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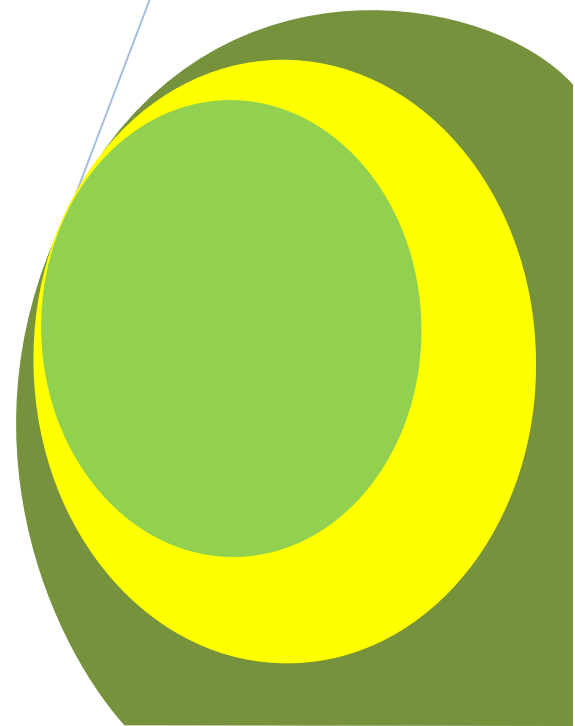
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Health Conduct of the Midwives of Yopougon-East (Abidjan, Cote D'ivoire) District Concerning the Womb Neck Cancer

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ABSTRACT

The Womb neck cancer is the second cancer of women worldwide after the breast cancer. This high mortality rate is due to the ignorance of the womb neck cancer and its prevention methods. Midwives play a major role in the detection and prevention of women common cancer especially the womb neck cancer which they are knowledgeable. But does this knowledge have an impact on their personal practices in prevention of the womb neck cancer? The present study was to describe the preventive conduct of the midwives concerning the womb neck cancer. This transversal descriptive study has been carried out from February to April 2012 in the health district of Yopougon East. It was with all the midwives working in the public health facilities of the first contact of the district. In total, fifty midwives were interviewed. The data collection has been performed with the use a pre-tested questionnaire, and the data were recorded and analyzed with the help of Epi Info 2000 software version 6.04. The results were as followed: the minimum age of the midwives was 41. More than the third have been working for one to five years with an average of thirteen years of work experience. The majority lived in couple (60%). Concerning the womb neck cancer prevention methods, 59% had knowledge of the vaccination against HPV and 87% the cervical smear. However, only a midwife has been vaccinated against HPV and more than three-fourth (76%) had never done a cervical smear though the risk factors existed among some of them. Factors like the early sexual intercourse (≤ 17 years) (26%) and the multi sexual partners (6.7%).

Keywords: Midwives, Yopougon-East, Cancer, Côte d'Ivoire.

INTRODUCTION

As mentioned earlier, the womb neck cancer is the women second cancer worldwide after the breast cancer. In 2008, the number of new cases of womb neck cancer was estimated to 530,000 with 275,000 of death. The majority of cases (86%) and death (88%) occur in developing countries especially in Sub-Saharan Africa and South-East Asia [1]. In Ivory Coast, the disease is the main cancer affecting women. Its effect and mortality in 2008 were estimated at 26.9 and 19.1 respectively per 1,000 women [2]. This high mortality rate is due to the ignorance of the womb neck cancer and its prevention methods. Given these facts, several strategies have been implemented to reduce the mortality rate of this cancer. However, these strategies are confronted with difficulties such as the lack of cooperation of the women to the screening of the cancer [3]. Furthermore, it is true that the knowledge that the women have can influence their attitude and their behavior vis-à-vis of the preventive measures [3].

The midwives are health workers who are trained for practices such as the pre-natal checking, women deliveries, the prevention of HIV transmission from mother to child, family planning and the protective inoculation of mothers and children [4]. So they play a major role in the detection and prevention of common cancer among women especially the womb neck cancer for they have good knowledge as noticed Mr. Tchounga and Al [2]. So having a greater knowledge about the womb neck cancer, women should have the best behavior preventive means. But does this knowledge help them have good personal preventive practices against the womb neck cancer? Do the midwives have better preventive practices against the womb neck cancer than the other women?

