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Research Article

KNOWLEDGE ATTITUDE AND PRACTICE ABOUT SKIN TUMORS AMONG TAIF PHYSICIANS, SAUDI ARABIA

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Abstract:

Background: skin cancer is the commonest malignancy in west, yet, it represents the ninth most common cancer in Saudi Arabia. The aim of this study is to evaluate the level of knowledge, attitudes and practice among Taif Physicians.

Method: Self administrated questionnaire used for data collection, composed of 4 sections demographics, knowledge, attitude, and practice. The study took 6 weeks duration and involved 200 physicians.

Results: The mean score for the knowledge parameter is 32.27 ± 3.9 , for the attitude the mean is 11.55 ± 2.01 , and for practice is 20.93 ± 2.9 , and the mean for the total score for all parameters is 64.75 ± 2.9 . It was found that the knowledge score is significantly higher in the participants working in the public sector than those in private sector [$P < 0.05$]. There was a significant relationship between the age of participants and the knowledge, attitude and the total score [$P < 0.05$], however, it has insignificant effect on practice score. The years of practice have significant effect on the mean score in case of knowledge [$p\text{-value} = 0.049$] and for the total score [$p\text{-value} = 0.03$]. The mean score is significantly higher in the group with more than 10 years of practice than the group with less than 5 years of practice in both knowledge [33.2 ± 3.2 vs. 31.6 ± 4] and total score [66.4 ± 6.9 vs. 63.6 ± 6.2].

Conclusion: this study revealed that age and years of practice especially in physicians working in public centers have a positive impact on the level of knowledge, attitudes and practice among Taif Physicians.

Keywords: skin cancer, knowledge, attitude, practice, Taif physicians.

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INTRODUCTION:

Malignant tumors of the skin represent the ninth most common malignancy in Saudi Arabia.^[1-2] It is estimated the skin malignancy represents less than 4% of the newly diagnosed malignant tumors in Saudi Arabia.^[2-4] Basal cell carcinoma is the commonest skin tumor affecting Saudi patients [36%], followed by squamous cell carcinoma [23%], mycosis fungoid [11%], whereas malignant melanoma doesn't exceed 7%.^[5] To our knowledge there is no study performed in Saudi Arabia similar to our study. However, Alamri *et al* ^[6] conducted a study to evaluate the levels of knowledge, attitudes and behaviors of people in Riyadh city, KSA towards the skin cancer to understand and assess the importance of skin cancer risk and he found that the level of knowledge, attitude and behaviors are affected by many factors as age, education level and skin color. The aim of this study is to evaluate the level of knowledge, attitudes and practice among Taif Physicians.

METHODOLOGY:**Data collection methods:**

A modified version of Avaya's tool was used for the current study [7]. It is composed of four sections: demographics, knowledge, attitudes and practice. Self-administered questionnaires were used for data collection. It included information on demographic characteristics, socio-economic status, skin type, knowledge about solar exposure, knowledge of cancer, knowledge of sun prevention, attitudes toward sun tanning, use of sun beds, and practices in sun protection. The level of awareness was calculated as the sum of the correct answers ranging from 0 to 20 points.

Ethical considerations:

The purpose of the study, the rights of the participant, to withdraw at any time without any obligation towards the study team and to contact the study team for any query were fully detailed in the informed consent. Participant's anonymity was assured by assigning each participant a code number for the purpose of analysis only. No incentives or rewards were given to participants. Institutional review board [IRB] approval was obtained for this study prior to study execution.

