

## **Status Of Breast Self Examination Among Health Professional Of Abia State University Teaching Hospital**

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### **ABSTRACT**

Breast self-examination (BSE) is recommended for breast cancer screening but most Nigerian women do not perform BSE regularly. Breast cancer, a significant cause of mortality, can often be tackled effectively if detected in an early stage. This may be achieved by mammography, physical examination by skilled practitioners or through breast self-examination. In this preliminary study, we present the responses received on breast self-examination among health professionals at the Abia State University Teaching Hospital, Aba, Abia State. One hundred questionnaires were distributed to final year female medical students, house officers (interns), pharmacists and nurses. Out of the 100 distributed, respondents were 94 (94%). Among the 94 it was found out that 79 (84) practice Breast self-examination, but the number that examine their breast monthly was only 45 (47.9%). With this low level of monthly breast self-examination, there is the need to create the awareness and encourage the regular monthly practice. Among the respondents 74 (78.7%) knew the gravity of breast cancer.

**Keywords:** Breast self-examination, Cancer.

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In Nigeria the incidence of Breast cancer is rising and affecting a younger population compared to the West, (Omer et al, 1986). Most cancer patients come to the doctor in much advanced stage of the disease. Breast cancer awareness programs (BCAP) are meant to help in the prevention and early detection of breast cancer. Breast cancer is a significant public health problem. There is therefore a need for creating the awareness in the community. It is worth considering public health programs that promise to reduce the incidence or morality of this disease. Self-detection practices and early reporting of symptoms are encouraged (Foster et al, 1981). It has been estimated that regular breast self-examination (BSE) practice could lead to an 18% reduction in animal breast cancer mortality (Greenwald et al, 1978).

Breast self-examination, as a screening measure for early detection of breast cancer is undertaken to complement professional examination of the breast and mammography (Eddy, 1983). In developing countries, the facility for mammography is not readily available. This usually results in being diagnosed at a much more advanced stage in developing countries because of the lack of these

valuable facilities. There is also the fact that failure of women in developing countries to appreciate the importance of early detection of the disease. The result is a much greater fatality rate from breast cancer in developing counties.

This study presents information on BSE programme awareness of health professionals of the Abia State University Teaching Hospital Aba, Nigeria. The result is expected to provide a baseline data for further researchers for non-health professionals in Nigeria where data in such surveys appear to be non-existent.

### **MATERIALS AND METHODS**

The study on Breast self-examination questionnaire was carried out at the Abia State University Teaching Hospital, Aba, Abia State. One Hundred questionnaires were distributed among ladies working in the medical field and comprised, final year medical students, house officers, nurses and pharmacists within the Teaching Hospital.

The subjects were informed about the increased incidence of breast cancer in Nigeria especially among young female population, and the problem of breast cancer patients coming late to the doctor in an advanced stage of the disease. The questionnaire was designed to capture the

following information (i) demographic data, (ii) age, (iii) family history of breast cancer, (iv) performance of breast self-examination, (v) timing of breast self-examination and (vi) knowledge of the consequences of breast cancer. The profile of respondents indicated that nine (9) respondents were final year female medical students, ten (10) house officers (interns), three (3) pharmacists and seventy-two (72) nurses. Six (6) respondents did not return their questionnaires. Age range of respondents was between 18 years and 52 years. To ensure anonymity identification numbers were assigned to subjects used in the survey.

## RESULT AND DISCUSSION

The results of age of respondents (Table 1), occupation of respondents (Table 2) are presented. The detailed analyses of the questionnaire items on BSE are presented in Table 3.

Age group (yrs)	No	Percentage
18 - 25yrs	44	46.8
26 - 35yrs	17	18.1
36 - 45yrs	20	21.2
46 - 52yrs	13	13.9

**Table 2: Occupation of Respondents**

Occupation	No	Percentage
Pharmacists	3	3.2
Final yr Med. Students	9	9.5
House Officers (Interns)	10	10.7
Nurses of all categories	72	76.6

**Table 3: Responses to the Questionnaire**

Questionnaire items	Responses		
	Yes	No	Not sure
Have you heard of BSE?	81	10	3
Do you practice BSE?	79	15	-
Lack knowledge of BSE	75	17	2
No of times BSE practiced			
Knowledge of Breast Awareness Program	61	33	-
Have you had mammography	8	86	-
Any F/H of Breast Cancer	5	89	-
Breast lump exercised previously.	7	87	-

Breast self-examination is recommended as a screening procedure by the American Cancer Society and National Cancer Institute to complement professional examination of the breast and mammography (Cancer facts and Figures 1987). In our own setting, we accept BSE as mammography facilities are not available to us in Nigeria. Although 81 (86.1%) of our health professionals have heard about BSE only 45 (47.9%) perform BSE monthly.

To explain the infrequent BSE performance studies (Stillman, 1977) have shown the beliefs and attitudes of women related to BSE performance. Some spoke about forgetting and lack of confidence, while others talked about fear of finding a lump, embarrassment, interference with usual routine, the pain associated with BSE and negative family reactions to one's performance of BSE (Trotta, 1980). Evaluation of public awareness, attitudes and misconceptions is of fundamental importance for the successful implementation of cancer control activities, like BSE (Luther et al, 1987). The scarcity of public awareness and proven means for breast cancer prevention prompts more reliance on the methods for early detection to improve patient outcomes. The primary goal of breast cancer awareness programs is to promote and develop breast cancer among medical professionals and society at large. This can be achieved by encouraging proper BSE. The rationale of the monthly BSE is for women to familiarize themselves with the consistency of the tissue as they are best placed to detect any new changes that occur.

This is why we have mounted this study, to be the basis for further public health lectures and health education, to health professionals first, then extended to non-health professionals in the larger society.

The present report is the initial presentation of a two-part survey by the Department of Surgery of Abia State University Teaching Hospital for BSE Programme among health and non-health professionals.

## CONCLUSION

BSE finds breast cancer in a curable stage. Provides reassurance as well as a sense of relief

and feeling of control over cancer. Since this method is the best alternative in the developing countries, this has to be adopted and encouraged.

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