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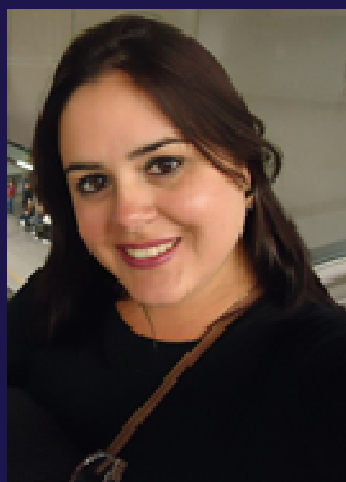
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## THE WORKERS KNOWLEDGE ABOUT PROSTATE CANCER: A DESCRIPTIVE EXPLORATORY STUDY

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### ABSTRACT

**Objective:** The objective of this project is to identify the workers knowledge about prostate cancer. **Methods:** This is a descriptive and exploratory study conducted in the city of Quixeramobim - Ceará, in August 2009. We worked with a questionnaire containing open and closed questions, which also allowed large and subjective answers. **Results:** We interviewed 20 men aged 30 to 40 years old. **Discussion:** All interviewed people reported having heard of such pathology and signs, but about symptoms, some said they did not have the knowledge and others reported dysuria itching. **Conclusion:** I find nurses a very important tool in the process of health education.

**Keywords:** Prostatic Neoplasms; Men's Health; Nursing.

## INTRODUCTION

There are several types of cancer, among them, we highlight prostate cancer. This in turn, is one of most types of cancer is among the male population, approximately 1.5 million cases diagnosed in last years. It is estimated that one in six men, aged over 45 years, may have the disease and ignoring this fact. This event is understandable, because many tumors can remain asymptomatic throughout life, which induces men to the illusory idea that the absence of symptoms means the absence of disease <sup>(1)</sup>. Many studies show that, in males, prostate cancer is among the main factors of morbidity and mortality, thus promoting, the importance of the disease at the level of public health <sup>(2)</sup>. According to the National Cancer Institute (NCI), prostate cancer is a public health problem, being the second most common type among the population, second only to nonmelanoma skin cancer. Its mortality rate reaches the second position and is second only to lung cancer<sup>(3)</sup>. In the fight against cancer, prevention and treatment are essential. If these measures are not possible, the oncologic emergence acts to control the disease and try to return to normal body<sup>(4)</sup>.

Over the years, there has been a considerable problem in its incidence, possibly, explained by the increase in life expectancy of Brazilians. This occurs because it is related to the progression of age, which means realizing that with age, they result from the increased prevalence of disease <sup>(2)</sup>. This is observed when considering that, from the prostate carcinomas, 95% are diagnosed in men aged between 45 and 89 years, and 50% of these cases eventually develop metastasis <sup>(5)</sup>.

The diagnosis of prostate cancer is made by clinical examination (rectal examination) and by measurement of prostate specific antigen (PSA), tests may suggest the existence of the disease and indicate the performance of ultrasound. Ultrasound, in turn, may show the need to perform trans-rectal prostate biopsy <sup>(6)</sup>. Rectal examination is essential in performing the physical exam, because he is who will provide information about the volume, consistency, borders, presence of irregularities, sensibility and mobility of the prostate. However, currently, there is some difficulty in its realization, since men associate the digital rectal examination to pain and embarrassment, both physical as mental <sup>(1)</sup>.

With this significant increase in the number of new cases and because of its considerable mortality involved, it is important to reflect about the relevance and urgency in improving strategies for prevention, diagnosis and treatment of this disease. Knowledge and information are important tools for optimization of systems for prevention, early diagnosis and treatment of diseases.

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The lack of information on prevention or treatment of prostate cancer may be related to low levels of schooling <sup>(7)</sup>. It is observed in studies that schooling associated to age, a relevant element in the realization of digital rectal examination. The same shows that younger men with higher education do not have many restrictions on the examination, although some would have avoided doing it. Since older men with lower education level, would not have the examination for not having symptoms <sup>(1)</sup>.

The lack of knowledge of men about prostate cancer difficult the early diagnosis and it influences on the prejudices and taboos that surround the digital rectal examination, allowing the progressive advance of the disease among the male population. In the case of prevention and health education, is the fact that health professionals, especially nurses, have a very relevant role, being able to develop actions aimed at sensitizing men to prostate disease prevention issues, and explaining about the possibility of early detection, diagnosis and treatment of disease in question.

Nurses can plan different ways to convey health information to the population, since they are trained to have, also, a social responsibility to the identification of a situational diagnosis of a particular public/region.