It is to give answers to these questions that we have made this study with the main objective is to describe the preventive behavior of the midwives against the womb neck cancer.

MATERIALS AND METHODS

It is a transversal and descriptive study that has been carried out from February to April 2012 in the health facilities of the first aid of Yopougon East (CWSF), located in the region of Lagoon 1. The Health facility was established by the Minister of Health and Public Hygiene order no. 212 of 11 July 2007. It has a population of 572 080 inhabitants and 12 CWSF. The CWSF are the primary levels of the health pyramid of the country, thus the front door for the sick people in the Ivorian health system. So the sanitary district is the administrative district which includes the CWSF.

All the midwives of the district have been interviewed, a total of 50 midwives. The data collection has been done using a questionnaire previously tested and the data has been recorded and analyzed using Epi Info 2000 software version 6.04

Results

Table I: Distribution of Midwives by social-demographic

		Frequency	Percentage
Age	< 30	5	10
	30-39 years	21	42
	40-49 years	17	34
	≥ 50 years	7	14
Work experience	≤ 10 years	22	44
	> 10 years	28	56
Marital status	In couple	30	60
	Single	20	40

The average age of midwives was 41; more than half lived with a partner (60%) and have worked for more than 10 years with an average of work experience of 13 years.

Table II: Distribution of Midwives by the risk factors of the womb neck cancer

Risk factors of the womb neck cancer	Frequency	Percentage
Early sex (≤ 17 years)	17	34
Multiple sexual partners	3	6
Unprotected sex	42	84
multiparity	7	14
Use of oral contraceptives for at least 5 years	11	22
STD antecedent	19	38
White Fluid syndrome	7	36.9
Genital ulceration syndrome	3	15.8
Pelvic pains	14	73.7

More than 3 women over 10 (34%) had early sex (≤ 17 years); 38% had got an STD including 73.7% of pelvic pains and 15.8% of genital ulceration syndrome; 6% had multiple sexual partners; 22% were on oral contraceptives; 14% were multiparous and almost all had unprotected sex.

