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Research Letter

KNOWLEDGE AND PRACTICE OF CERVICAL CANCER SCREENING USING PAP SMEAR AMONG WOMEN ATTENDING ANTENATAL CLINIC AT ABA, SOUTH-EASTERN NIGERIA

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Cervical cancer is an important public health problem among adult women in Nigeria and other developing countries. It is estimated that there are about 25,000 new cases in Nigeria every year[1], and most present late. About 231,000 or more deaths occur annually due to cancer of the cervix worldwide[1, 2]. Cervical cancer is one of the few preventable cancers since it has a clear pre- cancer stage. Regular cytological screening programmes either organized or opportunistic have led to decline in cervical cancer incidence and mortality in the developed countries. Papinicolaou (Pap) smear for many years has been the gold standard and has led to a reduction in incidence of cervical cancer in Europe and North America[3]. Alternative methods of screening especially in resource limited settings such as visual inspection with acetic acid or Lugol's iodine are being promoted.[4, 5]. An earlier study on risk factors for cervical cancer among women in Aba identified several risk factors predisposing to cervical cancer which included: early age of initiation of sexual activity, multiple sexual partners and previous history of sexually transmitted disease.[6] other risk factors include smoking and use of steroidal oral contraceptive methods. In a community such as ours with these confirmed prevalent risk factors predisposing to cervical cancer, it is considered important to determine the antenatal women's knowledge of cervical cancer, screening with papinicolaous smear test as well the utilization of the Pap smear test. It is hoped that the findings of this study will prove useful during the organization of an intervention programme to sensitize the community about cancer of the cervix and its prevention. This was a hospital; based descriptive study done between 1st June, 2007 and 15th June, 2007 at the ante-natal clinic of the Abia State University Teaching Hospital, Aba. 100 consecutive antenatal women who gave informed consent to participate in the study were enrolled. A structured questionnaire was administered to elicit demographic data, knowledge of cervical cancer, cervical cancer screening with pap smear test as wellas the utilization of the test. Data analysis included descriptive statistics for demographicdata and content analysis for interview data. Ethical approval was obtained from the ethical committee of Abia State University teaching hospital Aba. A total of 100 consecutive antenatal clinic attendees were recruited for the study. Table 1 shows the socio-demographic characteristics. Two participants were teenagers, fifty were between 20-29 years old, forty-six were between 30 and 39 years old and two were between 40 and 49 years old. Majority of the study women (98%) were married. Four (4%) of the respondents had learned about pap smear and none knew what Pap smear screened for. None of the respondents had ever had a pap smear taken before. Thirty (30%) of the respondents had heard of the cancer of the cervix. (Table 2).

Table 1: **Socio -Demographic Characteristics.**

Characteristics	Number	Percentage (%)
Respondents:		
Age (Years)		
< 19	2	2
20 - 29	50	50
30 -39	46	46
40 -49	2	2
Marital Status:		
Married	98	98
Single	2	2
Widowed	0	0
Educational Level:		
Primary	2	2
Secondary	48	48
Post - Secondary	50	50
No Formal Education	0	0
Ethnic Origin:		
Igbo	94	94
Yoruba	2	2
Hausa/Fulani	1	1
Others	3	3

Table 2: **Knowledge of Cervical Cancer, Pap Smear and Utilization of Pap Smear.**

Variable	No.	Percentage (%)
Awareness of Pap Smear		
Yes	4	4
No	96	96
Have had Pap Smear Test in the Past.		
Yes	0	0
No	100	100
Awareness of what Pap Smear Screens for.		
Yes	0	0
No	100	100
Ever Heard of Cancer of the Cervix		
Yes	30	30
No	70	70

