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Research Article

**KNOWLEDGE, ATTITUDE AND PRACTICES REGARDING
BREAST SELF EXAMINATION AMONG FEMALE
MEDICAL STUDENTS OF ALLAMA IQBAL MEDICAL
COLLEGE, LAHORE****Sadia Jabeen, Sajal Haider, Sana Mannan, Sara Bano, Sania Javed**
Department of Community Medicine, Allama Iqbal Medical College, Lahore**Abstract:**

Background: Breast cancer is getting prevalence in many parts of the world for this there are many screening mechanisms to evaluate the diseased state. Breast self-examination is done for early detection and treatment of breast cancer.

Objective: To assess the knowledge, Attitude and practices regarding Breast Self-Examination among female medical students of Allama Iqbal Medical College, Lahore.

Methodology: This cross-sectional study was conducted in Allama Iqbal Medical College, Lahore during 2018-2019 academic year. After taking consent from the students they were provided with a questionnaire designed for the assessment of their knowledge, Attitude and practice regarding Breast Self-Examination. The data was analyzed on SPSS 21.0 for descriptive study.

Results: Total of 300 female medical students from all the years of MBBS of Allama Iqbal medical college, Lahore participated in our study. In our research, 254 (84.7%) respondents had some idea about BSE, while 46(15.3%) didn't have any idea about it. 218 (72.7%) disagreed that BSE will be embarrassing to them while 18(6%) agreed that it is embarrassing while 64(21.3%) had a neutral attitude. 18(6%) respondents out of 300 always do BSE, 149(49.7%) sometimes do it while 133(44.3%) never do it. 67(22.3%) respondents out of total 300 always advise other women to do BSE, 143(47.7%) sometimes advise others while 90(30%) had never advise it. 28(9.3%) students always discuss its importance with friends, 134(44.7%) sometimes discuss it while 138(46%) had never discussed it.

Out of total 300 respondents 22(7.3%) had poor knowledge, 264(88%) had average knowledge while 14(4.7%) students had good knowledge regarding BSE.

Conclusion: The results of this analysis reveals that majority of the women in targeted area has a good awareness about the risk issues and screening tests of the breast cancer. The results also highlight that the selected sample is found to be lacking the outlook and practice towards Breast Self-Examination.

Keywords: Breast Self-Examination

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INTRODUCTION:

Breast cancer is recognized as the second leading cause of cancer related death worldwide¹. While the incidence of the disease rises across the globe, it is interesting to note that mortality associated with it has been decreasing in high-risk countries.² This may be attributed to the increased efforts in promoting early detection and mammographic screening. With regular screening programs based on routine mammography, breast cancer mortality rates have significantly decreased.³

Breast Self-Examination is performed for detecting any abnormal mass in breast, a mean for early diagnosis of breast cancer.⁴ Three methods are used for breast cancer screening: breast self-examination, clinical breast examination and mammography.⁵ Most convenient method is breast Self-examination.⁶ Breast Self-examination is done between 7th and 10th day of menstrual cycle for early detection of any abnormality and in return seeking treatment.⁷

Breast cancer rates are increasing in developing countries due to lack of awareness. According to Breast Health Global Initiative Breast Self-Examination and Breast Cancer Awareness are early ways of detection in developing countries.⁸ Every one in nine Pakistani women is estimated to suffer from breast cancer which is of high incidence rate in ASIA.⁹ Its ratio is getting increased day by day due to advanced lifestyle and unawareness about BSE.¹⁰

Objective:

To assess the knowledge, attitude and practices regarding Breast Self-Examination among Female Medical Students of Allama Iqbal Medical College, Lahore.

Operational definition:

Monthly Examination of Breasts conducted by women following the five major steps of Breast Self-Examination which include examining both breasts for size, shape color and contour while looking in front of mirror with their arms straight, on the hips or over the head, to palpate or feel the breast both in standing and lying position using three finger pads.

MATERIAL AND METHODS:**Study Design:**

Cross sectional study

Study Setting:

Allama Iqbal Medical College, Lahore.

