

KNOWLEDGE AND PRACTICE OF WOMEN ATTENDED IN PRIMARY HEALTH CARE ABOUT PAPANICOLAU TEST

Conhecimento e prática de mulheres atendidas na atenção primária a saúde sobre o exame papanicolau

Conocimiento y práctica de las mujeres asistidas en atención primaria de salud sobre el examen de papanicolau

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ABSTRACT

Objective: to evaluate the knowledge and practice of women assisted in Basic Health Units in relation to the Pap smear. **Method:** this is a quantitative, descriptive study with a cross-sectional design. 320 women living in the area covered by three Basic Health Units in the city of Caxias-MA were interviewed. **Results:** although almost all of the women interviewed heard about the Pap smear exam 311 (97.2%), more than half of them had inadequate knowledge 233 (72.8%). It was also noticed that despite the fact that more than half were classified as having inadequate knowledge, most women had an adequate practice 187 (58.44%). **Conclusion:** thus, this study showed that there was no association between the level of knowledge and the practice of women. Therefore, there is a precarious knowledge of the majority of women about the cervical cancer preventive exam, resulting in an erroneous attribution about its purposes.

DESCRIPTORS: Pap smear; Women's health; Cervical cancer; Primary prevention; Public health nursing.

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RESUMO

Objetivo: avaliar o conhecimento e a prática de mulheres atendidas em Unidades Básicas de Saúde em relação ao exame Papanicolaou. **Método:** trata-se de um estudo quantitativo, descritivo com delineamento transversal. Foram entrevistadas 320 mulheres residentes na área de abrangência de três Unidades Básicas de Saúde da cidade de Caxias-MA. **Resultados:** apesar da quase totalidade das mulheres entrevistadas terem ouvido falar do exame Papanicolaou 311 (97,2%), mais da metade delas apresentou um conhecimento inadequado 233 (72,8%). Percebeu-se também, que apesar de mais da metade serem classificadas como tendo um conhecimento inadequado, a maioria das mulheres apresentaram uma prática adequada 187 (58,44%). **Conclusão:** desta forma, este estudo mostrou que não houve uma associação entre o nível de conhecimento e a prática das mulheres. Portanto, existe conhecimento precário da maioria das mulheres sobre o exame preventivo do Câncer do Colo do Útero, tendo como consequência uma atribuição errônea sobre a finalidades do mesmo.

DESCRIPTORIOS: Exame papanicolaou; Saúde da mulher; Câncer do colo do útero; Prevenção primária; Enfermagem em saúde pública.

RESUMÉN

Objetivo: analizar el conocimiento y la práctica de las mujeres atendidas en las unidades básicas de salud en relación con la prueba de Papanicolaou. **Método:** este es un estudio cuantitativo, descriptivo con un diseño transversal. Se entrevistó a 320 mujeres que viven en el área cubierta por tres Unidades Básicas de Salud en la ciudad de Caxias-MA. **Resultados:** aunque casi todas las mujeres entrevistadas escucharon sobre el examen de Papanicolaou 311 (97.2%), más de la mitad tenían conocimiento inadecuado 233 (72.8%). También se observó que, aunque más de la mitad se clasificaron como de conocimiento inadecuado, la mayoría de las mujeres tenían una práctica adecuada 187 (58.44%). **Conclusiones:** por lo tanto, este estudio mostró que no había asociación entre el nivel de conocimiento y la práctica de las mujeres. Por lo tanto, existe un conocimiento precario de la mayoría de las mujeres sobre el examen preventivo del cáncer de cuello uterino, lo que resulta en una atribución errônea sobre sus propósitos.

DESCRIPTORIOS: Papanicolaou; Salud de la mujer; Câncer cervical; Prevención primaria; Enfermería de salud public.

