

Department of Clinical Psychology, Medical University of Lublin  
Medical School in Przemyśl

DAGMARA PODGÓRSKA-KOWALCZYK,  
ALICJA NASIŁOWSKA-BARUD

*Awareness of nuns with regard to prophylaxis against neoplasms  
of the genital tract*

In Poland, malignant neoplasms are the second most frequent cause of death of women, after illnesses of the circulatory system. The morbidity and death rate of women is particularly high in the case of the nipple and the genital tract neoplasms (4, 6, 7).

Poland belongs to countries with the highest morbidity index of uterine cervix carcinoma. Apart from uterine cervix carcinoma, which constitutes 60% of all neoplasms of genital organs, the most frequent are: endometrial and ovarian cancer. In the recent years, a constant increase in morbidity and a high death rate due to these neoplasms have been observed. High mortality (60% of women with a diagnosed uterine cervix carcinoma die) is caused by the fact that cancer is diagnosed too late, in an advanced stage of illness with a worse prognosis, which makes conserving therapy impossible (5, 6).

According to the International Agency of Research on Cancer (IARC), in Poland the 5-year survival rate in women diagnosed with a uterine cervix carcinoma is the lowest from among the 17 assessed European countries. The situation is equally bad in the case of endometrial and ovarian cancer.

The first stage of illness of the majority of the genital tract neoplasms does not show any symptoms, that is why the basic prophylaxis should consist in a screening examination of large groups of people, aimed at detecting early stages of the illness, as well as in relevant health service (3, 4, 5). The basic method of discovering changes in the genital tract is gynecological and cytological examination. It is advisable that every woman undergoes a gynecological examination at least once a year and a cytological examination every three years (in many countries a yearly gynecological examination is a compulsory periodic examination).

There are numerous references presenting clinical characterisations concerning the biology of the genital tract neoplasm, its diagnostic and risk factors (4, 5, 6, 7), yet there are no papers describing the level of awareness and the desired pro-health attitude of Polish society. Such publications could greatly contribute to an increase in oncologic prophylaxis and the creation of educational programmes for selected social groups.

The aim of the paper is to assess the awareness and attitude of nuns with regard to the prophylaxis against malignant neoplasms of the genital tract.

#### MATERIAL AND METHODS

Subject to research were nuns from various convents in the cities of Przemyśl. The sample consisted of 63 nuns aged between 21 and 77. Mean age was 38.2 years. The most numerous group consisted of nuns aged 21 to 30. The majority of 34 (53.9%) nuns had secondary education, 14 (22.2%) were university graduates, 13 (20.6%) had vocational training and 2 (3.1%) had elementary education.

The research tool used was a self-developed questionnaire. The questions included in the questionnaire concerned: the extent of the nuns' knowledge of prophylactic examinations, risk factors and the symptoms of the genital tract neoplasm, as well as the sources of knowledge and the relevant pro-health attitudes. The obtained material was analysed statistically and descriptively.

## RESULTS

The largest number of nuns: 30 (47.6%), were convinced that uterine cervix carcinoma occupies the fifth place regarding the number of cases of malignant neoplasms in women. The 24 (38.1%) of the respondents did not know anything about it and only 9 (14.28%) replied correctly and ranked this illness as the second among the malignant neoplasm cases in women.

Table 1 shows the examinations conducted, according to the nuns, in the cases of the genital tract illnesses. Among the nuns, the most well known diagnostic examination conducted in the cases of the genital tract illnesses is gynecological examination – 52 (82.5%) responses, and cytology – 37 (58.7%). The remaining nuns erroneously mentioned blood tests – 9 (14.28%) responses and X-ray examinations – 8 (12.6%).

Table 1. Diagnostic examinations in the cases of the genital tract illnesses, according to the nuns

Diagnostic examination	N	%
Cytology	37	58.7
Gynecological examination	52	82.5
X-ray examination	8	12.6
Blood tests	9	14.28

Table 2 shows the amount of time since the last visit to the gynecologist. Thirteen (20.6%) of the respondents had their gynecological examination a year ago, 8 (12.6%) – two years ago, 6 (9.5%) – over five years ago, 6 nuns (9.5%) do not remember the date of their last gynecological examination. There were 30 (47.6%) nuns who have never visited a gynecologist. Overall, 50 (79.3%) nuns have not had a basic diagnostic examination concerning the genital tract neoplasm prophylaxis for the past 5 years.