Duration of Study:

4 months.

Sample Size:

Sample size estimated from epi-info to estimate a proportion

Confidence level = 95%

Acceptable difference = 0.05%

Assumed proportion = 0.05%

Required Sample Size = 300

Sampling Technique:

Non probability / purposive sampling, Female medical students of all the years of MBBS.

Data Collection Procedure:

300 subjects those fulfilling the inclusion criteria were recruited for the study. After an informed consent a Performa was given and all information was entered in that Performa. Data was entered and analyzed in SPSS version 21. Frequency tables and percentages are generated for variables. The cross tabulation was done for variables of interest.

RESULTS:

The total respondents to our questionnaire were 300. All were females Out of them 26(8.7%) were of 19 years old, 27(9%) were of 20 years old, 91(30.3%) were of 21 years old, 109(36.3%) were of 22 years old and 47(15.7%) were of 23 years old. All the 300 responders were medical students, out of them 10(3.33%) were from 1st year, 38(12.67%) were from 2nd year, 58(19.33%) were from 3rd year, 154(51.33%) were from 4th year and 40(13.33%) were from final year of MBBS. In our research ,254 (84.7%) respondents had some idea about BSE, while 46(15.3%) didn't have any idea about it. 209(69.7%) respondents know of women who had breast cancer while 91(30.3%) didn't know. 208 (69.33%) respondents answered correctly that BSE should be started by 20 years of age.

218 (72.7%) disagreed that BSE will be embarrassing to them while 18(6%) agreed that it is embarrassing while 64(21.3%) had a neutral attitude.

277(92.3%) responded that doing BSE is not a wastage of time while 4(1.3%) said that it is a wastage of time while 19(6.3%) were neutral.

266(88.7%) had a view that all women should do BSE while 20(6.7 %) disagreed and 14(4.7%) were neutral.

159(53%) respondents disagreed that they never thought of BSE while 55(18.3%) agreed and 86(28.7%) were neutral.

201(67%) disagreed that it will not affect them because it does not run in their family while 30

(10%) were agreed about this and 69(23%) were neutral.

235 (78.33%) respondents out of 300 had poor knowledge about total steps of BSE while 21(7%) had fair knowledge ,28(9.33%) had good knowledge and 16(5.33%) had excellent knowledge.

Out of total 300 respondents 22(7.3%) had poor knowledge, 264(88%) had average knowledge while 14(4.7%) students had good knowledge regarding BSE. All the 1st year students in our research have average knowledge regarding BSE. Out of total 38 students of 2nd year who fill the questioner of our research 2(5.3%) have poor knowledge, 34(89.5%) have average knowledge while 2(5.3%) have good knowledge. Out of total 58 students of 3rd year 5(8.6%) have poor knowledge, 51(87.9%) have average knowledge while 2(3.4%) have good knowledge.

Table no 1:

age				
	Frequency	Percent	Valid Percent	Cumulative Percent
	19	26	8.7	8.7
	20	27	9.0	17.7
Valid	21	91	30.3	48.0
	22	109	36.3	84.3
	23	47	15.7	100.0
Total	300	100.0	100.0	

Table no 2:

Have you ever heard of any program on breast self-examination

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid yes	254	84.7	84.7	84.7
Valid no	46	15.3	15.3	100.0
Total	300	100.0	100.0	

In our research ,254 (84.7%) respondents had some idea about BSE, while 46(15.3%) didn't have any idea about it.

Table no.3:

do you know of women who have or had breast cancer?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	209	69.7	69.7	69.7
Valid No	91	30.3	30.3	100.0
Total	300	100.0	100.0	

209(69.7%) respondents know of women who had breast cancer while 91(30.3%) didn't know.

Out of total 154 students of 4th year 15(9.7%) have poor knowledge, 132(92.5%) have average knowledge while 7(4.5%) have good knowledge. Out of total 40 students of 5th year of our research 37(92.5%) students have average knowledge while 3(7.5%) students have good knowledge.

In total results 22(7.3%) students have poor knowledge, 264((88%) have average knowledge while 14(4.7%) students have good knowledge out of 300.