INTRODUCTION

The Pap smear exam, also known as oncotic colpopcytology or cervical cytological examination, is a manual method performed by professional nurses and doctors that allows the identification of cells suggestive of pre-invasion to malignant lesions, through multichromic staining of slides containing exfoliated cervical cells. It is a low-cost, easy to perform and highly effective method for the detection of cervical alterations, with wide use in Cervical Cancer (CC) control programs.¹

The effectiveness of the examination and the long detectable pre-clinical phase of this neoplasm make early diagnosis through the procedure the best strategy for prevention.² However, although this method was introduced in Brazil in the 1950s, it is estimated that approximately 40% of Brazilian women never performed the examination and among women aged 25 to 64 it is estimated that 12% to 20%

never performed it. This has contributed to the fact that the CC is still a serious public health problem, since it is responsible for high morbidity and mortality rates.³⁻⁴

The Instituto Nacional de Câncer (INCA) estimated 6,340 new cases for the year 2016. Despite the investment of more than 10 million in performing the cytopathological examination per year and even with the advances of the SUS, Brazil still has an important cervical cancer mortality rate and continues to reduce mortality from this cause, it is still a challenge to be overcome.⁴

Studies show several factors associated with not performing the exam, highlighting the low levels of schooling; low family income; the use of oral contraceptive and aspects related to health service such as difficulty in making an appointment, availability of the service and delay in the result. Other factors that stand out and generally one of the most influential is the knowledge deficit regarding the importance and purpose of the exam and the lack of interest to perform the exam.⁵

Even with the implementation of programs by the Ministry of Health, such as the National Cervical Cancer Control Program and the wide dissemination of information regarding the preventive examination in the basic health network, studies show that there are still many women who contain inadequate knowledge about the CC preventive examination.⁶

When women have adequate knowledge and information about the exam, it becomes possible to perform self-care and bring them closer to the health services, because the lack of information, erroneous or insufficient knowledge, constitute barriers to preventive measures for cervical neoplasia.⁷ In view of the above, the present study aims to evaluate the knowledge and practice of women attended in Basic Health Units in relation to the Pap smear exam.

METHOD

It is a quantitative, descriptive study with transversal design conducted in three Basic Health Units (BHU) of the city of Caxias-MA, during the months of May to July 2018. The sample size was composed of 320 women, calculated from the sum of the quantitative of women from each BHU aged between 25 and 64 years. The choice of age group is explained due to the parameters established by the Ministry of Health for the exam, which indicates this age group as a priority in the prevention of cervical cancer.³

To identify the research subjects, the following inclusion criteria were used: women aged 25 to 64; living in the urban area of the municipality and belonging to the micro area of UBS selected for the study and who were able to understand and answer the research questions. As exclusion criteria: women who have never had sexual intercourse and who have already undergone total hysterectomy.

As a collection tool, a questionnaire adapted from other studies was prepared.^{5,8} The questionnaire contained the following information: socio-demographic and economic;

sexual and reproductive behavior and information that emphasizes women's knowledge and practice in relation to the papanicolaou exam.

For the analysis of data on women's knowledge and practice in relation to the exam, the definitions from previous studies were used, as presented below: Adequate knowledge: women who had already heard about the exam, and knew it was to detect/prevent the CC. Inadequate knowledge: women who had never heard about the exam, or had heard about it, but did not know that it was to detect the CC. Adequate practice: women who took the last Pap smear in the last three years. Inadequate practice: women who took the last Papanicolaou in the period over three years, once in their life or never.^{5,8}

An Excel 2013 Windows spreadsheet was used for data tabulation, and these data were later submitted to statistical analysis using the Statistical Package for the Social Sciences (SPSS version 22.0) program. For the description of the categorical variables the frequency and absolute percentage of them were performed. The relations between the two categorical variables (knowledge and practice in relation to the papanicolaou exam) were verified through Pearson's Chi-square test that uses a significance level smaller than 0.05. The data were organized in tables and graphs, and their discussion was carried out through the use of pertinent literature.