Table 2. Time since the last gynecological examination

Time since the last examination	N	%
A year ago	13	20.6
Two years ago	8	12.6
Over 5 years ago	6	9.5
Never	30	47.6
Can't remember	6	9.5

Table 3 shows the amount of time since the nuns' last cytological examination. Twelve (19.04%) of the respondents had their cytology three years ago, 2 (3.1%): 4–5 years ago, the remaining nuns did not remember when they had it – 8 (12.6%) responses, or they have never had their cytology conducted at all – 41 (65.1%).

Table 3. Time since the nuns' last cytological examination

Time since the last examination	N	%
Three years ago	12	19.04
4-5 years ago	2	3.1
Can't remember	8	12.6
Never	41	65.1

Table 4 shows the nuns' knowledge of the frequency of the prophylactic control examinations of the genital tract. Only 13 (20.6%) nuns knew about the need of conducting yearly gynecological examinations. The remaining persons erroneously replied that one should see a gynecologist in case of any afflictions – 12 (23.8%) or once every three years – 20 (31.7%), whereas 15 nuns (23.8%) had no knowledge of the issue. Twenty-six (41.6%) of the respondents knew about the need of conducting a cytologic examination once every three years. Forty (63.5%) nuns have not even heard about the need of undergoing various prophylactic examinations for the genital tract neoplasm, 23 (36.5%) gave a positive response. According to 39 (61.9%) nuns cancer is a curable disease, but only when it has been discovered early enough. Sixteen (25.4%) nuns claimed that it was an incurable disease, 2 (3.1) expressed an opinion that it was a curable disease at all stages and 6 (9.5%) did not have any knowledge of the subject.

Table 4. The nuns' knowledge concerning the frequency of the prophylactic examinations of the genital tract

Frequency of examinations	Gynecological examination		Cytology	
	N	%	N	%
Once a year	13	20.6	9	14.3
Once every three years	20	31.7	26	41.6
In case of afflictions	15	23.8	13	20.6
Don't know	15	23.8	15	23.8

Table 5 shows the symptoms which evidence uterine cervix carcinoma, according to the respondents. Forty-four (69.8%) nuns considered irregular bleeding to be the most characteristic symptom of uterine cervix carcinoma, followed by vaginal discharge 40 (63.5%) responses and hypogastric pain 34 – (53.9%).

Table 5. Symptoms of uterine cervix carcinoma, according to the respondents

Symptoms	N	%
Vaginal discharge	40	63.5
Hypogastric pain	34	53.9
Irregular bleeding	44	69.8

Table 6 shows the risk factors of the genital tract cancer the nuns are familiar with. The most well-known risk factor is a history of illnesses in the family. Fifty-two (82.5%) nuns were aware of this. The remaining factors according to the respondents were: frequent infections of the genital tract – 34 (53.9%) responses, age – 23 (36.0%) responses, and high sexual activity – 20 (31.7%) responses. Frequent parturition was pointed to by 8 (12.6%) nuns whereas tobacco smoking by only 2 (3.1%) nuns. According to 27 (42.8%) nuns prophylactic gynecological examination and cytological test should be obligatory for all women. The above-mentioned examinations should be voluntary according to 14 (22.2%) nuns, whereas 10 (15.9%) claimed they should be obligatory for women from the groups of higher risk, and 12 (19.4%) thought they should only be conducted at doctor's instruction.

Table 6. Risk factors of the genital tract neoplasm, according to the respondents

Risk factor	N	%
Heredity	52	82.5
Age	23	36.0
Tobacco smoking	2	3.1
Frequent infections of the genital tract	34	53.9
High sexual activity	20	31.7
Frequent parturition	8	12.6

Table 7 shows the nuns' sources of information about the genital tract neoplasms. The nuns' main source of information about cancer is press and radio – 42 (66.6%) responses. Other sources are educational materials – 39 (62.9%) responses, employees of health service – 14 (22.2%), and sick persons – 8 (12.6%) responses.