Statistics

Demographic data:

The total respondents to our questionnaire were 300. All were females Out of them 26(8.7%) were of 19 years old, 27(9%) were of 20 years old, 91(30.3%) were of 21 years old, 109(36.3%) were of 22 years old and 47(15.7%) were of 23 years old.

Table no.4:

	disagree		neutral		agree	
	Count	Row N %	Count	Row N %	Count	Row N %
BSE will be embarrassing to me?	218	72.7%	64	21.3%	18	6.0%
Doing BSE is wastage of time?	277	92.3%	19	6.3%	4	1.3%
All women should do BSE?	20	6.7%	14	4.7%	266	88.7%
Just never thought of BSE?	159	53.0%	86	28.7%	55	18.3%
It will not affect me, because it does not run in my family?	201	67.0%	69	23.0%	30	10.0%

218 (72.7%) disagreed that BSE will be embarrassing to them while 18(6%) agreed that it is embarrassing while 64(21.3%) had a neutral attitude.

277(92.3%) responded that doing BSE is not a wastage of time while 4(1.3%) said that it is a wastage of time while 19(6.3%) were neutral.

266(88.7%) had a view that all women should do BSE while 20(6.7 %) disagreed and 14(4.7%) were neutral. 159(53%) respondents disagreed that they never thought of BSE while 55(18.3%) agreed and 86(28.7%) were neutral.

2

01(67%) disagreed that it will not affect them because it does not run in their family while 30 (10%) were agreed about this and 69(23%) were neutral.

Table no 5:

	never		sometimes		always	
	Count	Row N %	Count	Row N %	Count	Row N %
I do BSE?	133	44.3%	149	49.7%	18	6.0%
I avoid learning method of BSE?	199	66.3%	84	28.0%	17	5.7%
I advise other women to do BSE?	90	30.0%	143	47.7%	67	22.3%
I discuss its importance with friends?	138	46.0%	134	44.7%	28	9.3%
I do BSE, but not according to its procedure?	130	43.3%	118	39.3%	52	17.3%

18(6%) respondents out of 300 always do BSE, 149(49.7%) sometimes do it while 133(44.3%) never do it.

199(66.3%) never avoid learning methods of BSE, 84(28%) sometimes avoid it while 17(5.7%) always avoid it.

67(22.3%) respondents out of total 300 always advise other women to do BSE, 143(47.7%) sometimes advise others while 90(30%) had never advise it.

28(9.3%) students always discuss its importance with friends, 134(44.7%) sometimes discuss it while 138(46%) had never discussed it.

130(43.3%) do BSE according to its procedure, 118(39.3%) sometimes do BSE but not according to its procedure while 52(17.3%) always do BSE but not according to its procedure.

Table no 6:

		Count	Column N %
do you know of women who have or had breast cancer?	yes	209	69.7%
	No	91	30.3%
at what age BSE is started?	20 years	208	69.3%
	30 years	48	16.0%
	40 years	44	14.7%
BSE is done on?	daily basis	20	6.7%
	weekly basis	131	43.7%
	monthly basis	149	49.7%
Risk factors for developing breast cancer is?	early menarche	27	9.0%
	menopause	156	52.0%
	both	117	39.0%
Chances of breast cancer?	increases with age	261	87.0%
	decreases with age	14	4.7%
	no effect of age	25	8.3%
Total steps of BSE are?	3	94	31.3%
	5	171	57.0%
	6	35	11.7%
BSE is done mostly?	in front of mirror	232	77.3%
	while lying down	35	11.7%
	while bathing	33	11.0%
In addition of examining breast, BSE includes examination of?	armpit	285	95.0%
	neck	9	3.0%
	abdomen	6	2.0%
Non-cancerous lumps on BSE are ?	5/10	183	61.0%
	7/10	80	26.7%
	8/10	37	12.3%

Table no 7:**Statistics**

N	Valid	300
	Missing	0
Mean		5.4233
Std. Deviation		1.31271
Minimum		2.00
Maximum		9.00

Table no 8:**K2**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Poor knowledge (Score 0 to 3)	22	7.3	7.3
	Average knowledge (score 4to 7)	264	88.0	95.3
	Good knowledge (Score 8 to 10)	14	4.7	100.0
	Total	300	100.0	100.0

Out of total 300 respondents 22(7.3%) had poor knowledge, 264(88%) had average knowledge while 14(4.7%) students had good knowledge regarding BSE.