The study began after the approval of the Ethics Committee on October 30, 2018, in accordance with resolution No. 466 of December 12, 2012 of the National Health Council / Ministry of Health (MH), concerning research involving human beings, with the number of CAAE: 88944818.4.0000.5554 and number of the opinion: 2,990,169. The ethical norms were respected, since the women were informed about the research, its objectives and the guarantee of privacy and confidentiality of the identification and information handled, as well as after having accepted to participate in the research, signed the Termo de Consentimento Livre Esclarecido (TCLE).

RESULTS

In this survey 320 women from three Basic Health Units in the urban area of Caxias-Ma were interviewed. Table 1 describes the participants' socio-demographic and economic data. It was identified that according to the age group chosen from 25 to 64 years old for the selection of women, the majority are 25 to 35 years old, 40.3% (n=129). Regarding color, 69.4% (n=222) declared themselves brown. Regarding schooling, it was observed that most of the women interviewed are literate, but with a low level of schooling, since 38.4% (n=123) have incomplete elementary education. It was also observed a higher prevalence of married women/stable union 60.9% (n=195), Catholic religion 75% (n=240), housewives 46.6% (n=149) and have less than 01 minimum wage 39.4% (n=126).

Table 1- Sociodemographic and economic characteristics of women attended in three Basic Health Units. Caxias, MA, Brazil, 2018

Variables	N	%
Age group in years		
25-35	129	40,3
36-45	60	18,8
46-55	65	20,3
56-64	66	20,6
Breed/Color		
White	28	8,8
Black	65	20,3
Brown	222	69,4
Yellow	5	1,6
Schooling		
Non-literate	33	10,3
Incomplete elementary school	123	38,4
Complete Elementary School	16	5,0
Incomplete High School	25	7,8
Complete High School	77	24,1
Incomplete higher education	26	8,1
Complete higher education	20	6,3
Marital situation		
Single	72	22,5
Married / stable union	195	60,9
Divorced	23	7,2
Widow	30	9,4
Religion		
Catholic	240	75,0
Evangelical	62	19,4
Spiritist	2	0,6
It does not have	9	2,8
Others	7	2,2
Profession/occupation		
Student	7	2,2
Domestic	33	10,3
Teacher	10	3,1
Retired	40	12,5
Housekeeper	149	46,6
Others	81	25,3
Family income		
Less than 01 minimum wage	126	39,4
01 minimum wage	120	37,5
From 01 to 02 minimum wages	61	19,1
Above 03 minimum wages	13	4,1
Total	320	100

Source: Data from the study, 2018.

In Table 2, the data refer to the sexual and reproductive health of the participants, observing a higher prevalence of multiparous women, 74.7% (n=239); first sexual intercourse before the age of 18, 58% (n=188); they do not use any contraceptive method, 55.63% (n=178); they are not used to use the condom in intercourse, 60.3% (n=193) and as for the number of sexual partners, 43.8% (n=140) reported having three or more.

Table 2 - Behavior related to sexual and reproductive health of women attended in three Basic Health Units. Caxias, MA, Brazil, 2018

Variables	N	%
Parity		
Nulliparous (never gave birth)	26	8,1
01 child	55	17,2
Multipara (more than one child)	239	74,7
First Sexual Relationship		
Under 18 years	188	58,8
At 18 years old	35	10,9
Over 18 years old	97	30,3
Contraceptive method used		
Pill	20	6,25
Laqueature	34	10,63
Condom	74	23,13
None	178	55,63
Others	14	4,38
Condom use		
Yes	55	17,2
No	193	60,3
Sometimes	72	22,5
Number of sexual partners you have had		
One	114	35,6
Two	66	20,6
Three or more	140	43,8
Total	320	100

Source: Data from the study, 2018.

The results of Table 3, show questions related to knowledge and the periodicity of the exam. When asked if they had heard about the exam, 97.2% (n=311) answered yes; 55.3% (n=177) answered that the exam is used to detect/prevent diseases, but they could not answer which pathology and 86.2% (n=276), they could not cite the care that the woman should have before the exam.

