Breast Self-Examination and Attitude to Breast Lumps Among Female Students in a Nigerian University

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Abstract

Context: Majority of the patients with breast cancer seen at the UNTH Enugu present with advanced disease. This, we believe, is partly due to late detection of breast lumps. Screening tools like mammography and clinical breast examination (CBE) are not available to most of our patients. Practice of breast self examination (BSE) may increase early detection of breast lumps and thus breast cancer. This may improve survival and reduce the use of radical mutilating surgery for treatment.
Objective: The aim of the study is to determine the attitude to breast lumps and the awareness and practice of BSE among female students of University of Nigeria.
Study Design, Setting and Subjects: This is a cross-sectional study of female students of both Nsukka and Enugu campuses of the University of Nigeria. We used self-administered semi-structured questionnaires to obtain the relevant data.
Results: A total of 654 respondents with a mean age of 21.7 years was obtained. Most of the students know about BSE but only 27.0% performed monthly BSE. On just noticing a breast lump, 66.5% of the students would seek immediate medical attention while the rest will do that in the presence of other associated symptoms. Biopsy of a breast lump for histology was considered the most appropriate alternative by 66.0% of the students while 15% felt that any lump in the breast should be removed and discarded.
Conclusion: There is need to educate the female population on the medical significance of breast lumps. Encouragement to know and practiced BSE will likely promote early detection of breast lumps and thus breast cancer.

Key Words: Breast Self-Examination, Masses [Trop J Obstet Gynaecol, 2006, 23:165-166]

Introduction

Long-term survival in breast cancer depends largely on the stage of disease at which the patient presents for treatment [1,2]. Mammography and CBE provide effective tools for screening and early detection with reduction in mortality by about one third in women aged 50-59 years[3]. Breast self-examination is a safe, non-invasive, inexpensive and attractive possible method of screening. Its efficacy for early detection and reduction in mortality has not been supported by randomized controlled clinical trials but some studies have shown a reduction in mortality and improved survival [4]. Breast self examination will most likely increase the likelihood of breast conserving and less mutilating surgery thereby improving quality of life even if there is no overall increase in survival[5]. It has also been shown that training in BSE improves the ability of women to accurately detect breast lesions[6]. Even in places where yearly CBE with or without mammography are available, majority of patients reported self-detection of breast lesions[7]. How aware is the female population in our environment of BSE and what is their general attitude to breast lumps? If awareness increases with level of education, as one would suppose, then the female university students could provide a reliable index and reference point for the entire female population.

Methods

This was a cross-sectional study of female students at the Nsukka and Enugu campuses of the University of Nigeria. A semi-structured self-administered questionnaire was used to obtain data on age, marital status, course of study knowledge and practice of BSE and general attitude to breast lumps.

Results

A total number of 654 respondents was obtained (277 from Nsukka campus and 377 from Enugu campus). The age range was 17 years to 40 years with a mean age of 21.7 years. Most of the respondents (74.0%) were single. Most of them (88.0%) also knew about BSE but only 27.0% performed monthly BSE (Table 1). Majority of the students (66.5%) would seek immediate medical attention on noticing a breast lump which otherwise is asymptomatic. The rest would only seek medical attention if there are other associated symptoms like pain, nipple discharge, itching, increasing size of lump etc. (Table 2). Among the presented therapeutic options, 66.0% of the students considered surgical removal of a lump for further tests the most appropriate alternative. Approximately 15% of the students felt that any lump in the breast should simply be removed and discarded.

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Discussion

Most of the respondents know about BSE but less than one third practice it monthly. More than half of the studied population have a healthy attitude to breast lumps in general.

Being a cross-sectional sample population study, one cannot totally eliminate the bias that may arise from the distribution of the questionnaires. A stratified or cluster sampling method might have been more ideal but that would be more tedious with more need for manpower. Also since part of the questionnaire is structured, some respondents may tick options they would not have volunteered without such prompting. However, this was adopted to reduce the possible responses to a manageable level.

With a figure of 88.0%, awareness of BSE is high among the respondents. This contrasts sharply with 40.6% obtained in a study carried out among a community in Lagos State, Nigeria[8]. This may be due to the fact that less than 10% of that study population had tertiary education. A similar study among university students in the same state revealed an awareness level of 52.5% and 72.0% for the two schools studied[9].

That 33.5% of the respondents would only seek medical attention for breast lumps in the presence of other associated symptoms is worrisome. Since most malignant breast lesions present only as a lump, this attitude could lead to delay in the presentation, diagnosis and subsequent treatment. The students who know (85.0%) that excised lumps should be sent for further tests may demand such even if the "surgeon" would rather discard the specimen. The bulk of the respondents fell within an age range where most breast lumps are benign. Without further enlightenment their attitude and awareness may not necessarily change in later years when an increasing proportion of breast lumps prove malignant.

There is, therefore, need to educate the female population on the significance of breast lumps. This should be started at the primary health care level and continued thereafter in settings like out-patient clinics, family planning clinics, and immunization centers etc.

This study did not assess whether the respondents who affirmed knowledge of BSE actually know the correct procedure for BSE. This is an important area for future research. Training and encouraging the practice of BSE will likely promote early detection of breast lumps and hence breast cancer[6].

Table 1. Practice of breast self examination

Frequency	Number	(%)
Daily	55	(12.8)
Weekly	80	(18.6)
Monthly	116	(27.0)
Every 2-6 months	63	(14.7)
Yearly	69	(16.0)
Others	47	(10.9)
Total	430*	100.0)

* Some respondents did not fill this section of the questionnaire.

Table 2. Factors that prompt medical consultation

Factor	**Number**	**(%)**
Pain	131	(20.0)
Increasing Size	48	(7.3)
Nipple discharge	38	(5.8)
Warmth	9	(1.4)
Lump alone	428	(65.5)
Total	654	(100.0)

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