Table no 9:

class * K2 Cross tabulation

			K2			Total
			Poor knowledge (Score 0 to 3)	Average knowledge (score 4to 7)	Good knowledge (Score 8 to 10)	
class	1st year	Count	0	10	0	10
		% within class	0.0%	100.0%	0.0%	100.0%
	2nd year	Count	2	34	2	38
		% within class	5.3%	89.5%	5.3%	100.0%
	3rd year	Count	5	51	2	58
% within class		8.6%	87.9%	3.4%	100.0%	
4th year	Count	15	132	7	154	
	% within class	9.7%	85.7%	4.5%	100.0%	
5th year	Count	0	37	3	40	
	% within class	0.0%	92.5%	7.5%	100.0%	
Total		Count	22	264	14	300
		% within class	7.3%	88.0%	4.7%	100.0%

All the 1st year students in our research have average knowledge regarding BSE.

Out of total 38 students of 2nd year who fill the questioner of our research 2(5.3%) have poor knowledge, 34(89.5%) have average knowledge while 2(5.3%) have good knowledge.

Out of total 58 students of 3rd year 5(8.6%) have poor knowledge, 51(87.9%) have average knowledge while 2(3.4%) have good knowledge.

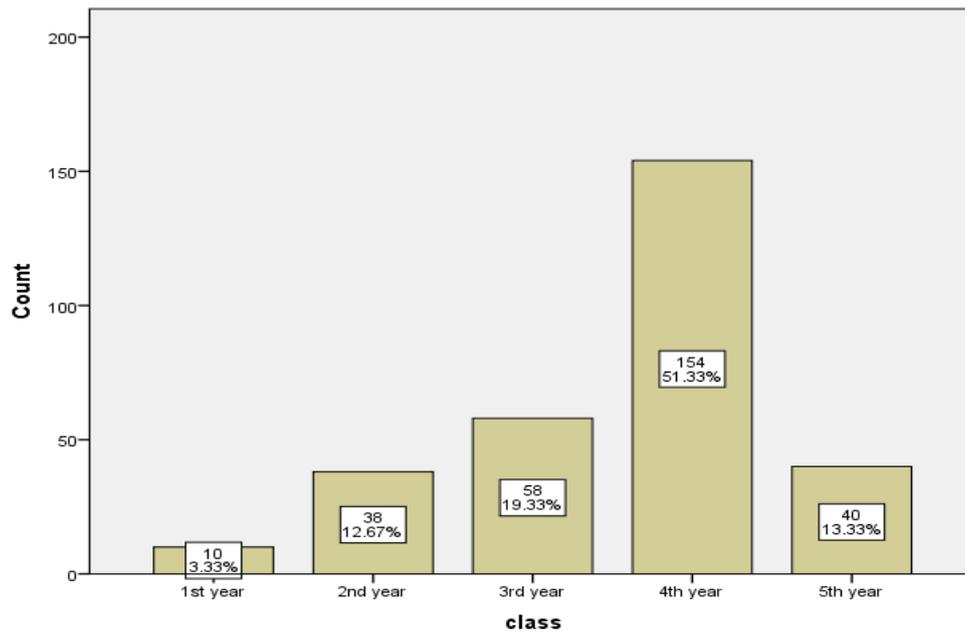
Out of total 154 students of 4th year 15(9.7%) have poor knowledge, 132(86.4%) have average knowledge while 7(4.5%) have good knowledge.

Out of total 40 students of 5th year of our research 37(92.5%) students have average knowledge while 3(7.5%) students have good knowledge.