Regarding the material collected for the exam 69.7% (n=223) responded that it is a fluid/secretion of the vagina; 52.5% (n=168) responded that the exam should be performed in sexually active women and 53.75% (n=172) responded that the exam should be done one week after menstruation. Regarding the periodicity of the exam, 32.5% (n=104) of the women reported performing the exam once a year, followed by 28.13% (n=90) more than 3 years.

Table 3 - Knowledge and periodicity of the Pap smear of women attended in three Basic Health Units. Caxias, MA, Brazil, 2018

Variables	n	%
Have you heard about the pap smear/ preventive test		
Yes	311	97,2
No	9	2,8
The pap smear is used to detect/ prevent		
Diseases, however, do not know the type	177	55,3
Pregnancy	2	0,6
Cancer in women	38	11,9
Vaginal infection	1	0,3
Uterine cervix cancer	48	15,0
Doesn't know/doesn't remember	54	16,9
O2 care before the exam		
Know	44	13,8
Doesn't know	276	86,2
Type of material being chartered		
Blood sample	4	1,3
Cells of the uterine cervix	9	2,8
A urine sample	2	0,6
Liquid/Secretion	223	69,7
Doesn't know	82	25,6
Who should perform the papanicolaou		
Women with active sex life	168	52,5
Girls who already had the menarche (first menstruation)	52	16,3
Girls over five years old	20	6,3
Don't know	80	25,0
Period that the pap smear must be performed		
After intercourse	26	8,12
One week after menstruation	172	53,75
Don't know	122	38,13
How often do you take the exam?		
Only performed once	17	5,3
1 time a year	104	32,5
≤ to 3 years	83	25,94
> 3 years	90	28,13
Never performed	26	8,13
Total	320	100

Source: Data from the study, 2018.

Table 4 shows that less than half of the interviewees 27.2% (n=87) were classified with adequate knowledge regarding the exam. Moreover, although many women did not have adequate knowledge, it was observed that 58.44% (n=187) of the interviewed women presented adequate practice, while 41.56% (n=113) showed inadequate practice.

Table 4 - Analysis of the knowledge and practice of women attended in three Basic Health Units in relation to the Papanicolaou exam. Caxias, MA, Brazil, 2018

Knowledge and practice in front of the pap smear	N	%
KNOWLEDGE		
Adequate	87	27,2%
Inadequate	233	72,8%
PRACTICE		
Adequate	187	58,44%
Inadequate	113	41,56%
-	320	100

Source: Data from the study, 2018.

Table 5 - Cross tabulation on the level of knowledge and practice of the women interviewed in relation to the Pap smear. Caxias, MA, Brazil, 2018

	Practice		Total	Pearson Chi-square (p value)
	Adequate	Inadequate		
Adequate knowledge	56 (17,5%)	31 (9,7%)	87 (27,2%)	X² = 1,730 (p = 0,188*)
Inadequate knowledge	131 (40,9%)	102 (31,9%)	233 (72,8%)	
Total	187 (58,4%)	133 (41,6%)	100 (100%)	-

Source: Data from the study, 2018.

DISCUSSION

Based on the responses of the women interviewed, it can be observed that there is a lack of adequate knowledge of most women about the CC preventive examination, as well as its importance, resulting in an erroneous attribution of the purpose of the examination, since most of the women interviewed performed it with the purpose distinct from the true essence of the preventive examination, which is the early detection of the CC.¹

A study carried out at the Center for Integral Attention to Women's Health in Uberaba-MG also showed a deficiency in the knowledge of these women about the Papanicolaou exam, as only 40% mentioned that the exam prevents the CC, as well as in another survey, where 58.2% of the women did not show adequate knowledge about the pap smear exam.⁹⁻¹⁰

The findings of this study are at odds with a survey conducted in Juiz de Fora, MG, where only 15% of respondents had inadequate knowledge about the exam. Similar to this research, a study identified that 91% of the patients interviewed declared they knew the purposes of the exam and only 9% answered not to know the same.^{6,11}

