(Original Res	Volume -10 Issue - 3 March - 2020 PRINT ISSN No. 2249 - 555X DOI : 10.3610	Volume -10 Issue - 3 March - 2020 PRINT ISSN No. 2249 - 555X DOI : 10.36106/ijar		
	Not OS Appling Resources and the second seco	Nursing A STUDY TO ASSESS THE KNOWLEDGE OF BREAST SELF- EXAMINATION (BSE) AMONG WOMEN OF SELECTED RURAL COMMUNITY OF MAHARASHTRA.			

Deepali Mane	Pursuing MSc (N)tutor, College Of Nursing, Armed Forces Medical College, Pune
Pompa Mukherjee*	Lecturer, Department Of Community Health Nursing, College Of Nursing, Armed Forces Medical College, Pune *Corresponding Author
Chitra Nair	Associate Professor, Department Of Community Health Nursing, College Of Nursing, Armed Forces Medical College, Pune
Ranjit Kaur Bhatti	Professor, Department Of Community Health Nursing, College Of Nursing, Armed Forces Medical College, Pune

ABSTRACT INTRODUCTION – Breast disorders are a significant health concern for women. Whether benign or malignant, intense feelings of shock, fear, and denial often accompany the initial discovery of a lump or change in the breast. These feelings can be associated both with the fear of death and with the possible loss of a breast. Throughout history, female breast has been regarded as symbol of beauty, femininity, sexuality and motherhood. A number of screening tests have been employed including clinical and self-breast, mammography, genetic screening, ultrasound, and magnetic resonance imaging. BSE is the recommended method in developing countries because it is easy, convenient, safe and requires no specific equipment.

OBJECTIVES:- To assess knowledge of breast self examination among rural women.

POPULATION: Women above the age group of 30 years.

METHODS: A cross-sectional descriptive study with Convenience sampling technique was used to collect data from 50 samples. The research variables were Breast Self-Examination, knowledge. Based on the objectives a semi-structured questionnaire was prepared to identify sociodemographic variables along with knowledge on Breast Self-Examination. Data was analysed using simple statistical tests. **RESULTS:** Majority of the subjects are found to possess poor knowledge (62%) and 38% of the sample had average knowledge of Breast Self-

Examination.

CONCLUSION- The finding of the study revealed that the samples does not acquire adequate knowledge about Breast Self-Examination.

KEYWORDS : Breast Self-examination, Knowledge.

INTRODUCTION

Breast disorders are a significant health concern for women. Although most breast pain is of a benign nature. Breast cancer develops from breast tissue. The first noticeable symptom of breast cancer is typically a lump that feels different from the rest of the breast tissue. More than 80% of breast cancer cases are discovered when the woman feels a lump. The earliest breast cancers are detected by a mammogram. Lumps found in lymph nodes located in the armpits can also indicate breast cancer. Brest Self Examination (BSE) is the recommended method in developing countries because it is easy, convenient, safe and requires no specific equipment. In view of the prevalence and importance of early detection of breast cancer a cross sectional study to assess the knowledge of BSE among women of a rural community.

METHODS/APPROACH

A cross sectional survey design was used for the study with interview technique. The tool was divided into three parts. Part I: Socio demographic data consisting 11 items. Part II: Knowledge questionnaire consisting 25 items in multiple choice format with a score of 01 for correct answer and 0 for wrong answer. Thus, maximum score is 25 and minimum 0. The total knowledge score is interpreted under three gradings- Poor Knowledge: 0-14 (<59%), Average knowledge: 15-19 (60-79%) and Good knowledge: 20-25 (>80%). Formal permission was taken from Gram Panchayat and MO I/C PHC to conduct the study.

RESULTS

Table 1: Frequency and percentage of sociodemographic variables n =50

30 18 2 48	60 36 04 96
2	04
2 48	• •
48	96
2	04
34	68
15	30
1	02
1	.5

en-examination, Knowledge.					
Marital Status	Single	12	24		
	Married	36	72		
	Widow	2	4		
Religion	Hindu	46	92		
	Muslim	2	4		
	Christian	0	0		
	Others	2	4		
Monthly	< 5000	44	88		
Income	5000 -10000	6	12		

Fig 1: Description of samples as per knowledge level

S No.	Grade	Score obtained	Percentage
1	Good	0	0
2	Average	19	38%
3	Poor	31	62%

Analysis shows the 38% of selected population has average knowledge while 62% of the population is having poor knowledge score.

CONCLUSION

The present study assessed the knowledge of BSE among women of selected rural community. From the analysis it can be concluded that the study population lacked the knowledge of BSE and breast cancer. Continuous reinforcement by health professionals and mass media through IEC programs reminding them about the procedure is likely to bring about a positive change and helping them in early detection of breast cancer or other breast problems if they occur.

