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**INDO AMERICAN JOURNAL OF
PHARMACEUTICAL SCIENCES**<http://doi.org/10.5281/zenodo.2530257>Available online at: <http://www.iajps.com>**Research Article****AWARENESS, PERSPECTIVES AND CONDUCT OF
PAKISTANI ADULTS REGARDING EPIDERMAL
CARCINOMA AND SUN SCREENING****Dr. Khizra Amjad, Dr. Marjan Noor, Dr. Afnan Noor**

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Abstract:

Aim: To record the extent of awareness, perspectives and conduct of Pakistani adults regarding epidermal carcinoma, its prevention and sun screening.

Method: The research was a rectifying and observational analysis. The researcher took a population of one thousand and twenty people from the 7 geographic areas of Pakistan, belonging to an age range of 18-75.

Results: The population taken from Eastern and South-eastern Punjab reported low levels of understanding regarding skin carcinoma and sun screening. Females scored higher in comparison to males in awareness. The more knowledgeable groups like undergraduates and postgraduates and those who were juniors in age scored higher as compared to the rest.

Conclusion: Literacy, sex, environment does effect the perspectives, conduct and awareness regarding skin carcinoma and sun screening.

Key Words: Melanoma, Postgraduates, Perspectives, Protection Behaviors, Skin Carcinoma, Sun Screening.

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INTRODUCTION:

Epidermal carcinoma is the commonest form of illness reported in US. According to 2004 estimate, there was a total of 1000,000 individuals to have Basal -cell cancer or epidermoid cancer [1, 2]. In the last 30 years, occurrence of melanoma has multiplied in Sweden and other areas of the West [3]. In the year 1999, five to seven percent of the cancer cases in Turkey were epidermal carcinomas. Out of the 9919 carcinoma instances in females, six hundred and eighty four were epidermal with a prevalence of 2.1/100,000 while out of the sixteen thousand and twenty three carcinoma instances in males, eight hundred and four were skin related with a prevalence of 48.3/100,000[4]. There were three hundred eighty six epidermal carcinoma cases reported out of three hundred seventy two cases[5]. The occurrence of epidermal carcinomas can be reduced if solar protection measures are adopted and uncontrolled basking is avoided for the major causative agent behind it is subjection to UV rays.

[6-9]. According to WHO's recommendations solar protection behaviors include using shielding clothing, remaining under cover, keeping away from sunshine, & utilizing suntan lotion [2]. A few researches show the eminence of social knowledge & practical development in conduct to underlie the safety of public from the unhealthy consequences of immoderate revelation to solar rays [8-12]. Another study reveals the importance of solar screening plans in lowering the rate of epidermal carcinomas & Melanoma [11-13]. A consistent volitional sun blocker application in order to prevent epidermal carcinoma is apt to maintain for the photosensitive individuals in the long run [14-15]. Females, according to a few researches, were generally better educated regarding solar screening [3], and were employing far better screening procedures for solar protection as compared to men [2,16]. Solar exposure comes out to be a causative agent for epidermal cancer. Thus, it's important to spread education among adults regarding the preventions and eminence of an advance diagnosis [17]. Elder public took no notice of Epidermal carcinoma's risk increasing elements regularly [11, 18]. The current research tends to record the extent of awareness, perspectives and conduct of Pakistani adults regarding epidermal carcinoma, its prevention and sun screening, while drawing comparisons of age, educational status, chorographical and sex distinctions.

METHODOLOGY:

The research, conducted from April 2018 to December 2018. The researcher specified a specimen population by picking out five adults from each randomly chosen town. Next the researcher chose a non-specific population containing one thousand and twenty adults belonging to the age group of eighteen to seventy-five from thickly jam-packed zones like malls, bus stations, and educational institutions etc. We educated the selected population regarding the aims of research.

The scale consisted of 3 components: 1. A total of sixteen statements for demographics and routine patterns. 2. A total of fifteen items for evaluation of awareness about unhealthy impacts of solar rays, epidermal carcinoma & prevention. 3. A total of eight items for the evaluation of perspectives and conduct regarding unhealthy impacts solar rays, epidermal carcinoma & prevention. The scale had a Cronbach's alpha of 0.70 and Kuder Richardson 21 value of 0.66. The researcher then analyzed the facts thus collected employing Statistical package for social sciences, version 12 using the distribution free analysis.