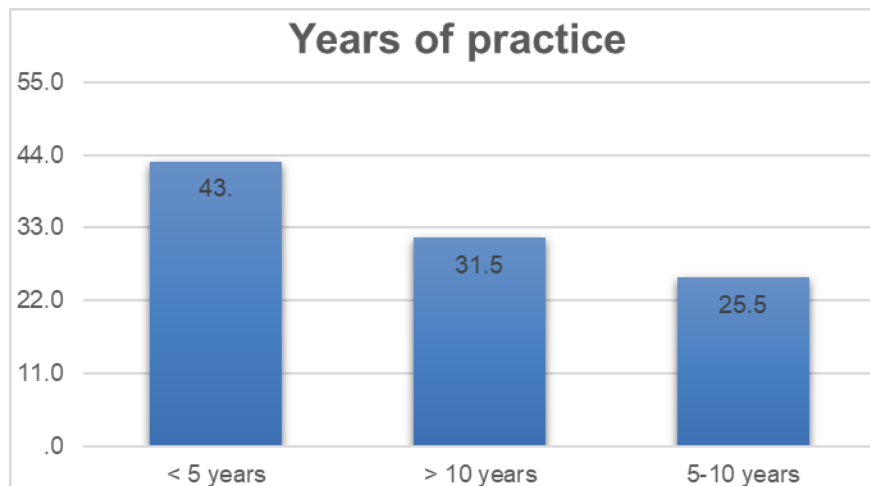
RESULTS:

- Table 1 shows demographic data of the participant physicians

- Graph 1 shows years of practice of participants
- 94% of the participants are from the public sector while 6% only are from the private practice
- 76% have postgraduate qualifications
- Specialties of participants are shown in figure 2
- 57 of the participants are from general surgery representing 28.5% of the participants followed by the internal medicine [23] and family medicine [22]
- 6.5 % only of the participants said that they had a special training on skin cancer management while the remaining did not receive.
- 21.5% of the participants said that they are following Guidelines for the diagnosis of skin cancer
- The mean score for the knowledge parameter is 32.27 ± 3.9 , for the attitude the mean is 11.55 ± 2.01 , for practice is 20.93 ± 2.9 , and the mean for the total score for all parameters is 64.75 ± 2.9 . [Figures 3-5].
- having special training on skin cancer management found to be of non-significant effect on the score in each of the 3 parameters and the total score [$p > 0.05$]
- having postgraduate qualifications on skin cancer management found to be of non-significant effect on the score in each of the 3 parameters and the total score [$p > 0.05$]
- The effect of type of practice; private or public on skin cancer management found to be of non-significant effect on the attitude, practice and the total score [$p > 0.05$] while the knowledge score was found to be significantly higher in the participants working in the public sector than those in private sector [$P < 0.05$].
- There was a significant relationship between the age of participants and the knowledge, attitude and the total score [$P < 0.05$], however, it has insignificant effect on practice score.
- The years of practice have insignificant effect on the score of attitude and practice, yet, there is significant effect on the mean score in case of knowledge [$p\text{-value} = 0.049$] and for the total score [$p\text{-value} = 0.03$]. The mean score is significantly higher in the group with more than 10 years of practice than the group with less than 5 years of practice in both knowledge [33.2 ± 3.2 vs. 31.6 ± 4] and total score [66.4 ± 6.9 vs. 63.6 ± 6.2].

Table 1 shows demographic data of the participant physicians

sex	Frequency [%]
Female	119 [59.5%]
Male	81 [40.5%]
Mean age	35.7±8.6
Residence	95%
Urban	5%
Rural	5% rural