Table 7. The nuns' sources of information about neoplasm

Source of information	N	%
Employees of health service	14	22.2
Educational materials	39	61.9
Press, radio	42	66.6
Sick persons	8	12.6

## DISCUSSION

Uterine cervix carcinoma is the second most frequent malignant neoplasm in women and the fourth cause of women's death, after the cancer of the nipple, the lungs and the stomach. Social awareness of the morbidity level, mortality, lack of causal treatment and the knowledge of the biology of neoplasms should incline one to undertake prophylactic actions such as undergoing regular control examinations, eliminating risk factors and self-observation (1, 2, 3).

In the examined group of nuns, the awareness of the problem of the genital tract neoplasms is limited. Only 9 (14.3%) nuns correctly assessed the threat of uterine cervix carcinoma by situating this illness as the second among the number of malignant neoplasms cases. A consequence of the inadequate awareness of the threat is the negative attitude and behaviour such as neglecting regular gynecological examinations (once a year) and cytologic ones (once every three years).

Among the nuns only 13 (20.6%) declare they had a gynecological examination in the past year and as much as 30 (47.6%) admit they have never had this examination. The results are similar for cytology. Forty-one (65.1%) nuns have never had a cytologic examination and only 12 (19.04%) had it in the past three years.

Overall, in the examined group of nuns 42 (66.6%) have not had a gynecological examination and as much as 51 (80.9%) – cytology for the past five years. The statistics are worrying. The deficit of nuns' prophylactic behaviour against the genital tract cancer may be ascribed to the lack of adequate health education and perhaps the limited access to it due to the monastic rules, as well as secluded and isolated life. In the examined group as much as 40 (63.5%) nuns have not heard of the need of conducting various examinations as a form of the genital tract neoplasm prophylaxis.

What is surprising is that the nuns' knowledge of the diagnostic examinations of the genital tract is extensive. The nuns considered gynecological examination – 52 (82.5%) responses and cytology – 37 (58.7%) responses to be essential in this matter. Apparently, the nuns are familiar with these examinations but they do not treat them as prophylactic actions, which should be conducted regularly and systematically in spite of the lack of afflictions.

Most of the genital tract neoplasms develop long and furtively and do not produce any clinical symptoms in the early phase. Meanwhile, cancer that is diagnosed early enough, in the so-called preinvasive stage (asymptomatic) which can even last for 5–10 years, is completely 100% curable. The priority in prophylactic actions should be to make women aware of these facts. Extensive health awareness promotes positive pro-health behaviour such as undergoing control examinations. Unfortunately, many Polish women do not undergo prophylactic examinations and decide to do them only when afflictions start to appear (1). Similar tendencies can be observed in the nuns. Those 50 (79.3%) who had not visited a gynecologist for the past year mentioned the lack of afflictions in the genital tract as the main reason – 34 (68.0%) responses.

Only regular control examinations are a basis for secondary prophylaxis leading to a discovery of early stages of the neoplasm – which have a positive prognosis. In the examined group the knowledge of the frequency of prophylactic examinations is inadequate. Only 13 (20.6%) nuns

knew how often one should prophylactically see a gynecologist and 26 (41.3%) – when to undergo a cytologic examination.

An analysis of the gathered material has revealed that the nuns do not undergo prophylactic examinations because they have no knowledge of their frequency and the need to undergo them in spite of the lack of afflictions. A comparison of the obtained results of own research and available statistical analyses of the women's awareness of neoplasm prophylaxis allows a conclusion that the nuns more often than other women do not undergo prophylactic examinations of the genital tract (1). It is surprising, more so because as much as 39 (61.9%) nuns are aware of the fact that cancer is a curable illness but only when diagnosed early enough.

An important element of oncologic prophylaxis is the knowledge of symptoms of neoplasm illnesses and risk factors. Similarly to whole society, the nuns mention most often the neoplasm symptoms which evidence an advanced stage of the illness. Forty-four (69.8%) of the respondents considered irregular bleeding to be the most characteristic symptom of uterine cervix neoplasm, whereas 40 (63.5%) – vaginal discharge.

The most well-known risk factors of a neoplasm illness are heredity and frequent infections of the genital tract. The basic sources of the nuns' knowledge of cancer are press and radio – 42 (66.6%) responses and educational materials – 39 (62.9%) responses. The nuns' knowledge of neoplasm prophylaxis is, as in the case of whole society, not complete and requires supplementation especially regarding the need to conduct regular control examinations in spite of the lack of afflictions (1, 2).