REFERENCES

- Dadzi R, Adam A. Assessment of knowledge and practice of breast self-examination among reproductive age women in Akatsi South district of Volta region of Ghana. August C, editor. PLOS ONE. 2019 Dec 30;14(12):e0226925.
- August C, editor. PLOS ONE. 2019 Dec 30;14(12):e0226925.
 Nde FP, Assob JCN, Kwenti TE, Njunda AL, Tainenbe TRG. Knowledge, attitude and practice of breast self-examination among female undergraduate students in the University of Buea. BMC Res Notes. 2015 Dec:8(1):43.
- Ayed A, Eqtait F, Harazneh L, Fashafsheh I, Nazzal S, Talahmeh B, et al. Breast Self-Examination in Terms of Knowledge, Attitude, and Practice among Nursing Students of Arab American University/ Jenin. J Educ Pract. 2015;13.
- Allemani C, Matsuda T, Carlo VD, Harewood R, Matz M, Nikšić M, et al. Global surveillance of trends in cancer survival 2000–14 (CONCORD-3): analysis of individual records for 37 513 025 patients diagnosed with one of 18 cancers from 322

population-based registries in 71 countries. The Lancet. 2018 Mar 17;391 (10 125):1023-75.

- CONCORD Programme [Internet]. [cited 2020 Feb 2]. Available from: https://csg.lshtm.ac.uk/research/themes/concord-programme/ 5
- Siddharth R, Gupta D, Narang R, Singh P. Knowledge, attitude and practice about breast 6. cancer and breast self-examination among women seeking out-patient care in a teaching hospital in central India. Indian J Cancer. 2016;53(2):226.
- sathian B, Asim M, Mekkodathil A, James S, Mancha A, Ghosh A. Knowledge regarding breast self-examination among the women in Nepal: A meta-analysis. Nepal J 7. Epidemiol. 2019 Jun 30:9(2):761-8
- Ewaid SH, Shanjar AM, Mahdi RH. Knowledge and practice of breast self-examination 8. among sample of women in Shatra/Dhi-Qar/Iraq. Alex J Med. 2018 Dec 1;54(4):315–7. Copperbelt University School of Medicine, Nkana Road, P.O. Box 71191, Ndola 10101,
- 9. Zambia, Ramson LM. Knowledge attitude and practice of breast-self examination for
- Zambia, Kamson LM. Knowledge attrude and practice of beast-serie examination for early detection of breast cancer among women in roan constituency in luanshya, Copperbelt province, Zambia. Asian Pac J Health Sci. 2017 Sep 30;4(3):74–82. Toan DTT, Son DT, Hung LX, Minh LN, Mai DL, Hoat LN. Knowledge, Attitude, and Practice Regarding Breast Cancer Early Detection Among Women in a Mountainous Area in Northern Vietnam. Cancer Control. 2019 Jan;26(1):107327481986377. Moore KJ. The Frequency of Breast Self-Examination in Women Who Participated in 10.
- 11.
- the Breast Cancer Prevention Trial. 36. Kalliguddi S, Sharma S, Gore C. Knowledge, attitude, and practice of breast self-examination amongst female IT professionals in Silicon Valley of India. J Family Med 12 Prim Care. 2019;8(2):568. Tewabe T, Mekuria Z. Knowledge and practice of breast self-examination among
- 13. undergraduate student in Bahir Dar University, North-West Ethiopia, 2016: A cross-sectional study. J Public Health Afr [Internet]. 2019 Jun 4 [cited 2020 Feb 2];10(1). Available from: https://publichealthinafrica.org/index.php/jphia/article/view/805
- Sujindra E, Elamurugan T. Knowledge, attitude, and practice of breast self-examination in female nursing students. Int J Educ Psychol Res. 2015;1(2):71. 14 15
- Park K. Preventive and social medicine. 25th edn. New Delhi: M/s. Banarasidas Bhanot Publishers; 2005. 16 Wagner FB Jr., Martin RG. History of the therapy of breast disease, consequences of
- breast cancer. The Breast 2001;I:1-16.
- 17 Menon S. How to prevent breast cancer? Herald of Health 2001 Mar; 4-7 18
- Nichols DH. The epidemiologic characteristic of breast cancer. Clinical Obstetrics and Gynaecology 1994; 37(4):925-32. 19
- Rao DN, Ganesh B, Estimate of cancer incidence in India in 1991. Indian Journal of Cancer 1998; 35:10-8. 20
- Ascani MA. Mastering medical surgical nursing. Pennsylvania: Springhouse Corporation; 1998.

41