Graph 1: shows the years of practice of the participants

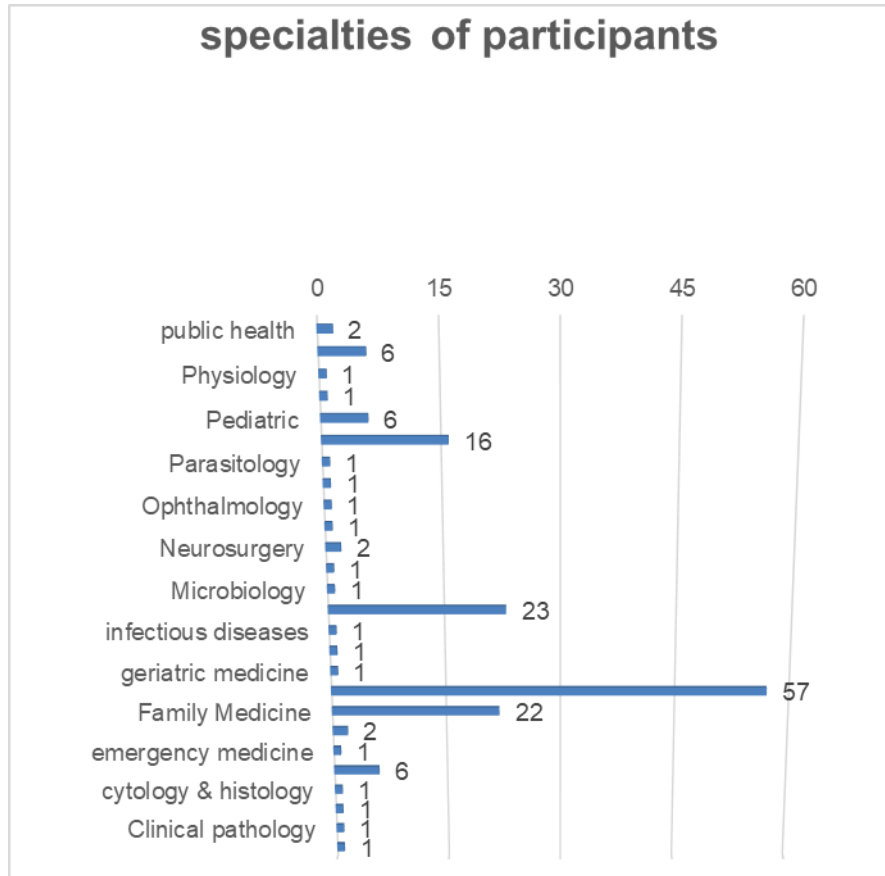


Figure 2: distribution of specialties amongst physicians

percentage of skin cancer patients	Frequency	Percent
<1%	163	81.5
1-5%	36	18.0
5-10%	1	0.5
Total	200	100.0

Table 2: showing percentage of skin cancer patients to the daily patients of each practitioner

