

Original Research Article

AWARENESS AND PRACTICE OF PAP SMEAR AMONG FEMALE HOSPITAL WORKERS IN ABIA STATE UNIVERSITY TEACHING HOSPITAL ABA SOUTH EAST NIGERIA

Abstract

Background: Cervical cancer is the second most commonest cancer in females worldwide and the commonest cancer in the female genital tract. Early detection is critical in the diagnosis.

Objective: To determine the awareness and practice of pap smear among female health workers in Abia State University Teaching Hospital (ABSUTH).

Method: This was a cross-sectional descriptive study conducted among female hospital staff of (ABSUTH), About 150 questionnaires were administered out of which 124 responded giving a response rate of 82%. Data was analyzed using SPSS version 20.

Result: A total of 124 female workers; 76(61.3%) health workers and 48(38.7%) support staff participated in this study. Their mean age was 40.7 ± 8.7 years. About 76(61.3%) of the respondent had heard of pap smear. However more than half of them 64(52.4%) were not aware that pap smear was being done in ABSUTH. Only 14(11.3%) of the respondents had done Pap smear previously. There was a statistically significant association between cadre of staff and awareness of pap smear ($P < 0.001$) in addition, health workers were about 4 times more likely to have ever heard of pap smear than support staff (OR 3.92, 95% CI 1.812- 8.45 P 0.00)

Conclusion: The study observed a fair awareness and very poor practice of pap smear among female hospital staff who ought to be at the forefront in enlightening their environment.

Keywords: Awareness, practice, pap smear, female, hospital workers.

Introduction

Cervical cancer is the second most commonest cancer in females world wide {1}and the commonest cancer in the female genital tract {2,3,4,5}. There are two types of cervical cancer: Squamous cell cancer and adenocarcinoma. About 80 to 90 % of cervical cancers are squamous cell cancers while 10 to 20% are adenocarcinoma{5}. In United States, more than 12,000 women are estimated to be diagnosed with cervical cancer and more than 4,000 deaths annually{5}. National cancer coalition 2008 discovered that the main reason for the high incidence of cancer resulted from lack of effective screening programs{5}. Cervical cancer is known to be one of the most preventable cancers amongst others. Death from cervical cancer has declined by approximately two percent per year in the United States since the knowledge of aduprevention improved {5}.. Similarly deaths from cervical cancer have fallen over the last 20 years in the United Kingdom and the reduction is mainly due to the National health service cervical screening programme, which may detect changes in the cells of the cervix at a pre cancerous stage {6}.

National Cervical Cancer Coalition 2008, estimated that only 5% of women in Nigeria had been screened for cervical dysplasia in the past 5 years compared to 40 - 50% seen in developed countries {5}.

. World health organization 2010 estimated that every year 9,922 women are diagnosed with cervical cancer in Nigeria out of which 8,030 die of the disease{7}.

Previous work done by Olukoya in 1989 discovered that most women in Nigeria presented with advanced disease where radiotherapy and hysterectomy were of no benefit. He noted the following as the reasons for late presentation: ignorance about the condition and symptoms, fatalistic attitudes, embarrassment, readiness to attribute neoplastic disease to supernatural causes, fear of confirmation of suspicion and the perennial problem of low coverage of the population by health care services especially the rural areas{8}..

Implementation of effective cervical screening program is critical as there is currently no mass program (that had touched every part of the country) for screening and detection of cancer in Nigeria .

Early detection is critical in the diagnosis of cervical cancer as precancerous cervical cell changes and early cancers of the cervix generally do not cause symptoms. For this reason, regular screening through Pap smear can help catch precancerous cell changes early and prevent the development of cervical cancer.

Pap smear is a cytological screening test with proven efficacy in reducing cervical cancer incidence and mortality. A study by Gustafsson et al showed that incidence of cervical cancer was reduced by as much as 90% with a very effective screening program {8}.

Studies conducted in the Northern part of Nigeria showed fair knowledge, good attitude but poor practice of cervical cancer screening amongst the market women{9}.. Similar situation was found even amongst health workers in a study conducted in Enugu South East Nigeria{10}. . There is paucity of information regarding the knowledge of cervical cancer, attitude and practice of Pap smear in our environment, hence the need for this study.