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Early detection of cervical cancer has reduced the mortality and morbidity of cervical cancer world wide, and it has been reported that both organized and opportunistic Pap smear taking has lowered incidence rates of cervical cancer.[7, 8]. In our study population only 4% of the women had heard about Pap smears. This is lower than 19.7% of Ibadan market women, who had heard about pap smear[9] as well as 16% of rural Kenyan women who had heard about Pap smear [10]. None of the women in our study had ever had a pap smear taken whilst 5.2% and 2.1% had ever had a pap smear taken in the Ibadan and Kenyan studies respectively.[9, 10]. These figures denote none and low utilization of the pap smear test in these African women in Nigeria and Kenyan. Only 30% of the women studied, had knowledge about the disease called cervical cancer. This is lower than 41.8% of women in the Ibadan study that had knowledge about cervical cancer[9]. Thus, knowledge of cervical cancer, pap smears test and Pap smear utilization in this study population was grossly inadequate. Studies elsewhere have shown that factors such as lack of knowledge about cervical screening contribute to low levels of cervical screening [11] as exemplified by our study population. Further, cancer of the cervix is expected to be highly prevalent here as other studies have also shown that cancer of the cervix is most common among poor communities with limited facilities such as exist in Aba for screening for cancer of the cervix.[12] In interpreting these results, some study limitations need to be considered. The sample size was small as this was a baseline study. Studies with much larger sample sizes in Aba and other communities in Abia State are warranted.

In conclusion, this study has shown that knowledge of cervical cancer and Pap smear test was inadequate among the antenatal women studied. Pap smear utilization was non existent. It is recommended that appropriate health education on cancer of the cervix and its prevention should be disseminated to Aba women through public enlightenment campaign by health care providers and the mass media. Organized or opportunistic screening programmes for cervical cancer is necessary in Aba, South- Eastern Nigeria.

REFERENCES

1. **Adewole IF.** Epidemology, Clinical features and management of cervical carcinoma in: **Okonofua F, Odunsi K**, (eds) Contemporary Obstetrics and Gynaecology for developing countries, Benin City. Women's Health and Action Research Centre. 2003: 289-315.

2. **Ferlay J, Parkin DM, Pisani P.** Globocan 2000. Cancer incidence, mortality and prevalence worldwide, version I.O. Lyon, International agency for Research on Cancer, 2001 (IARC Cancer Base No.5)

3. **Richard RM.** Screening. The next century Cancer. 1995: 76 (10 Suppl): 1919-27.

4. **Blumenthal PD, Gaffikin L, Chirenje ZM, McGrath J, Womack S, Shah K.** Adjunctive testing for cervical cancer in low resource settings with visual inspection, HPV and the Pap smear. Int J Gynaecol Obstet. 2001. 72: 47-53.

5. **Denny L, Kuhn L, Pollack A, Wainwright H, Wright TC Jr**. Evaluation of alternative methods of cervical cancer screening for resource poor settings.

6. **Feyi-Waboso PA, Kamanu C, Aluka C.** Awareness and risk factors for cervical cancer among women in Aba South Eastern Nigeria. Trop. J. Obstet Gynaecol. 2005; 22: 25-26.

7. **Parkin DM, Bray F, Ferlay J, Pisani P.** Global Cancer Statistics, 2002. CA cancer J Chin 2005; 55 (2): 74-108.

8. **Gustafsson L, Ponten J, Zack M, Adami HO.** International incidence rates of invasive cervical cancer after introduction of cytology screening. Cancer causes control. 1997; 8 (5): 755-763.

9. **Ayinde OA, Ogunbode OO, Adebayo OJ.** Determinants of cervical cancer knowledge and utilization of screening among a Nigerian female population. Trop J Obstet Gynaecol 2005; 22: 21-24.

10. **Kigen B, Omondi-Ogutu J, Machoki M, Gichangi P.** Abnormal cervical cytology among women in rural Kenyan population, J. Obstet Gynaecol. East Cent. Afr. 2005; 18: 113-8.

11. **Gichangi P.** Knowledge and practice about cervical cancer and pap smear testing among patients at Kenyatta National Hospital, Nairobi, Kenya. PHD. Thesis, University of Nairobi 2003.

12. **Sankaranayanan R, Budukh AM, Rajikumar R.** Effective screening programmes for cervical cancer in low income developing countries (Bulletin of the World Health Organization) Geneva 2001;79 (10)