It should be stressed that nuns, compared to other women, have limited access to any educational information, it is therefore necessary to organise an educational action aimed specifically at this considerable social group.

## CONCLUSIONS

1. The nuns' knowledge of the genital tract neoplasm biology is not complete.
2. In the examined group as much as 40 (63.5%) nuns have not heard about the need of undergoing various prophylactic examinations for the genital tract neoplasm.
3. A majority of 50 (79.3%) nuns do not undergo prophylactic gynecological examinations due to the lack of afflictions of the genital tract.
4. The nuns know the examinations conducted in cases of genital tract illnesses but do not treat them as prophylactic actions, which should be conducted systematically and regularly in spite of the lack of clinical afflictions.

## REFERENCES

1. Dobrzyń D., Staropolska H., Kołodziej W.: Świadomość kobiet w zakresie profilaktyki chorób nowotworowych. *Annales UMCS, D*, 58, Supl.13, 272, 2003.
2. Chojnacka-Szawłowska G.: Rozpoznanie choroby nowotworowej. Uwarunkowania psychologiczne. PZWL, Warszawa 1998.
3. Karski J. et al.: Promocja zdrowia. IGNIS, Warszawa 1999.
4. Kozakiewicz B.: Nowotwory złośliwe narządu rodnego. *Nowa Medycyna – Onkologia*, 4, 3, 2003.
5. Pisarski T. (ed.): Położnictwo i ginekologia. PZWL, Warszawa 1993.
6. Spaczyński M. (ed.): *Onkologia ginekologiczna*. Urban & Partner, Wrocław 1997.
7. Zatoński W. et al.: *Nowotwory złośliwe w Polsce*. Centrum Onkologii, Warszawa 1996.

## SUMMARY

Due to the absence of causal treatment of neoplasm illnesses of the genital tract primary and secondary prophylaxis becomes the basic way of reducing these illnesses' death rate. Improving the social awareness and promoting positive pro-health behaviour, such as undergoing regular prophylactic gynecological and cytological examinations, may considerably contribute to lower mortality of Polish women. The aim of the paper was to assess the awareness and attitude of nuns with regard to the prophylaxis against malignant neoplasm of the genital tract. Subject to the study were 63 nuns aged from 21 to 77. The research method was an anonymous questionnaire. An analysis of the gathered material has revealed that the nuns do not have a full knowledge of the prophylaxis of the genital tract neoplasm. Many nuns do not know about the need to conduct regular prophylactic examinations in spite of the lack of clinical afflictions, and so only few undergo these examinations. It is necessary to promptly undertake educational actions aimed at improving the level of knowledge and promoting positive pro-health behaviour among nuns.

### Świadomość zakonnice w zakresie profilaktyki chorób nowotworowych narządu rodnoego

Wobec braku leczenia przyczynowego chorób nowotworowych narządu rodnoego profilaktyka pierwotna i wtórna staje się podstawowym sposobem zmniejszenia liczby zgonów z powodu tych chorób. Podnoszenie poziomu świadomości społecznej oraz kształtowanie pozytywnych zachowań zdrowotnych w postaci zgłaszania się regularnie na profilaktyczne badania ginekologiczne i cytologiczne może znacząco przyczynić się do zmniejszenia umieralności kobiet w Polsce. Celem pracy była próba oceny świadomości i postaw zakonnice w zakresie profilaktyki nowotworów złośliwych narządu rodnoego. Badaniem objęto 63 zakonnice w wieku od 21 do 77 lat. Metodą badawczą był anonimowy kwestionariusz. Z analizy zebranego materiału wynika, iż zakonnice posiadają niepełną wiedzę z zakresu profilaktyki nowotworów narządu rodnoego. Dużo zakonnice nie wie o konieczności wykonywania regularnych badań profilaktycznych mimo braku klinicznych dolegliwości, stąd niewiele zgłasza się na takie badania. Istnieje pilna potrzeba podjęcia działań oświatowych podnoszących poziom wiedzy i pozytywnych zachowań zdrowotnych wśród zakonnice.