Artikel 15

by Tantut Susanto

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Letter to the Editor

Breast Self-Examination Education for Skill and Behavior

Dear Editor,

Breast self-examination (BSE) is an early detection method to prevent breast cancer among women and is an early method of breast cancer screening (BCS) that can be done easily by women at home. BSE provides an early check that does not take a long time, does not require costs, maintains privacy, and does not include invasive procedures. BSE only takes 5 min.[1] Women are more likely to screen for breast cancer if they have a college education.[2] Health education from health professionals can increase awareness and the practice of BSE, more so than for individuals who obtain BSE information through the media. Yeramilli *et al.* suggest that cancer control in Mongolia should emphasize health education, especially among low-educated, rural, and unemployed women. However, not many women are involved in screening.[3]

In our study on the impact of BSE education on skill and behavior, we found that health education which involved six sessions significantly could increase psychomotoric skill but did not influence behavior. There were two participants of 40 women who found lumps on their breasts. This implies that health education may indirectly influence the behavior of participants where they may find breast abnormalities.

Enhancement of BSE awareness and practice through BSE training of health-care professionals may increase early breast cancer diagnosis and treatment rates.[4] In fact, Masoudiyekta *et al.* concluded that after educational intervention using the Health Belief Model related to BCS, there was a significant increase in knowledge, awareness, perceived susceptibility, perceived seriousness, perceived benefits, perceived barriers, self-efficacy, and cause of action. Further, the investigators reported that women's performance in the treatment group regarding BSE and mammography was more positive after the educational intervention compared to a control group [Table 1]. The difference in mean scores of knowledge between the two groups can likely be attributed to the educational value of BSE as an efficient, flexible, variety (using videos, lectures, SMS, and phone reminder follow-up), and interesting method of educational intervention in the current study.[5] Therefore, health education administered by health-care professionals regarding BSE could result in early self-detection, preventing breast cancer among women.

Table 1: Comparison of psychomotoric skill and behavior related to breast self-examination (n=40)

Skill of BSE	Means±SD	*P*	Correlation
Pair 1			
Preskill	54.33±12.86	0.04	0.320
Postskill	76.58±6.10		
Pair 2			
Prebehavior	0.33±0.58	0.16	0.205
Postbehavior	5.28±1.18		

SD=Standard deviation

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Conflicts of interest

There are no conflicts of interest.

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