

BREAST SELF EXAMINATION; BREAST AWARENESS AND PRACTICES OF SYSTEMATIC REVIEW

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ABSTRACT... **Aim:** The purpose of this systemic review is to explore the literature on breast self examination and on breast awareness. **Objectives:** To evaluate the importance of breast awareness. (1) To prove breast awareness is a an effective strategy for health promotion. (2) To clarify the difference between breast awareness and breast self examination. (3) To critique self breast examination as an effective method for screening breast cancers. **Methodology:** To review the literature supporting breast self examination and breast awareness Medline, CINAHL, Pubmed, Science Direct and Cochrane Databases were used. The key words "breast awareness", "difference" and "breast self examination" were used in conjunction with "breast cancer", "breast screening" and "health promotion" to search the recent articles of last 5 years from 2005 to 2010. **Conclusions:** It was concluded through the literature support that breast self-examination does not reduce breast cancer mortality whereas; breast awareness provides women with some knowledge about the breasts to fight breast disease and to reduce morbidity but not to reduce the mortality.

Key words: Breast awareness, Difference, Breast self examination, Breast cancer, Breast screening, Health promotion

INTRODUCTION

Breast cancer is one of the most common cancers among females worldwide. Global statistics show the annual incidence of breast cancer is increasing and this is occurring more rapidly in countries with a low incidence rate of breast cancer^{1, 2}. It has been reported that each year over 1.15 million women worldwide are diagnosed with breast cancer and 502,000 die from the disease³. Thus, it is a fatal disease that has clutched women population the most in its paws.

The purpose of this systemic review is to explore the literature on breast self examination and on breast awareness. And thus to evaluate the importance of breast awareness, to prove breast awareness is a an effective strategy for health promotion, to clarify the difference between breast awareness and breast self examination and to critique self breast examination as an effective method for screening breast cancers

METHODOLOGY

Review of the literature supporting breast self examination and breast awareness Medline, CINAHL, Pubmed, Science Direct and Cochrane Databases were used. The key words "breast awareness", "difference" and "breast self examination" were used in conjunction with "breast cancer", "breast screening" and "health promotion" to search the recent articles of last 5 years from 2005 to 2010.

RESULT

Early detection of breast cancer plays the leading role in reducing mortality rates and improving the patients' prognosis⁴. The recommended screening methods for early detection of this fatal disease are: mammography, clinical breast examination and breast self-examination (BSE).

Mammography is an expensive modality for screening and needs several requisites including logistic and professional manpower before its implementation. Randomized trials comparing mammography with no mammography screening found that at best women might benefit a 15% relative risk reduction in mortality from mammography⁵. In addition it has been shown that for women under the age of 50 years mammography screening is ineffective⁶. Clinical breast examination is relatively simple and inexpensive but the exact benefit of this screening modality in reducing mortality is yet to be established. It is argued that in diagnosis of breast cancer by screening the shift should be to the point that will cost least both in human and financial terms and be effective in reducing mortality, and that clinical breast examination would be able to fulfill this⁷. However, it has been shown that clinical breast examination could only detect about 60% of breast cancers detected by mammography as well as some breast cancers not detected by mammography⁸. Recent estimates suggest that clinical breast examination has a sensitivity of about

54% and specificity of about 94%⁹.

Unlike to mammography and clinical breast examination, BSE is simple, inexpensive, and low in technology, teaching is possible to both health professionals and women and more importantly raises awareness about breast cancer in women. It is argued that in many countries, especially in developing countries, BSE may be the only realistic approach to the early detection of breast cancer⁷. However there is no clear evidence to support the efficacy of performing routine BSE in early detection and cause specific mortality due to breast cancer. While a number of studies have found that BSE has improved early detection and reduced mortality^{10,11}, data from a randomized trial in Russia has suggested that there is no significant difference in those who perform BSE and those who do not in terms of the size of primary tumor and the incidence of metastatic lesion lymph nodes at detection^{12,13}. Also the Shanghai randomized trial demonstrated no significant stage shift or mortality reduction from breast cancer after 5 to 10 years of follow-up in the BSE group compared to controls^{14,15}. Similarly literature review on the topic indicated no benefit from routine BSE instruction as a screening tool for breast cancer¹⁶. To put it together, the results from the literature support suggest that self breast examination may do more harm than good based on the high number of unnecessary biopsies.

Therefore, the role of breast self examination in breast cancer is ineffective and it does not reduce the mortality rate of breast cancer rather it increase the morbidity rate due to irrelevant interventions done to evaluate the result of breast self examination. On the other hand breast awareness is important to raise the awareness among women about what is normal in their breasts so they can identify abnormality and can rush to the physician. Many health care professionals now advocate breast awareness over self breast examination.

DISCUSSION

However, despite continuous debate about the efficacy of BSE^{17,18}, it seems that breast self-examination not as a public health policy but as a preventive measure remains a method of choice for early detection of breast cancer in

developing countries. Resource constraints in low and middle income regions lead to limited application of established guidelines for breast health care in developed countries¹⁹. To summarize it should be noted that in fact none of the above modalities for breast cancer screening could be regarded as the best method for early detection and mortality reduction. These approaches have their own potential benefits and harms. Thus, at present the emphasis is to raise breast cancer awareness among women to overcome ever-increasing burden of the disease. It appears that overall the best way to save women's life is to make them aware of the potential benefits and harms of these approaches and to raise their knowledge about the warning signs of breast cancer.

At present in addition to public health professionals, even oncologists advise breast awareness over routine breast self-examination²⁰. However, one should not confuse between breast cancer awareness and breast self-examination since these are not the same. Breast cancer awareness can be defined as 'a woman becoming familiar with her own breasts and the way that they will change throughout her life'²¹. Hence, health care professionals can aware and encourage women to be familiar with their own breasts. Breast awareness include knowing what is normal in breast, looking at and feeling the breasts, knowing what changes to look for and what to do if any change is found in the breast.

Breast awareness is a concept that is not always clear due to its confusion with breast self examination. Over all the discussion follows that breast awareness should be promoted as it is better health promotive strategy empowers women who need to take some responsibility for their own health without the psychological morbidity and resource implications of self breast examination.

CONCLUSIONS

It is concluded through the literature support that breast self-examination does not reduce breast cancer mortality whereas; breast awareness provides women with some knowledge about the breasts to fight breast disease and to reduce morbidity but not to reduce the mortality. Thus, there is a strong need to create awareness among

women about breasts and its normal structure rather than focusing on breast self examination.

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