Women's lack of knowledge about the purpose of the preventive examination and misinformation generate disinterest and unconcern for CC prevention. When women have adequate knowledge and information about the exam, it becomes possible to perform self-care and bring them closer to the health services. Therefore, lack of information,

erroneous or insufficient knowledge, constitute barriers to the realization of preventive measures for the CC.⁷

Also, regarding knowledge assessment, women were asked to quote at least two necessary cares before taking the exam and most women were unable to answer 86.2% (n=276). Another study showed that 55.8% of the women interviewed could not cite any care, this shows to be a worrying reality, because it is imagined that those who do not know do not practice it.¹² The absence of care before the exam can cause alterations in the results, as much for making the procedure difficult, as for making the reading of the slides difficult, generating problems that can involve frustrations on the part of the client and the non return for repetition of the exam.¹²

Regarding the material collected for the exam, there is a mistake on the part of most women, since 69.7% (n=223) responded to be a fluid/secretion of the vagina. However, what occurs is the analysis of the cells of the ectocervix and endocervix that are extracted by scraping from the cervix.⁴ These results contrast with a survey where 85.4% of the women interviewed related the performance of the exam to the collection of cells from the cervix.¹³

Regarding the periodicity of the preventive examination, although most women in this study did not have adequate knowledge, it was observed that 58.44% (n=187) have appropriate practice. With these data, it is possible to verify that the majority of women take the exam in its correct periodicity, but it is necessary to invest in women who do not take the exam or who do not take it with a correct satisfaction.¹⁴

A study conducted in Fortaleza showed similar results, where 67.6% of the women interviewed had adequate practice in relation to the Papanicolaou exam, as well as in another study that showed superior results, because it was found that 95% of the participants had adequate practice, having conducted the last exam at the most three years ago.^{15,16} In a household survey conducted in the municipality of São Luís-MA, 65.8% of the women interviewed referred a time interval of one year or less between the penultimate and the last exam, also showing a higher rate in relation to the present study.¹⁷

It is also worth mentioning that the rate of 58.44% in relation to the adequate practice of women interviewed in this research is considerably lower than the minimum of 80% recommended by the National Program for Cervical Cancer Prevention to produce a significant impact in the reduction of mortality rates by cervical cancer.¹⁸

Inadequate knowledge in relation to the Papanicolaou exam has been cited in literature among the reasons pointed out by women for not performing the exam, but in this study there was no association between the level of knowledge and women's practice ($p=0.188$), using as parameter ($p<0.05$). Many times women perform the exam more for a social habit, without having the knowledge of the real importance of performing this procedure.¹⁹

On the other hand, the results of a research showed that the non adherence to the exam presented a statistically significant association with the inadequate knowledge of the woman, because the non adherence was 2.5 times higher among the women who had inadequate knowledge about the exam (value of $p=0.02$), association also observed in the study carried out with women living in São Luís-MA.^{17,20}

In addition, a study conducted in Ethiopia with 583 women showed that 85.8% of participants had no intention of being screened for CC. Regarding the reasons why they were not going for the exam, 35.8% ($n=209$) indicated that they had never heard of the exam and the CC.²¹

CONCLUSION

The results of this study show that although almost all the women interviewed have heard about the Papanicolaou exam, more than half of them presented inadequate knowledge. In the statements of the participants it was evident the lack of appropriate knowledge both about the purpose of the exam, and about the necessary care that precedes the accomplishment and about the type of material collected.

It was also noticed that although more than half of them were classified as having inadequate knowledge, most of the women presented an adequate practice, however, they perform the exam without knowing the real purpose. Thus, it was found that there was no significant association between the level of knowledge and the practice of women.

Although most of the women interviewed presented a periodicity of the exam according to the Ministry of Health protocol, this research showed that there are still women who perform the exam irregularly or have never been submitted to it. Therefore, it is expected that this study may serve as a precursor to further research on this topic in order to prevent CC, especially in groups with more vulnerable conditions.

Moreover, this study may collaborate to the scientific community promoting information for new health actions, since knowing the reality of a given population about aspects that involve CC prevention is the first step to define strategies of efficient interventions to the real needs of the community.

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