Methodology

This was a cross-sectional study conducted among female hospital staff of Abia state university teaching hospital (ABSUTH). ABSUTH is a tertiary healthcare institution located in Aba, south east Nigeria.

The study included all consenting female staff; exclusion criteria included those on leave and those that did not give their consent. The female workers were categorized into two groups; health workers and support staff.

Health workers included; Doctors, Nurses, Pharmacist, lab. Scientist and Physiotherapist. Support staffs included; administrative staff, technical staff, security and ward orderlies. Participants were selected through simple random sampling.

Data were collected using semi-structured self administered/interviewer administered questionnaire after obtaining an informed consent from the respondents. The questionnaire

obtained information on socio-demographics, including; age, marital status, number of children, occupation and number of work years in the institution.

Information was also obtained on the following; haven heard of Pap smear, sources of information, what Pap smear is used for, uptake of the screening services, the last time pap smear was done, reasons for not doing it, symptoms of cervical cancer, knowledge of availability of Pap smear in the institution and previous enlightenment on Pap smear. Information on correct age for pap-smear was also sought from respondents.

Ethical committee of Abia State University Teaching Hospital reviewed and approved the study protocol.

Data were entered and analyzed using SPSS version 20, qualitative variables were summarized as counts and percentages while Chi-square and logistics regression were used for associations and $p < 0.05$ was considered statistically significant.

Results

About 150 questionnaires were administered out of which 124 responded giving a response rate of 82%. The mean age of the respondents was 40.7 ± 8.7 years, One hundred and two (81.5%) were married, 17(13.7%) were single while 6(4.8%) were widowed. (table 1). Health workers constituted 76(61.3%) while 48(38.7%) were support staff. Majority 70(56.5%) of the workers had worked for more than 10yrs while 54(43.5%), had worked for less than 10yrs.

About 76(61.3%) of the respondent had heard of pap smear while 48(38.7%) had not heard. Concerning the source of information about pap smear, about 43(56.6%) heard about it from the hospital; 10(7.6%) heard it from television; 6(7.9%) from free screening programme; 4(5.6%) from friends while 13(17.1%) did not specify their source of information. Among the respondents, 75(60.5%) knew what pap smear was used for; 20(16.1%) were not sure while 29(23.4%) did not know. In terms of enlightenment on Pap smear only about 13(10.5%) had received formal enlightenment while 111(89.5%) had not. In addition, more than half of the respondents 64(52.4%) were not aware that pap smear was done in ABSUTH. Only 40(32.3%)

of the respondent knew the age a woman should do Pap smear. While 73(67.7%) did not know (table 2).

For the practice of pap smear, only 14(11.3%) of the respondent had done Pap smear previously while 110(88.9%) of the respondent had not. For respondents that had not done pap smear, about 68(61.8%) gave no reason for not doing it, 20(18.2%) felt it was not necessary, 14(12.7%) couldn't due to of lack of finances while 8(7.3%) were afraid of discovering cancer (table 3).

There was a statistically significant association between cadre of staff and awareness of pap smear ($\chi^2 = 12.71$, $P < 0.001$) while no statistical significant association was found between age of staff, marital status, working experience and awareness of pap smear (Table 4) Logistic regression showed that the health workers were about 4 times more likely to have ever heard of pap smear than support staff (OR 3.92, 95% CI 1.812- 8.45 P 0.00).