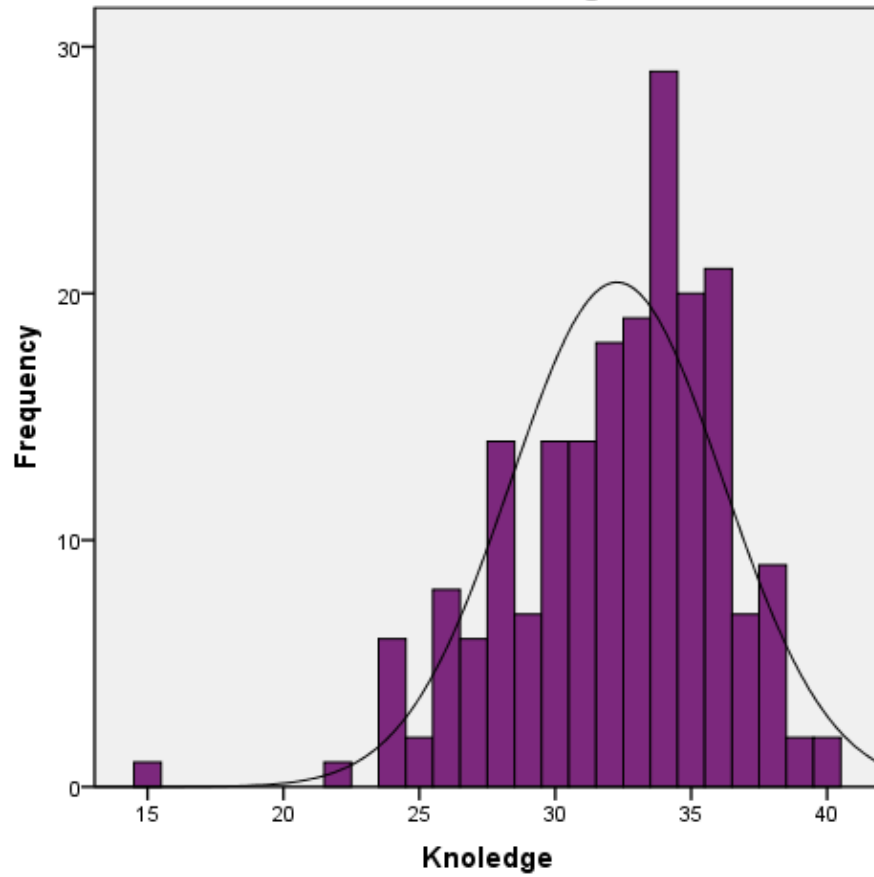


Figure 3 show a histogram of the score distribution of the knowledge parameter

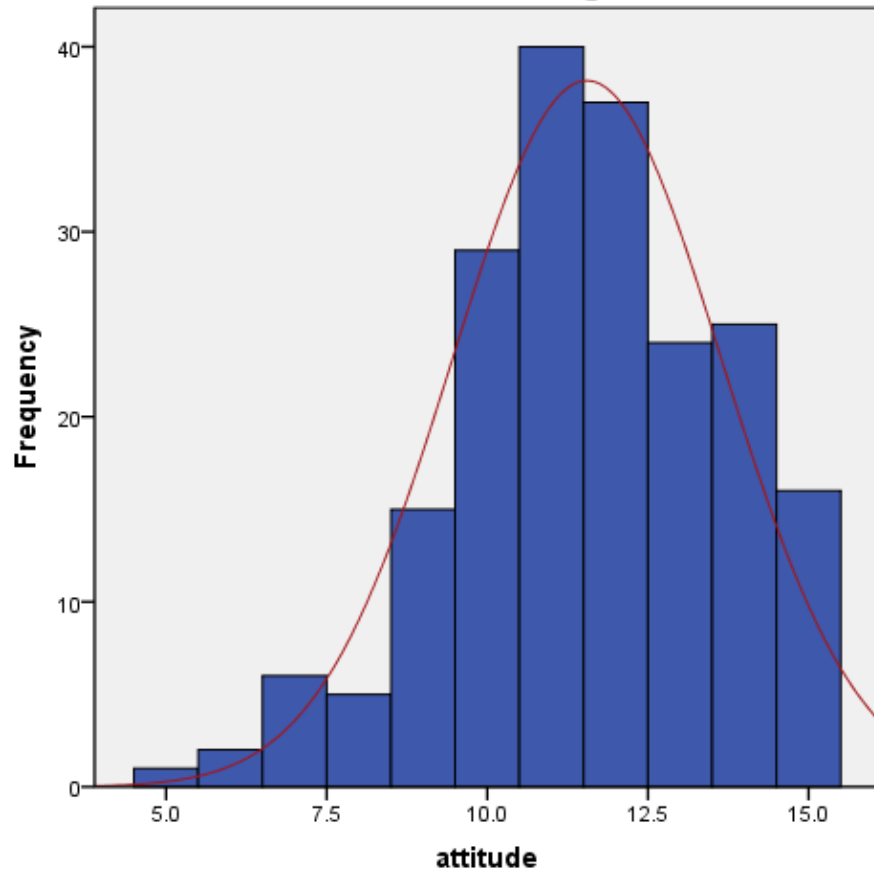


Figure 4 show a histogram of the score distribution of the attitude parameter

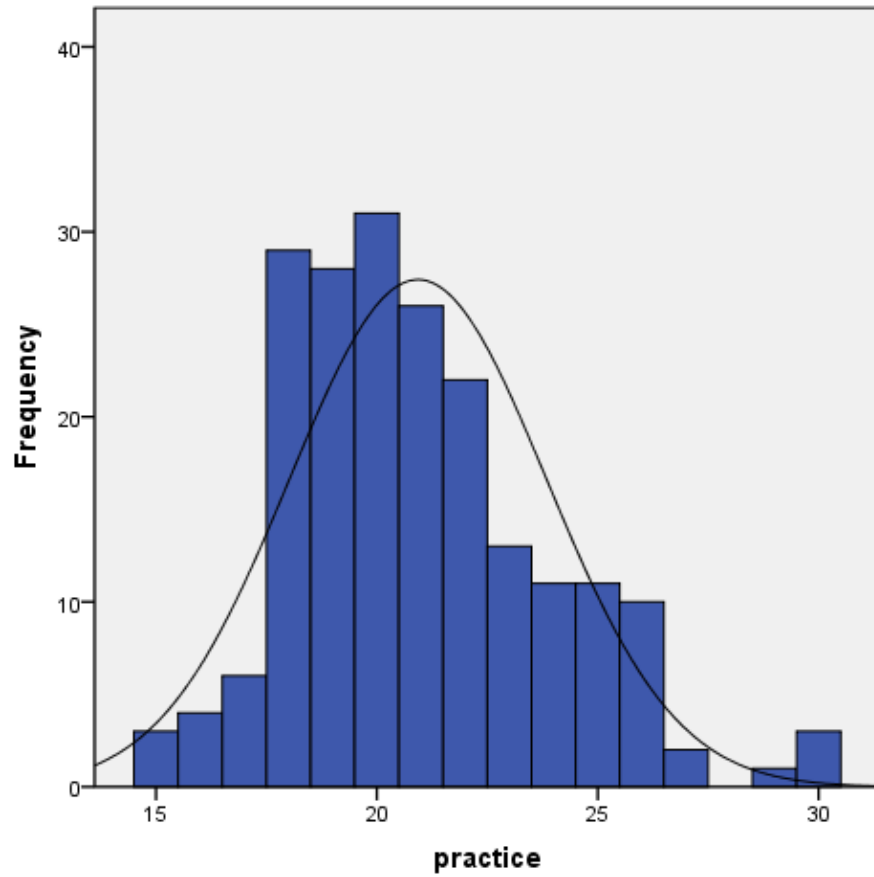


Figure 5 show a histogram of the score distribution of the practice parameter

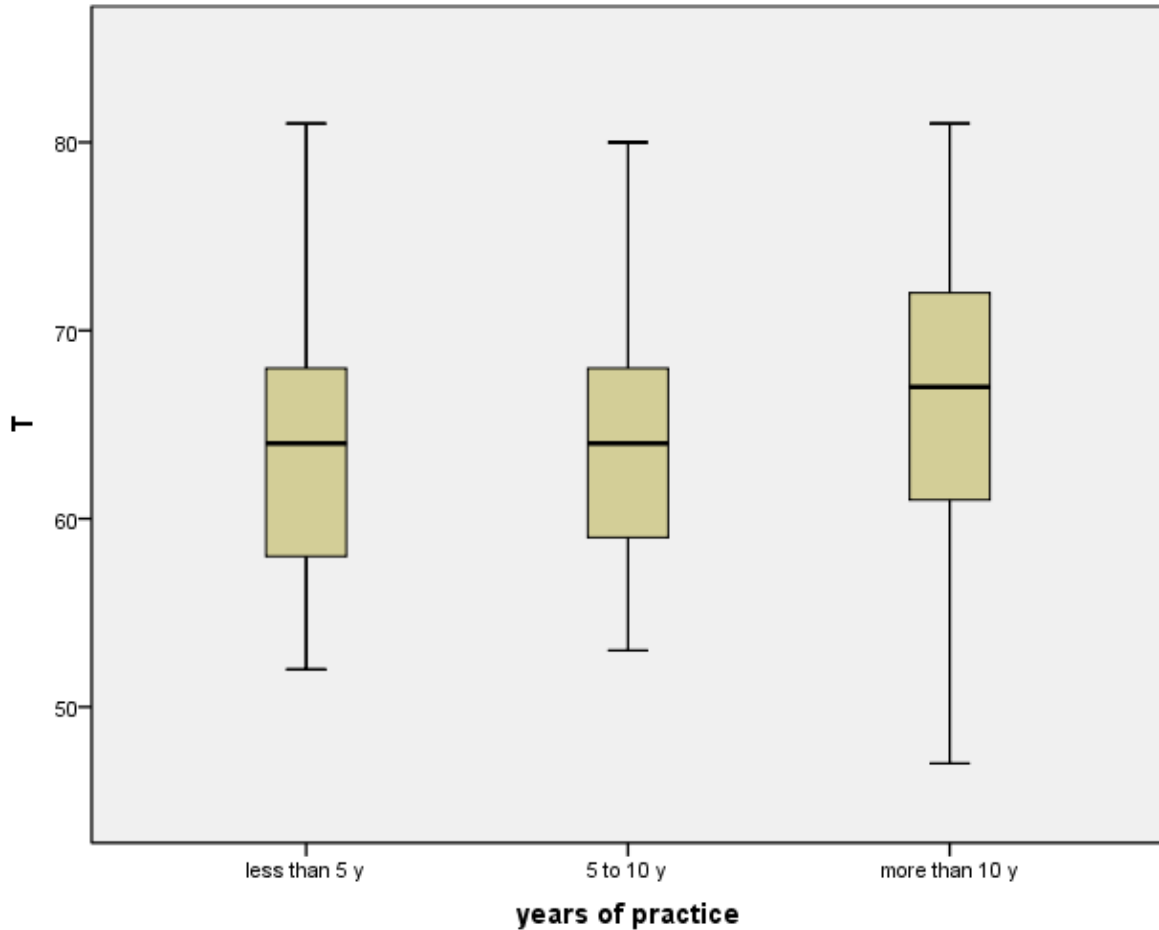


Figure 6: showing the difference of total score across different groups of years of practice

DISCUSSION:

The goal of this study was to evaluate the knowledge, attitudes, and practice among Taif physicians who play a vital role in the, prevention, diagnosis, and management of skin cancer. In addition, they are the cornerstones in the strategic decisions aimed at lowering the burden of skin cancer. The level of knowledge and attitude of participant physician reflect a moderate level of concern regarding the perceived importance of skin cancer compared with other forms of cancer even though they have high level about the importance of prevention of skin cancer. Al-Zahrani *et al* [7] found I their study that more than 90% of PHC physicians need to learn more about management of skin cancer and