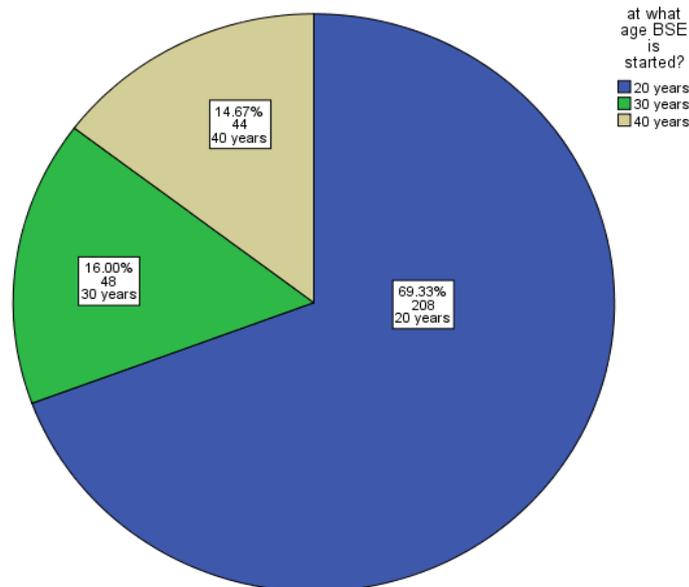
In total results 22(7.3%) students have poor knowledge, 264(88%) have average knowledge while 14(4.7%) students have good knowledge out of 300.

Table no 10:

Chi-Square Tests			
	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	6.966 ^a	8	.540

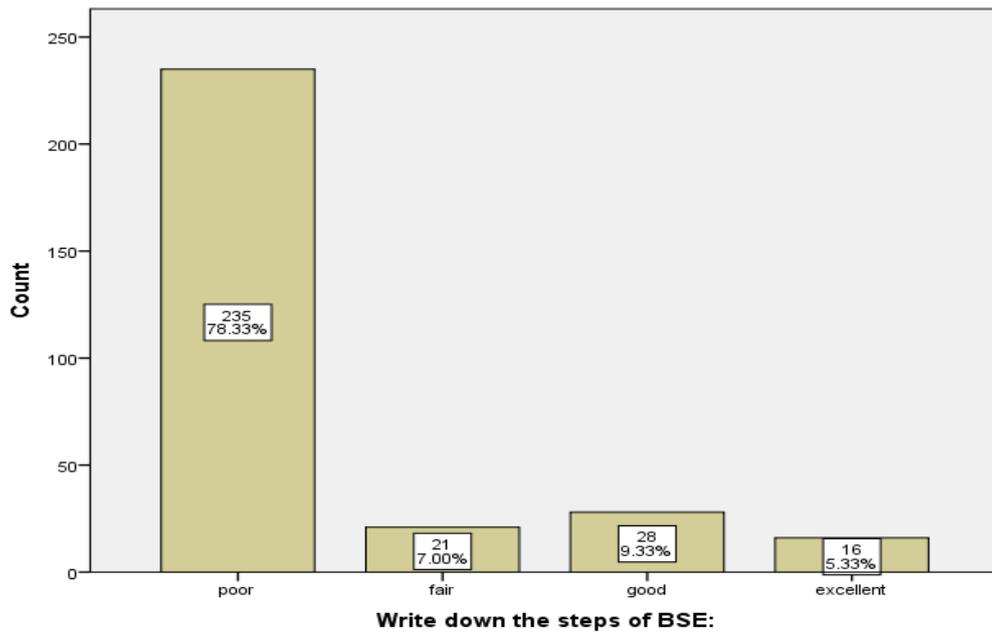
GRAPHS**Graph no 1:**

All the 300 responders were medical students , Out of them 10(3,33%) were from 1st year, 38(12.67%) were from 2nd year,58(19.33%) were from 3rd year,154(51.33%) were from 4th year and 40(13.33%) were from final year of MBBS.