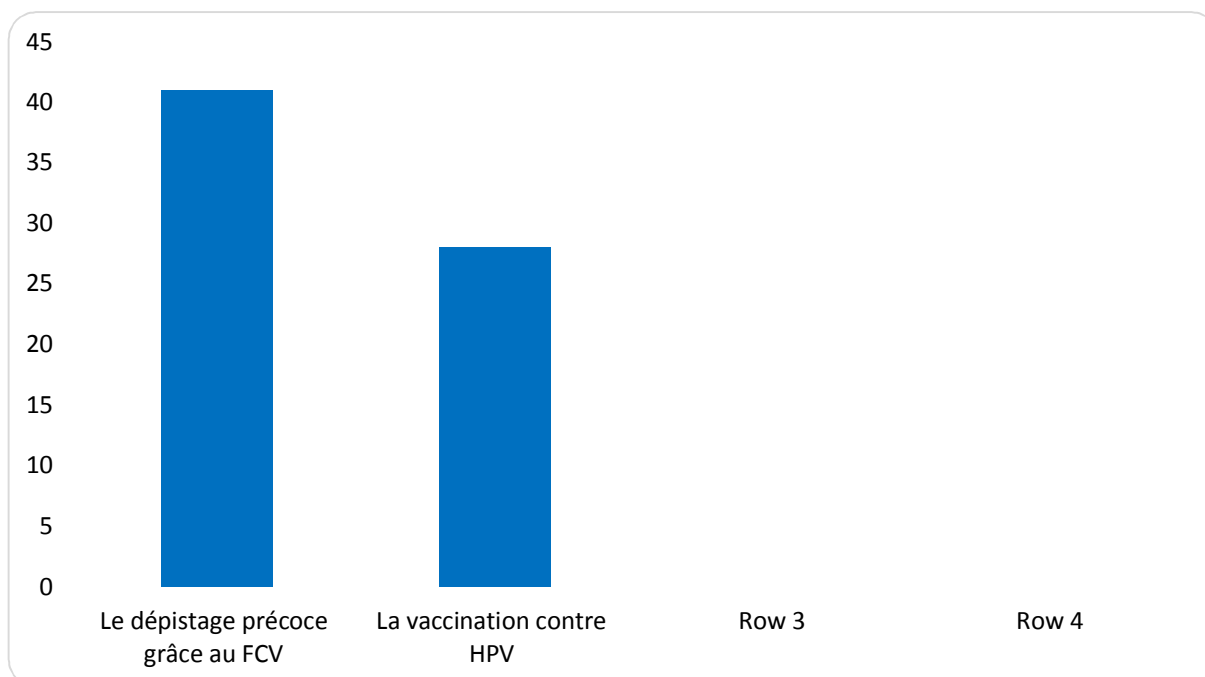


Figure 1: Distribution of Midwives by the knowledge of the prevention methods that are FCV and the vaccination against HPV

For Most of the midwives (90%), the womb neck cancer is a serious disease.

Table IV: Distribution of Midwives by their practice of FCV and the inoculation

		Frequency	Percentage
FCV Practice	Yes	12	24
	No	38	76
If Yes, how many times?	1 time	9	75
	2 times	3	25
If No, why?	Negligence	31	81.6
	Financial problem	4	10.5
	Ignorance	3	7.9
Inoculation practice	Yes	1	2
	No	49	98
If No, why?	Negligence	37	75.5
	financial problem	3	6.1
	Ignorance	9	18.4

More than half (56%) knew the vaccination against HPV and 86% the screening by the cervical vaginal smear as the womb neck cancer prevention means. However, only a midwife was vaccinated against HPV and more than three-fourth (76%) had never done a smear of cervical vaginal (FCV).

The main reason for this attitude was the negligence.

DISCUSSION

The midwives of our study have worked for more than 10 years in the field. This number of years of work experience explains their good knowledge of the womb neck cancer main prevention methods that are the early detection by cervical vaginal smear, which they mentioned (90%) and the vaccination against the human papilloma virus (HPV) mentioned (56%). Mr. Tchounga in his study noticed the same. He underlined, in addition to the influence of the work experience, their participation in scientific activities that are conferences and workshops [2].

In spite of their knowledge of these prevention means, the majority (76%) has never done a cervical vaginal smear. Likewise in the study of Mr. Tchounga in Ivory Coast [2], Mr. Awodele in Nigeria [5] and Mr. Mutyaba in Uganda [6] who found as rates of the cervical vaginal smear 20.5% and 19% respectively among the nurses.

The main reason given for the non-practice of the cervical vaginal smear in our study was the negligence (74%), though for almost all of the midwives the womb neck cancer was a serious disease (90%). Thus they confirm the impact of the feeling of invulnerability induced being a health worker [5]. Similarly, several studies on doctors have revealed that they refused any preventive checkup [7]. Mr. Biencourt [8] in his report of June 2000 noted that if the fact of knowing the risk appears more discouraging for the doctors, the prevention seems insignificant for them, reflecting a non-preventive behavior among health workers in general. In addition, this non-preventive behavior of the midwives is particularly due to the fact that a significant number of them present the risk factors such as the early sexual intercourse (34%), the existence of an antecedent of STD (38%), the unprotected sex habit (6%) and the multiparity (14%). The existence of these risk factors would raise the probability of being infected with HPV [9] which is the main agent leading to the infection, and especially since the almost all the midwives (84%) had unprotected sex and that the average of their ages overlapped with the age of the appearance of this infection. Therefore, it appears that the midwives as well as the doctors and other health workers behave the same way as the rest of the population.

CONCLUSION

Despite the awareness of the womb neck cancer prevention methods and the existence of the risk factors from the midwives, the majority did not adopt a responsible health conduct. Therefore, it is necessary to implement health sensitization strategies among health workers in general and particularly among the midwives to improve their health behavior and health status.

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