



THE RELATIONSHIP BETWEEN KNOWLEDGE ABOUT BREAST SELF-EXAMINATION (BREAST) AND EARLY DETECTION OF BREAST CANCER IN WOMEN OF REPRODUCTIVE AGE

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ABSTRACT

Background: In Indonesia, based on Global Burden of Cancer data, breast cancer is the most common cancer in women (26 per 100,000) followed by uterine cancer (16 per 100,000). Data from the 2007 Hospital Information System (SIRS) showed that the incidence of breast cancer was 21.69% higher than cervical cancer, which was 17%. **Objective:** To determine the relationship between WUS knowledge about BSE and early detection of breast cancer in the Tanah Sareal Village, Bogor. **Method :** This type of research is descriptive analytic with cross sectional research design. The sampling method in this study used a random sampling technique with a total sample of 97 respondents. Data collection using a closed questionnaire. **Results:** Based on WUS knowledge about BSE most of the 62 respondents (63, 9%) have less knowledge and a small portion of 10 respondents (10.3%) have good knowledge. For early detection of breast cancer in WUS, most of the 55 respondents (56.7%) were positive for early detection and a small portion of 42 respondents (43.3%) were negative for early detection. The relationship between WUS knowledge about BSE and early detection of breast cancer was mostly 62 respondents (63.9%) had less knowledge of which 35 respondents (36.1%) were negative for early detection and 27 respondents (27.8%) were positive for early detection. The statistical test results obtained a p value = 0.002, which means there is a significant relationship between the two variables. **Conclusion:** there is a relationship between WUS knowledge about BSE and early detection of breast cancer in the Tanah Sareal Bogor Village in 2020. **Suggestion:**

Keywords: BSE knowledge, early detection of breast cancer

INTRODUCTION

In Indonesia, based on Global Burden of Cancer data, breast cancer is the most common cancer in women (26 per 100,000) followed by uterine cancer (16 per 100,000). Data from the 2007 Hospital Information System (SIRS) showed that the incidence of breast cancer was 21.69% higher than cervical cancer, which was 17%. 1 In West Java, the incidence of breast cancer was 26 per 100,000 women. 2

Cancer is one of the four main diseases in modern society. The four main diseases are coronary heart disease, cancer, mental disorders and traffic accidents. The four major diseases have been added to the top five and the fifth disease is HIV/AIDS. 3 Breast cancer, also known as Carcinoma Mammae, is a malignant tumor that grows in breast tissue. These tumors can grow in the mammary glands, fatty tissue, or in the connective tissue of the breast

Breast cancer is a disease that is especially feared by women, because it is the main cause of death, around 1 in 9 women can be expected to have breast cancer in their lifetime. In the world there are about 41,000 cases of cancer

New breast cancers are diagnosed in women every year, but only 42 cases of death per 100,000 women per year for breast cancer cases of the entire population.

Early detection is an effort to identify diseases or disorders that are clinically unclear by using certain tests, examinations or procedures that can be used quickly to distinguish people who seem

healthy, really healthy from looking healthy but actually suffering from disorders. Early detection is a very important step to reduce the incidence of breast cancer in women. The sooner we detect breast cancer, the better the hope for recovery. 6 Early detection of breast cancer can be done in several ways, namely clinical breast examination by a doctor, radiological examination (mammography), non-surgical biopsy and breast self-examination (BSE).

Breast self-examination (BSE) is very important to be recommended to the public because almost 86% of lumps in the breast are found by the sufferer himself. Breast self-examination is considered as the easiest, safe and simple way. Even so, this examination must be based on existing instructions and guidelines, with BSE, it is not impossible that more early-stage breast cancer can be detected, unfortunately BSE is still considered ineffective. This is due to fear and anxiety in facing reality, and there are still very few women who use this test method (about 15 to 30 percent) besides that 55% of BSE understanding technically is still not mastered.

Women of childbearing age (WUS) Based on the concept of the Ministry of Health are women in reproductive age, namely ages 15-49 years, whether married, widowed or unmarried. under the control of special hormones. In women, these hormones are responsible for the initiation of ovulation and menstruation, as well as breast development. At this time, women should start paying attention to changes in themselves, as well as with their breasts and health. With all the activity in the breasts associated with developments in a woman's life and also the cyclical changes that are usually caused by regular menstrual periods, detecting early signs of breast problems is a very good habit and should be done early.⁹

The purpose of this study was to determine the relationship between knowledge of women of childbearing age (WUS) about breast self-examination (BSE) and early detection of breast cancer.