they advocated a primary care residency training programs. Similar recommendations were approved by the American Academy of Family Physicians. [8] Procedural training would be of value for residents to practice where 20% of PHC physicians in San Francisco can perform skin biopsy versus 3.8% in Al-Zahrani study.[7]In the present study the magnitude of the

problem is less as the majority of the participants are general surgeons. Yet, in the current study it was found that postgraduate qualification and having special training on skin cancer management has no significant effect on the score level of knowledge, attitude, and practice which is quite different from the findings in the other studies.

Our findings are concordant with that of other studies where the knowledge score was found to be significantly higher in the participants working in the public sector than those in private sector. The majority of authors emphasized on the important role of the public health care workers in the care of skin tumors which has been identified as a key to tackling the problem.[9, 10] Herath et al[11] found in their descriptive cross-sectional study on knowledge, attitudes and practices of non-specialist doctors regarding melanoma in a tertiary care hospital in Sri Lanka that the majority of respondents did not have a satisfactory level of knowledge or training. Even in countries with high incidence of skin cancer a lack of awareness and clinical skills regarding of skin cancer

diagnosis and management has been reported. Authors explained these findings by the fact that the undergraduate study of dermatology is short and opportunities for further training are minimal or non-existent except for dermatologist.[12-14] In the present study, though the training or postgraduate qualification have no impact on the level of awareness, we found that the age and years of practice are significantly correlated with the level of awareness which may reflect the physician experience. Previous studies advocated educating doctors and medical students on common skin malignancies and full body examination to improve the clinical practice of doctors. [15-16]

CONCLUSION:

this study revealed that age and years of practice especially in physicians working in public centers have a positive impact on the level of knowledge, attitudes and practice among Taif Physicians.

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