

KNOWLEDGE AND PRACTICE REGARDING CERVICAL CANCER AMONG MARRIED WOMEN

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Abstract

An exploratory research design was adopted to assess the knowledge and practice regarding cervical cancer. The population comprised of married women between the age 20 -60 years and above residing in the urban slums of Indore (M.P). A sample size of 100 married women were selected using purposive sampling. The investigator used a structured questionnaire of 9 items to assess the knowledge regarding early diagnosis and prevention of cervical cancer, checklist to assess the prevailing risk factor which had 9 items and a questionnaire of 6 items to assess the hygiene practices of women. Reliability was calculated using split half method and the 'r' value was 0.8. The findings revealed that all of the subjects 100(100%) had no knowledge regarding early diagnosis and prevention of cervical cancer. It also revealed that 86(86%) of the subjects were at low risk for cervical cancer, 14(14%) of them are at moderate risk for developing cervical cancer. The findings also revealed that 92(92%) of the subjects were having poor hygienic practices and only 8(8%) of them are having good hygienic practices. There is a need to create public awareness regarding the benefits provided by the government through various health schemes and all government hospitals must make these schemes available to the population. Nurses should also be trained through in-service education to spread the health awareness to the individuals and families.

Key words: Pap smear, HPV (Human papillomavirus, HR (high risk), ICC (Invasive cervical cancer).

Background

Women are smart and savvy, striving to live up to their potentials. They are curious about the world they live in, and want to make a difference. They cherish the gift of woman hood, but most of them keep struggling with the issues of family, children and in turn neglect themselves.

(Nicola Sharon, Graham, 2008)

Cervical cancer is a major and devastating cause of mortality and morbidity worldwide with an estimated global incidence of 5, 00,000 new cases and 2, 70,000 deaths of women from the disease annually. It is the second most common cancer in women between 15 and 45 years of age and the third most common cause of cancer related mortality in women. **(S.Santhi, 2009).**

Cancer of the uterine cervix is the leading cause of mortality and morbidity among women world wide. In developing countries it is the most common gynecological

cancer and one of the leading causes of cancer deaths amongst women. The burden of cervical cancer in developing countries is growing and threatens to be the cause for the high morbidity, mortality and economic cost in these countries in next 20 years. **(Giles.M.Gerland.S, 2006).**

We now have a great opportunity; it is our chance to inform young girls and their mothers, to inspire them to take control of their health and help them protect themselves against cervical cancer caused by certain types of HPV. 25% of global cervical cancer harbor high risk (HR) HPV infection. At least 15 types of (HR) HPV have been associated with progression to invasive cervical cancer (ICC). **(IJMR, Indian Journal of medical research, 2009)**

The most effective time to vaccinate girls and young women is before they become sexually active. **(World Health Organization, 2008).**

Need of the study

There has been tremendous change in the demographic profile of India over time, as both vital rates-birth and

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