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## **Cochrane Nursing Care Field – Cochrane Review Summary**

Prepared for the

## **International Journal of Nursing Practice**

***TITLE: Interventions for raising breast cancer awareness in women***

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- **Background:**

The systematic review summarised here is concerned with interventions for raising breast cancer awareness in women (O'Mahony et al 2017). Breast cancer is a major public health issue and is estimated to have caused 91,500 deaths across the European Union (EU) in 2012. In the EU, 24 of the 28 EU states and the countries of Australasia have population based breast screening programmes which are recognised as important public health interventions. (International Agency for Research on Cancer Accessed 15<sup>th</sup> June 2016). Early detection of breast cancer, which remains the most commonly diagnosed cancer in women, is key to early diagnosis and intervention.

Reducing mortality in breast cancer is multi-factorial and breast screening is one such strategy. Improved lifestyles and better population awareness are also important. Many women will discover a potential breast cancer symptom themselves perhaps between routine screening appointments so they need the knowledge, skills and confidence to identify breast changes and recognise the importance and urgency of seeking further advice from health care professionals.

Nurses and midwives need to understand what being breast cancer aware means so they can teach and advise woman about this important self-management strategy. Furthermore, whilst there may be some minor regional or country specific variations, around 90% of the nursing and midwifery workforce are female making this a topic of personal importance.

- **Objective/s:**

The purpose of this review was to assess the effectiveness of interventions for raising breast cancer awareness in women and the authors searched for studies which were group or individual educational interventions. The primary outcome of interest was women's knowledge of breast cancer symptoms as reported by women themselves and measured using validated scales such as the Breast Cancer Awareness Measure. Measures of confidence to check breasts, breast cancer awareness; women's motivation; confidence to seek help; time from breast symptom being detected to seeking help and measures of women's

intention to seek help and their perceptions of barriers to help seeking were the focus.

The secondary outcome measures included quality of life, adverse events, stage of cancer at diagnosis, survival estimates and breast cancer-specific mortality and all-cause mortality.

- **Intervention/Methods:**

Two randomised controlled trials were included totalling 997 participants. The Promoting Early Presentation (PEP) study enrolled 867 women and investigated the efficacy of an intervention for older women (women attending their final routine screening appointment in the UK). The intervention, which comprised a booklet and a one to one intervention, aimed to equip women with the knowledge, skills, motivation and confidence to detect breast cancer symptoms and seek help. This was measured at three time points; one month, one year and two years post intervention. The second trial, the Zahedan University of Medical Science (ZUMS) study, enrolled 130 women who were employees of the medical centre and measured the effects of an educational intervention on 'breast cancer preventive strategies' one month post intervention.

The two studies varied on risk of bias, educational interventions used and outcomes measures.

- **Results:**

Both studies indicate better knowledge of breast cancer symptoms and understanding of age related risk. The PEP study, which measured effects at three time points, indicates that a combination of written information with one to one interaction can increase breast cancer awareness for older women which is sustained over time. In the ZUMS study the participants received a group intervention and reported better understanding of preventive behaviours such as self-examination at one month post intervention.

- **Conclusions:**

There exists limited evidence about the optimal design and content of educational interventions for breast cancer awareness. Combining usual care with a booklet

and one to one verbal interaction increased women's knowledge of age related breast cancer risk and overall breast cancer awareness, which were sustained at 2 years, but more research is required. There exists no evidence about important issues such as the time from noticing a problem to seeking help quality of life, adverse events or breast cancer mortality. Furthermore, the focus on preventive behaviours in the ZUMS study may cause confusion given the focus of breast awareness and screening is early detection and not prevention per se.

- **Implications for Practice:** (the corner author creates these based upon the strength of the review results, and knowledge of nursing)

The findings of this review suggest that educational interventions have the potential to increase breast cancer awareness. As part of a multidisciplinary team and with a remit for health promotion and illness prevention, all nurses and midwives, regardless of their area of practice, have a role to play in raising breast cancer awareness as part of patient centred care. It is important that nurses have a good understanding of breast cancer symptoms, age and lifestyle related risks and what breast checking behaviours involve. Nurses can provide ongoing support and education about breast cancer awareness and breast awareness and help women to seek professional advice as necessary.

- **References:**

O'Mahony M, Comber H, Fitzgerald T, Corrigan MA, Fitzgerald E, Grunfeld EA, Flynn MG, Hegarty J. Interventions for raising breast cancer awareness in women.

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