RESULTS:

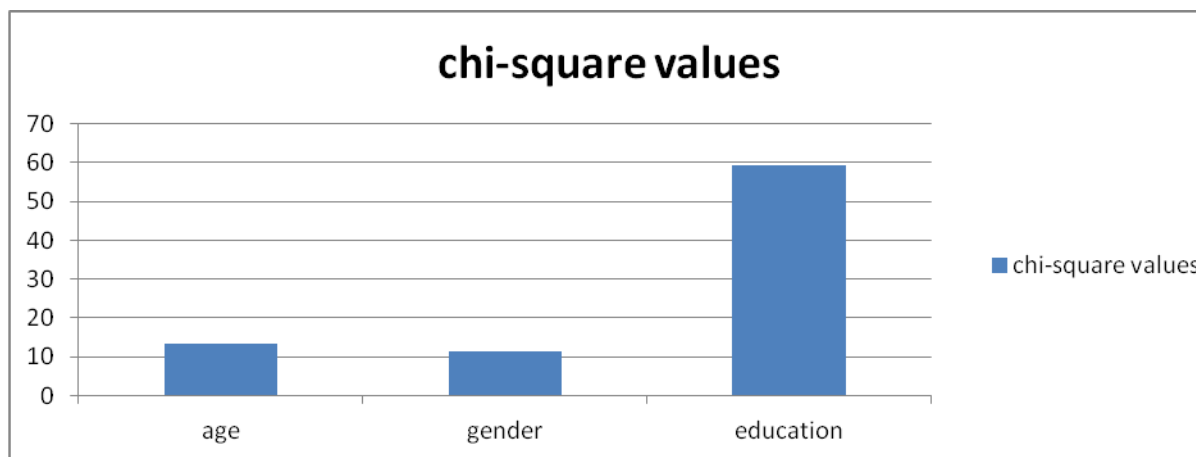
A total of 53.40% of the population was female while 47.60% males, who took part in the research. Table-1(A & B) shows the correlation among education of the population regarding epidermal carcinoma or solar screening and sex, age & knowledge level. Population from Eastern and South-Eastern Punjab were less educated regarding solar screening & epidermal carcinoma as compared to that from the rest of the 5 areas as suggested by Table-2. Males and females showed no notable variation on basis of having sunbathe on seashore ($\chi^2 = 2.9280$, proportion value greater than 0.05). Females used Stetsons more frequently as compared to males ($\chi^2 = 5.9260$, proportion value of 0.05). Females were more frequent to sunbathe for deliberate tanning as compared to males ($\chi^2 = 10.573$, proportion value of 0.05). Distinctions in males and females on basis of having encountered an erythema solar, heat hyperpyrexia and in terms of employing precautionary cautions in resistance to epidermal carcinoma were negligible ($\chi^2 = 2.128$, probability greater than 0.05; $\chi^2 = 0.960$, probability greater than 0.05; $\chi^2 = 5.667$, probability greater than 0.05, individually). Several educational categories showed notable distinctions in using sun screening cautions, when exposed to sun or in spending limited hours outdoor during noon ($\chi^2 = 32.185$, probability equal to 0.05; $\chi^2 = 11.530$, probability greater than 0.05).