Table 1:.Socio- demographic Characteristics

Parameter (N=124)	Frequency	Percentage (%)
Age		
<40	59	47.6
40yrs &above	65	52.4
Marital status		
Single	17	13.7
Married	101	81.5
Widowed	6	4.8
Occupation		
Health workers	76	61.3
Support staffs	48	38.7
Work experience		
<10years	54	43.5
10years and above	70	56.5

122 **Table 2 : Awareness of Pap Smear Amongst ABSUTH Workers**

Parameter	Frequency(N=124)	Percentage (%)
Ever heard of pap smear		
Yes		
No	76	61.3
	48	38.7
Sources of information		
Hospital	43	56.6
Television/radio	10	7.6
Friends	4	5.6
Free screening program	6	7.9
Others	13	17.1
Pap smear is used to detect precancerous growth		
Yes	75	60.5
No	20	16.1
Not sure	29	23.4
Age for pap smear		
20-30years	40	32.3
31-40years	36	29
40-50years	17	13.7
Above 50 years	1	0.8
Don't know	16	12
Formal enlightenment on pap smear		
Yes		
No	13	10.5
	111	89.5
Is pap smear done in the ABSUTH?		
Yes		
No	59	47.6
	64	52.4

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130 **Table 3: Practice of Pap Smear Among Female ABSUTH Workers**

Variable	Frequency	Percent
Ever done pap smear before		
Yes		
No	14	11.3
	110	88.7
Last time pap smear was done		
0-6month		
7-12month	4	28.6
1-2 years	2	14.3
>2years	3	21.4
	5	35.7

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132 **Table 4: Symptoms of Cervical Cancer among Respondents**

Ever had Irregular Bleeding		
Yes		
No	2	1.6
Ever had vaginal pain	122	98.4
Yes		
No	3	2.5
Ever had foul smelling vaginal Discharge	121	97.5
Yes	2	1.6
No	122	98.4

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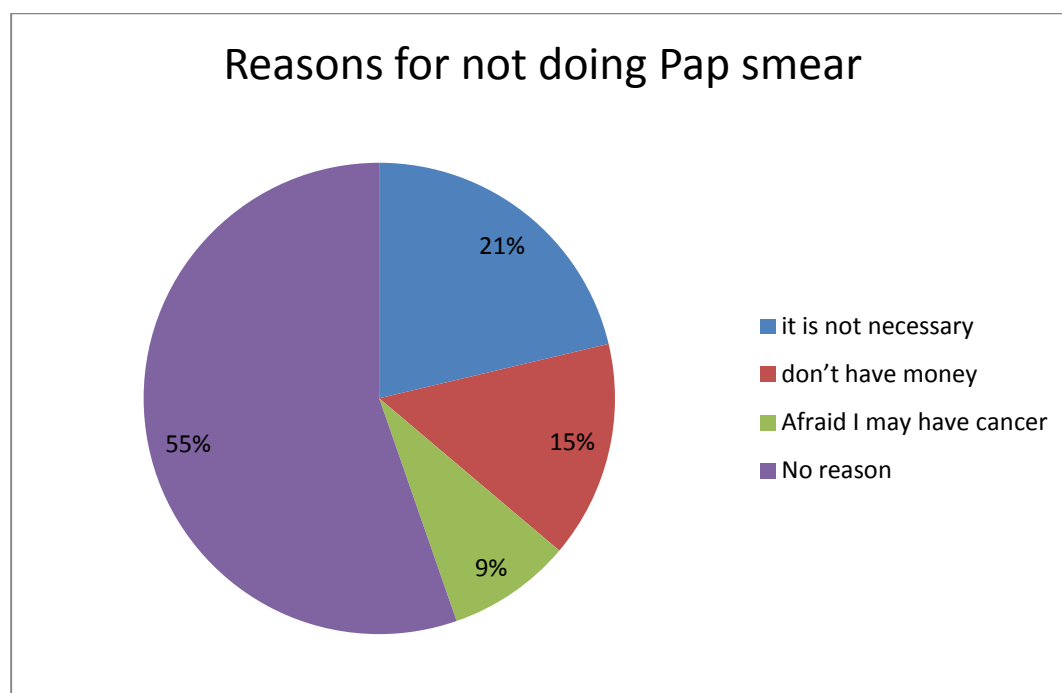


Figure 1: Respondent's reason for not doing pap smear

Table 5: Association between Socio-demographic Parameters and Ever Heard of Pap Smear

Parameters	Heard of pap smear. Frequency (%)	Not heard of pap smear. Frequency (%)	Chi- square	p-value
Age				
<40	33(55.9%)	2.6(44.1%)	0.24	1.36
40yrs & above	43(66.2%)	22(33.8%)		
Occupation				
Health workers	56(73.7%)	20(26.3%)	12.71	0.001*
Support staff	20(41.7%)	28(58.3%)		