Graph no. 2:

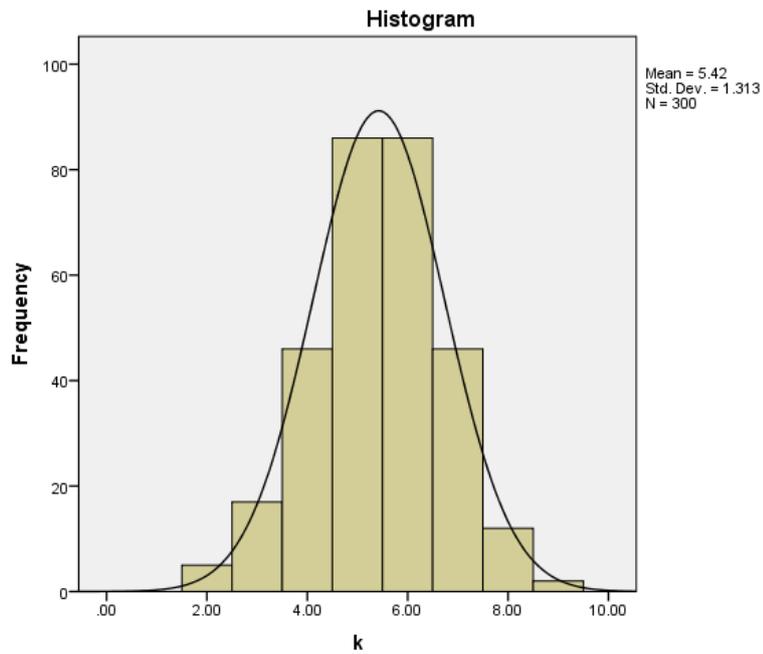
208 (69.33%)respondents answered correctly that BSE should be started by 20 years of age.

Graph no 3:



235 (78.33%) respondents out of 300 had poor knowledge about total steps of BSE while 21(7%) had fair knowledge ,28(9.33%) had good knowledge and 16(5.33%) had excellent knowledge.

Graph no.4:



DISCUSSION:

Breast cancer prevalence is increasing and one of the easiest and safest method to prevent it is doing BSE making it essential for all the females to be aware of its importance and practice it regularly. The study regarding knowledge, Attitude and practice is performed among the female medical students of Allama Iqbal Medical college, Lahore. Average knowledge of 264 (88%) respondents of our research is compared with the results of a study done in Karachi, Pakistan where it was seen that only 40.3% population was well aware of BSE procedure. This difference in knowledge could be due to difference in subjects selected for the study which in our study were medical students having better knowledge than non-medical subjects selected in Karachi research.

In our research 254(84.7%) had already heard about BSE which is compared with research done in Karachi, Pakistan in which 94% respondents had already heard about this procedure. one limitation to this is that our research was limited to a specific subject.

208(69.33%) students answered correctly in our research that BSE should be started by 20 years of age while in Karachi similar research on Pakistani women showed percentage to be 49 percent and 77.3% answered that BSE should be done in front of mirror while 51.9 percent had same view when research was done in Karachi. This difference may be due to better knowledge of medical students.¹³

87% answered that chances of breast cancer increases with age while in Pakistan the same study shows 67.7% people having the same view. The difference is again due to better knowledge of medical students.

The positive attitude of our participants toward BSE is 72% in absence of any breast complaint which is quite similar to a study done by Samina Khokher et al it was found that 60% of the respondents had positive attitude about BSE. These findings are in contrast to a study from Rawalpindi where only 31.6% of respondents had negative attitude towards diagnostic modalities for breast cancer.¹⁵

The practice of participants towards screening methods 6% is poor similar to a study carried out by Mahmoodi et al done in Tehran where 30% respondents had good practice.¹⁴

CONCLUSION:

The results of this analysis reveal that majority of the women in targeted area has a good awareness about the risk issues and screening tests of the breast cancer. The results also highlight that the

selected sample is found to be lacking the outlook and practice towards Breast Self-Examination.

Recommendations:

There should be increase in positive attitude and practice towards Breast Self-Examination through different seminars, poster publications highlighting importance of this procedure in early detection and treatment of Breast cancer.

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“A single conversation across the table with wise man is better than ten years, mere study of books”
Long Fellow.

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