact that it is the second most frequent malignancy among Nepalese women and has a significant impact on the country's healthcare system. To evaluate reproductive-age women's knowledge, attitudes, and practises about breast cancer prevention and screening [1]. According to 2017 WHO data, there were 1054 breast cancer deaths in Nepal, or 0.65% of all deaths. The age-adjusted mortality rate is 9.21 per 100,000 people, which places the United States in 163rd position globally [2]. Despite having a trustworthy screening procedure like breast self-examination for early diagnosis, the mortality rate among women is significant. According to a survey, breast cancer is the most common type of cancer. Asia's fourth most common cause of cancer-related death among women. When taking into account the most prevalent organ cancers, breast cancer the leading cause of mortality for women between the ages of 40 and 45. The occurrence is rising in underdeveloped countries as a result of a rise in life expectancy, urbanisation, western lifestyle adaption, and the only way to early detection is the key to managing this illness. The most effective means of early detection of breast self-examination is a simple and effective way to test for breast cancer (BSE) [3,4].

Additionally, the interviewers orally described the purpose and goals of the research while assuring the respondent's confidentially. Participants who consented to the interview were contacted. A researcher created a questionnaire with four distinct parts and several specific items to evaluate socio-demographic data, knowledge of breast cancer, attitudes of women in reproductive age toward the disease, and practises for breast cancer screening and prevention.

Based on a study of the literature, the validation of the material, and the establishment of dependability, this tool was produced through an internet search. By studying a variety of works of literature, peer review, and topic specialists, the content validity was confirmed. The tool's first portion contained socio-demographic data based on multiple choice answers. Multiple-choice questions were used in the second section of the questionnaire to gauge respondents' knowledge of breast cancer, and a five-point Likert scale with specific response options for strongly disagreeing, for disagreeing, for neutral, for agreeing, and for strongly agreeing was used in the third section to gauge respondents' attitudes toward breast cancer among women of reproductive age. The questionnaire's last part asked respondents to select Yes or No to indicate their practises for breast cancer screening and prevention. To ascertain the women's knowledge, attitudes, and practises surrounding breast cancer screening and prevention, a descriptive cross-sectional research was done [5,6].

110 women of reproductive age participated in this study (15-45 yrs.) Data was gathered between October 29 and November 29, 2017, using a 5-point Likert scale, interviews, and a structured and semi-structured questionnaire. The interview went well and was performed in a relaxed setting without any unusual behaviour from the participants, such as embarrassment or fear [7]. Utilizing descriptive statistical techniques like frequency, percentage, and mean, the acquired data were analysed.

Findings: Based on the study's aims to evaluate socio demographic data and gauge reproductive-age women's knowledge, attitudes, and practises on breast cancer screening and prevention, the results were calculated using descriptive statistics.

Conclusion

Given that breast cancer is the leading cause of death for women, early diagnosis is a problem that must be supported. The findings of the current study indicate that there is a lack of awareness regarding breast cancer, its risk factors, signs and symptoms, preventative strategies, and BSE performance. Therefore, it is important that everyone in the globe has access to information on breast cancer prevention and screening techniques. Therefore, the cornerstone of breast cancer control continues to be early detection to enhance breast cancer outcome and survival.

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Conflicts of Interest

Author declares no conflict of interest.

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