RESEARCH METHODS

This type of research is descriptive analytic research, using a cross sectional approach. The population in this study were 128 women of childbearing age (WUS). The sample in this study were 97 respondents. Sampling in this study using random sampling technique. Data processing and data analysis used the SPSS for windows series 20 computer program. The analysis consisted of univariate and bivariate analysis using the Chi-Square test.

RESEARCH RESULTS

Table 1 Frequency Distribution of WUS Knowledge about BSE

No	Knowledge	Frequency	Percentage (%)
1	Not enough	62	63,9
2	Enough	25	25,8
3	Good	10	10,3
	Total	97	100.0

Based on table 1 above, out of 97 respondents, the majority of 62 respondents (63.9%) had less knowledge.

Table 2 Frequency Distribution of Early Detection of Breast Cancer in WUS

No	Early detection	Frequency	Percentage (%)
1	Negative	42	43,3
2	Positive	55	56,7
	Total	97	100.0

Based on table 2 above, of the 97 respondents, the majority of 55 respondents (56.7%) were positive for early detection.

Based on the results of the study of 97 respondents, it can be seen that 10 respondents (10.3%) had a good level of knowledge with early detection of breast cancer, 9 respondents (9.3%) were positive and 1 respondent (1.0%) was negative. 25 respondents (25.8%) level of knowledge sufficient with early detection of breast cancer positive 19 respondents (19.6%) and negative 6 respondents (6.2%). 62 respondents (63.9%) lack knowledge level with early detection of breast cancer positive 27 respondents (27.8%) and negative 35 respondents Results Statistical analysis using the Chi-square test obtained a p-value of 0.002 ($p < 0.05$) thus it can be concluded that there is a relationship between WUS knowledge about BSE and Early Detection of Breast Cancer in the Tanah Sareal Village, Bogor.

DISCUSSION

1. Knowledge of women of childbearing age (WUS) about breast self-examination (BSE)

From the results of research conducted by researchers in the Tanah Sareal Bogor Village, it was shown that out of 97 respondents it was known that 62 respondents (63.9%) had less knowledge. The results of Sisca's research (2012), entitled Knowledge Level of Women of Reproductive Age (WUS) regarding Examination Self-Breastfeeding in Dimoro Hamlet, Bedoro Village, Kontakmacan District, Sragen Regency in 2012. From 38 respondents, 28 respondents (73.7%) had sufficient knowledge of women of childbearing age.

Knowledge is the result of knowing. And this happens after people sense something Sensing occurs through the five human senses, namely the senses of sight, hearing, smell, taste and touch. Most of human knowledge is obtained through the eyes and ears.¹⁰

BSE is one way to find out whether there are abnormalities in a woman's breasts. BSE can be done from any age but it is highly recommended if the age is more than 20 years.

Based on the results of the research and theory above, it can be concluded that the knowledge of women of childbearing age (WUS) about breast self-examination (BSE) majoritythe level of knowledge is lacking, due to a lack of factors that influence the knowledge and information obtained by women of childbearing age (WUS). Factors that influence knowledge about BSE such as understanding, purpose, method of examination and time of examination, namely age, education of the respondents, most of them have high school/vocational school education, occupation and sources of information. Information can be obtained through various sources, namely print media such as newspapers, magazines, journals, brochures or leaflets and electronic media such as television, radio, internet. Or it can also be obtained from sources through conversations, interviews, discussions, seminars or counseling.

2. Early Detection of Breast Cancer

From the results of research conducted by researchers in the Tanah Sareal Bogor Village, it was shown that out of 97 respondents it was known that 55 respondents (56.7%) were positive for early detection of breast cancer.

Cancer is a group of diseases, in which body cells develop, change and duplicate themselves out of control. Breast cancer is a malignant tumor that grows in breast tissue. 11 Cancer can grow in the mammary glands, milk ducts, fat or connective tissue in the breast. 12

Early detection is a process of disclosing the possibility of having a disease. Early detection of breast cancer is an important effort to be aware of danger breast cancer. Early detection is a very important step to reduce the incidence of breast cancer in women. The sooner we detect the occurrence of breast cancer, the better the hope for recovery

How to Early Detect Breast Cancer can be done through several examinations, namely Sampling breast cell tissue that has a lump (biopsy action), Mammography Examination and Breast Self-Examination (BSE).

Based on the results and research theory above, it can be concluded that the behavior of early detection of breast cancer in women of childbearing age (WUS) is mostly positive for early detection of breast cancer. Due to the fear of respondents with the incidence of breast cancer. The malignancy of breast cancer is feared by every woman because it can cause death.