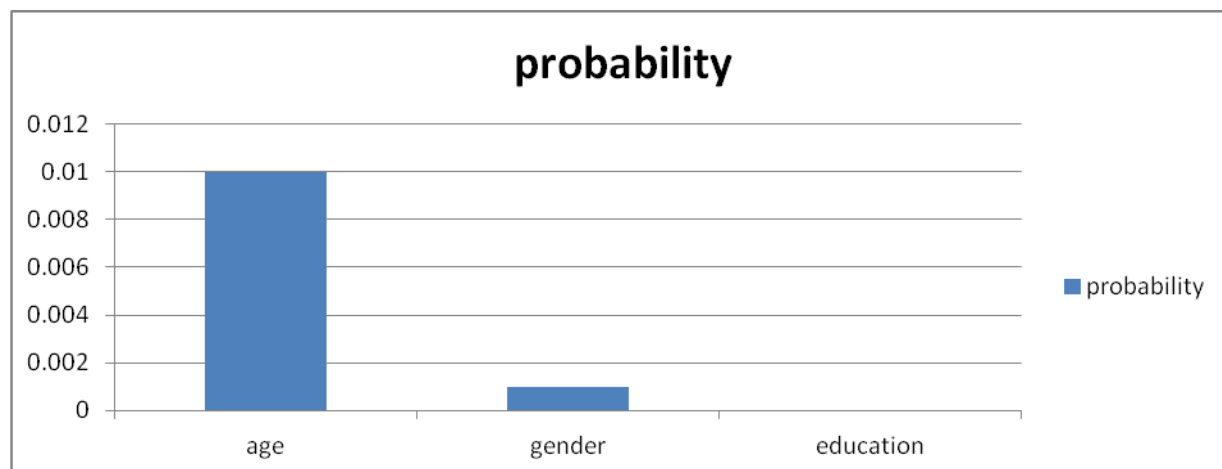
Table 1: The Educational Status of the Population Regarding Solar Screening and Epidermal Carcinoma in Relation to Demographics

	Score lower than 10 no. ; %	Scores higher than 11 no. ; %	Awareness status No. ; %
Age less than 19	50.0 ;23.90	184.0;27.70	234.0;22.90
20 to 29 years of age	74.0 ;35.40	387.0;47.70	461.0;45.20
30 to 39 years of age	40.0 ;19.10	128.0;15.80	168.0;16.50
40 to 49 years of age	29.0 ;13.90	73.0 ;9	102.0;10
Age above 50	16.0 ;7.70	39.0 ;4.80	55.0 ;5.40
Females	90.0 ;43.10	455.0;56.10	545.0;53.40
Males	119.0;56.90	356.0;43.90	475.0;46.6
Elementary education	41.0 ;19.60	72.0 ;8.90	113.0;11.10
Mid-school education	41.0 ;19.60	73.0 ;9	114.0;11.20
Secondary school education	69.0 ;33	228.0;28.10	297.0;29.10
bachelors education	53.0 ;25.40	390.0;48.10	443.0;43.40
Masters education	5.0 ;2.40	48.0 ;5.90	53.0 ;5.20

Table 1B: Probability and Chi-Square Values

Demographic variables	χ^2 ; probability values
age	13.260;0.01<0.05
gender	11.360;0.0010<0.01
education	59.170;0.00<0.001





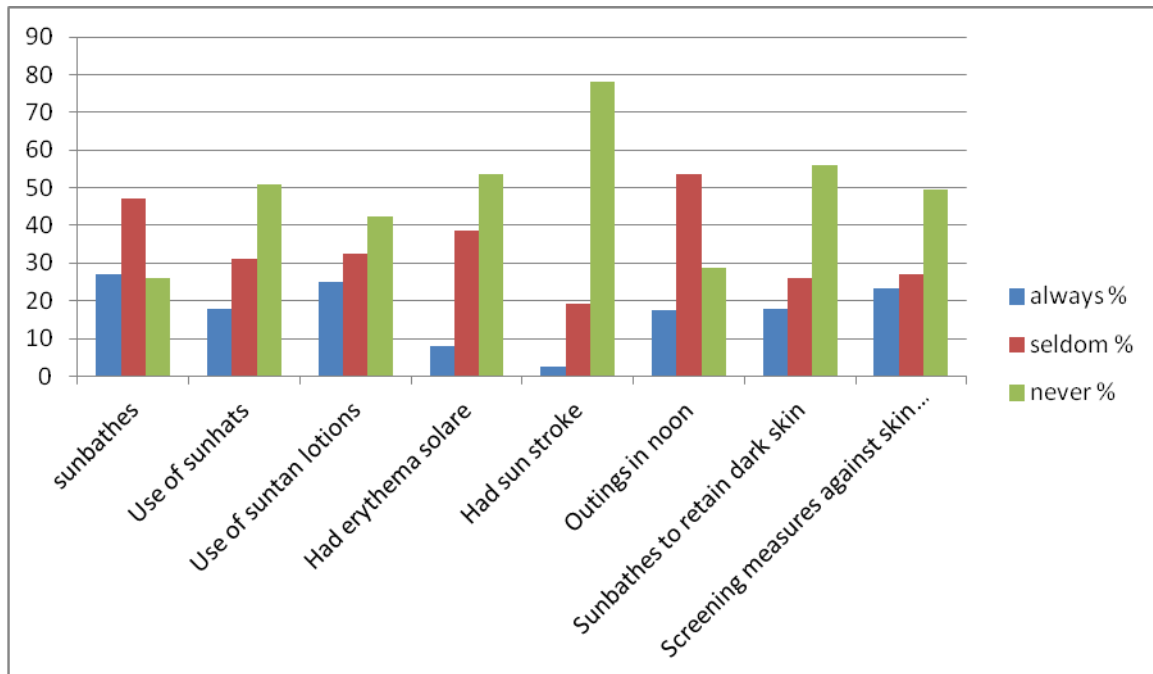
DISCUSSION:

The current study, suggesting that females possess a greater education regarding epidermal carcinomas and solar screening as compared to males, agrees with Kristjansson et al, [3] who studied similar results for solar screening knowledge with an additional study on adults in comparison with adolescents, where adults were more educated regarding the solar protection. Moreover, highly educated people and those residing in seaward areas were far better aware of the solar screening procedures and the unhealthy impacts of solar exposure as compared to those who were illiterate or lived inland. Agreeing to the researches Kristjansson et al., [3] and Cokkinides et al [16], the current research suggests that females due to greater know how are seen to adopt solar screening procedures

more frequently as compared to males. According to Campel et al, [17], the total number of males and females employing solar screening steps is lower than fifty percent, while the type of screening procedures differed largely in males and females. According to the study of Ermercan et al., (2005) [15], staying indoors to avoid solar contact with skin proved to be the frequent most screening behavior by males while for females it was to wear eyeglasses. The population less than 29 years of age reported to utilize sunhats rarely, while those with 20 to 29 years of age used suntan lotions consistently, exposed to sun rarely, encountered erythema solare to a lesser extent and took higher number of screening steps to safeguard their selves from epidermal carcinoma as compared to the rest of the age groups.

Table-II: Prevalence of Frequency of Individual Attitudes and Behaviors Concerning the Sun Protection/ Skin Cancer

View point or conduct	Always No. ; %	Seldom No. ; %	Never No. ; %
sunbathes	276.0; 27.10	480.0; 47.10	264.0; 25.90
Use of sunhats	184.0; 18.00	316.0; 31.00	520.0 ;51.00
Use of suntan lotions	256.0; 25.10	331.0; 32.50	433.0 ;42.50
Had erythema solar	81.0 ; 7.90	393.0; 38.50	546.0 ;53.50
Had sun stroke	25.0 ; 2.50	197.0 ;19.30	798.0 ;78.20
Outings in noon	179. ;17.50	547.0; 53.60	294.0 ;28.80
Sunbathes to retain dark skin	182.0; 17.80	266.0 ;26.10	572.0 ;56.10
Screening measures against skin carcinoma	239.0; 23.40	276.0; 27.10	505.0; 49.50



Kristjansson et al, [3] suggested a percentage of 39(in 13-19 years of age) and 60(in above 60 years of age) for using solar screening garments. Contrarily, a research showed people equal to or above 45 years of age did not insist in using solar protection procedures [13]. It was later on reported that people belonging to 46 years of age or more utilized suntan creams rarely as compared to the young [16]. The current research suggested that educated people used to have sunbathes to get their skin tanned most often, agreeing with research of Filiz et al, [18]. The study suggests a direct correlation between the degree of knowledge, perspectives & conduct of public in terms of unhealthy impacts of solar rays. The conclusion agrees to the rest of the researches in the literature [3, 19].

CONCLUSIONS:

A variety of elements which include sex, residential area, age, and degree of knowledge, effect public's awareness, perspectives and conduct. We must keep the elements under consideration while scheming treatment procedures related to solar screening and epidermal carcinoma. The use of suntan lotions must be stressed here in addition to the rest of the sun screening measures for it plays an important role in preventing epidermal carcinoma. People's perspectives and the screening measures adopted should be altered. A detailed analysis of features such as topographical, educational, age-related concerns of people provide a tool for further observations and wellbeing related programs.

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