Marital status				
Single	11(64.7%)	6(35.3%)	5.30	0.07
Married	64(63.4%)	37(36.6%)		
Widowed	1(16.7%)	5(83.3%)		
Work experience				
<10years	32(59.3%)	22(40.7%)	0.68	0.16
10years and above	44(62.9%)	26(37.1%)		

*Statistically significant

Table 5 shows the association between sociodemographic characteristics and awareness of Pap-smear. There was a statistically significant association between cadre of staff and awareness of pap smear while no significant association was found between age of staff, marital status, working experience and awareness of pap smear.

Discussion

The study showed a fair knowledge of cervical cancer screening with pap smear as 61.3% of the respondent were aware of pap smear. This finding is in keeping with an Indian study by Agam B *et al* {12}. where 65.5% of the participants were aware of pap smear. However, previous study done in this environment amongst women in Aba by Feyi-Waboso *et al* reported only 16% {13}..The difference in level of awareness between this study and our findings can be attributed to the fact that majority of our respondents were health workers. “Hospital” was the major source of information of pap smear among these respondents. This could also be as a result of their work environment.

About 60.5% of the respondents were aware that pap smear is used to detect precancerous changes in the cervix however only 32.5% of the respondents had a correct knowledge of the age to start pap smear. This is close to the results obtained in another study {14}. where 55.7% were aware that pap smear is used to detect premalignant lesion. Among the respondents, only 13(10.5%) had received a formal enlightenment, and this explained why majority (52.4%) of the participants had no knowledge of pap smear being done in our hospital. This shows a knowledge

gap among the staff about laboratory services available in the hospital and as such, staff enlightenment and orientation is required.

The practice of pap smear amongst the respondent was generally poor as only 11.1% had ever done it before. This finding agreed with aforementioned studies done in this environment¹³ and another study{15}. done in Enugu amongst certified nurses where only 16% and 12.2% respectively had done pap smear{13, 15}.. The story is not different in India, where there has been well established national cancer program, as only 9.5% of the participants had undergone pap smear screening{12}.. The situation in the United States of America is totally different as tremendous amount of effort had been devoted into cancer screening, a study on frequency of pap smear amongst American women estimated that 61 million women had at least one pap smear in the year 2000{16}. This study also reported that majority of the women were being screened annually.

Majority of the respondents (66.1%) who had not done pap smear gave no reason,(figure 1) some respondents (16.1%) felt it was not necessary, 13.3% gave financial reasons while others (6.5%) did not do it for fear of discovering cervical cancer. Generally, the reason for not doing pap smear may be alluded to the fact that majority (97%) of the respondents did not have symptoms associated with cervical cancer. This finding buttresses the fact that preventive care is still a major issue in our environment as people wait for symptoms of a disease to occur before taking action. The attitude of the respondents to pap smear is similar to that observed by Ajibola Idowu *et al* who found that low risk perception was the main reason attributed to non screening of most of the respondents who had never been screened{17}..There was a statistically significant association between cadre of staff and awareness of pap smear ($\chi^2= 12.71$, $P < 0.001$) while no statistical significant association was found between age of staff, marital status, working experience and awareness of pap smear (Table 4) The study showed that the health workers were about 4 times more likely to have ever heard of pap smear than support staff (OR 3.92, 95% CI 1.812- 8.45 $P < 0.001$). This supports the facts that by reason of their academic background health workers are better enlightened and are more knowledgeable than support staff. These observations are different from that of a Jamaican study{18}. where married women were found to be two times more likely to have had a Pap smear than single women

Conclusion and Recommendation

The study observed a that the laboratory staff in collaboration with the hospital fair awareness and very poor practice of pap smear among female hospital staff who ought to be at the forefront in enlightening their environment

The study therefore recommends management should create awareness on the investigations available in their facility and such information disseminated to her workers.

More public enlightenment should be made on preventive approaches to the control of cervical cancers and pap smear offered at a subsidized rates

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