3. Correlation between Knowledge of Women of Reproductive Age (WUS) regarding Breast Self-Examination (BSE) and Early Detection of Breast

From the results of research conducted by researchers in the Tanah Sareal Village, Bogor, it was shown that out of 97 respondents, it could be seen that 62 respondents (63.9%) had a low level of knowledge with early detection of negative breast cancer, 35 respondents (36.1%). The statistical test results obtained a p value = 0.002, which means the p value <0.05. So the null hypothesis is rejected and the researcher's hypothesis is accepted. So that there is a relationship between knowledge of women of childbearing age (WUS) about breast self-examination (BSE) and early detection of breast cancer in the Tanah Sareal sub-district, Bogor in 2020.

factors that influence health behavior by examining BSE, namely the determinants or determinants of human behavior are difficult to limit because behavior is the result of various factors, both internal and external (environmental). In general, human behavior can be seen from 3 aspects, namely physical, psychological and non-physical aspects such as humans and socio-economics.

According to Lawrence Green's theory of health behavior, the health of a person or society is influenced by two main factors, namely behavioral causes (behavior causes) and non-behavior causes. Furthermore, the behavior itself is determined or formed from three factors, namely predisposing factors (predisposing factors) include: community knowledge and attitudes towards health, traditions, and public trust in matters related to health, supporting factors (enabling factors) include the availability of facilities and infrastructure or health facilities for the community and this reinforcing factor becomes the factor and behavior of community leaders, religious leaders, attitudes and behavior of officers including health workers.

Based on the results of the research and theory above, it can be concluded that many women of childbearing age (WUS) have less knowledge but are positive for early detection of breast cancer. Due to the lack of information about knowledge of breast self-examination (BSE) and the fear of women of childbearing age (WUS) with the incidence of deadly breast cancer. Knowledge



of factors influencing health behavior of breast self-examination (BSE) with early detection of breast cancer.

CONCLUSION

1. The frequency distribution of knowledge of women of childbearing age (WUS) about breast self-examination (BSE) from 97 respondents can be seen that the majority of 62 respondents (63.9%) have less knowledge and a small proportion of 10 respondents (10.3%) have good knowledge.
2. The distribution of the frequency of early detection of breast cancer in women of childbearing age (WUS) from 97 respondents can be seen that the majority of 55 respondents (56.7%) are positive for early detection of breast cancer and a small proportion of 42 respondents (43.3%) are negative for early detection breast cancer.
3. The statistical test results obtained a p value = 0.002, which means the p value <0.05. So the null hypothesis is rejected and the researcher's hypothesis is accepted. So there is a relationship between knowledge of women of childbearing age (WUS) about breast self-examination (BSE) with early detection of breast cancer.

SUGGESTIONS

It is hoped that the research results obtained can be used as information and can be used as a guideline for conducting counseling about knowledge of breast self-examination (BSE) and early detection of breast cancer in the Tanah Sareal Village, Bogor.

BIBLIOGRAPHY

1. Rasjidi, I. 2010. *Epidemiology of Breast Cancer*. Jakarta: Sagung Seto
2. SURKESDAS, 2007. In the journal *Latifa*, 2012. entitled overview
3. Hawari, D. 2004. *Breast Cancer*. Jakarta: FKUI
4. Suryaningsih & Bertania, 2009. *Breast Cancer*. Yogyakarta: The Indonesian Paradigm
5. Wilensky, 2008. *Breast Cancer and Its Diagnosis*. Jakarta: PT. Heritage Achievement
6. Rasjidi, I. 2009. *Early Detection of Breast Cancer in Women*. Jakarta: Sagung Seto
7. Dr. Denni Joko Purwanto Sp.B (Onk) http://www.omni-hospitals.com/omni_alamsutera/blog_det_ail.php?id_post=5# accessed on 31 August 2015 On journal *sisca*, 2012. LevelWUS knowledge about BSE
8. Ministry of Health, 2013. In the journal *Susilowati*, 2013. Knowledge of WUS on Early Breast Cancer Detection
9. Notoatmodjo, Soekidjo. Prof. Dr. 2007. *Health Research Methods*. Jakarta: Rineka Cipta
10. On journal *Susilowati*, 2013. WUS Knowledge of Breast Cancer Early Detection. <http://digilib.stikeskusumahusada.ac.id/files/disk1/7/01-gdl-susilowati-332-1-ktisus-2.pdf> accessed on 31 August 2015 at 17.00
11. Olfah, et al, 2013. *Breast Cancer and BSE*. Yogyakarta: Nuha Medika
12. Diamond And Ivan, 2012. *Reproduction health*. New York: Salemba Medika
13. On the journal *Whichentitled Overview of BSE health behavior* <http://digilib.unimus.ac.id/files/disk1/123>
14. [/jtptunimus-gdl-motiekkema-6126-4- babii.pdf](#) Accessed on date 17 September 2015 at 19:45