It is known that workers are exposed to numerous occupational hazards and that each profession may cause specific diseases to the function performed. To avoid accidents or industrial diseases, it is the nurse to provide effective assistance and qualified in health promotion, especially in the area of occupational health <sup>(8)</sup>. In this study, emphasizes the work of the taxi motorcyclists which covers high occupational risks, including the susceptibility to prostate cancer, justifying the choice for men with this profession. It can be seen in the scientific literature the lack of studies involving this audience and the importance of education and health promotion with them.

It is, therefore, essential to identify the knowledge of men about prostate cancer. Since there are few studies with specific focus on health`s men.

## **METHODS AND MATERIALS**

This is an exploratory study, with descriptive approach. Exploratory research starts with something of interest. It is a study that does not only observes, but investigates its complex nature and other factors to which it relates. In descriptive research, aspects are observed, described and documented <sup>(9)</sup>.

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The study was conducted in August 2009 in the city of Quixeramobim, Ceará, from visits to the workplace of the surveyed, taxi motorcyclists stations, located in the downtown area.

The sample consisted of a specific group of professional male taxi motorcyclists. The choice of this particular group was intentional because they are professionals who are exposed constantly to the risk factors for prostate cancer, such as the fact that they work constantly sitting in seats and possibly hot. From this universe were selected according to inclusion criteria set forth below: to be male taxi motorcyclists; to be aged between 30 and 40 years; being literate; being taxi motorcyclists from the downtown area. The criteria for exclusion, to fit male taxi motorcyclists who did not fill out the form completely.

Data collection was conducted through a questionnaire composed of open and closed questions, which allowed broad and subjective responses of survey respondents, who provided demographic data, information on knowledge and perception of health, knowledge about the disease and family history.

At first, there was an invitation to the taxi motorcyclists to participate in the research and presentation of it, clarifying possible doubts. In the second stage, after acceptance, presented a Consent Form, which contains the objectives of the study and guaranteed anonymity to participants. After signing it, a form was delivered, and it contained questions addressing beliefs and health behaviors, knowledge about prostate cancer, as well as risk factors, signs and symptoms and personal and family history. Participants filled out a form with help of the researcher, requiring it to about an hour. The answers contained on the form were analyzed based on the literature concerning the matter in question.

The project was approved by the Ethics Committee in Research of Federal University of Ceará (UFC) under protocol number 180/09. The study sought to follow the ethical and legal guidelines of Resolution 196/96 of the National Health Council (CNS), affording participants the freedom to withdraw the same at any time without any damage, either financial or moral.

## RESULTS

We interviewed 20 men with mean age of 30 to 40 years. Based on data collection (11) said they were brown, (seven) white and the rest (three) black. With regard to education, (13) did not finish elementary school, but (two) completed. Concerning the high school (three) have reported the completion of this level and only (two) denied such a situation. To preserve their identity, have been de-Oliveira P.Franco-Lima M.Cezario K.de-Oliveira M. The workers knowledge about prostate cancer: a descriptive exploratory study **Online Brazilian Journal of Nursing** [serial on the Internet]. 2012 April 30; [Cited 2012 May 14]; 11(1):[about ## p.]. Available from: <http://www.objnursing.uff.br/index.php/nursing/article/view/3595> .

cataloged with the letter M (males), followed by number (1-20). Concerning marital status (10) of respondents reported being married, (one) divorced/separated and the other is declared single.

When asked about their family income, it was noted that the majority (15) reported having income up to the minimum wage, (four) with income up to two minimum wages, and only (one) with incomes up to three minimum wages. This result may be related to the significant number of the taxi motorcyclists active in the city, leading respectively to the same monthly income does not exceed the average of a minimum wage.

Regarding health beliefs and behaviors participants were asked how consider their health status. The question brought in its alternative structure, where they were able to tick most compatible with their reality. The responses were most frequently mentioned (11) "I have never been seriously ill," (four) "I never had an illness that lasted a long time", (two) "according to the doctors I consulted my health is in excellent time". Only (three) of respondents indicated that do not need to go to the doctor.

When asked the subjects if they have attended a health service, the answers were relevant, because (19) individuals claimed to have appeared before the Health Service. From these (17) presented as a reason for disease and one reported a referral. But on the regular attendance to consultations with health professionals, only (four) do, and with the Family Doctor/ General Clinical.

Regarding the knowledge about prostate cancer (Ever heard of prostate cancer and if so, what is meant by prostate cancer?) Were obtained as a result:

*Yes, but I don't know the subject as well. (M3)*

*Yes, it is a disease which gives in men. (M18)*

*Yes, nothing. (M1)*

*Yes, I've heard, but I do not know what it is. (M15)*

*Yes, but I cannot explain. (M7)*

All respondents reported ever heard of this pathology, with (11) through such media as television, magazines and/or newspaper (six) in the workplace and (three) reported having acquired this information related to the disease through the population. Given the answers acquired realizes that none of them cited as sources of information the health institutions or health professional. Although the respondents have heard about the theme, they showed no preliminary knowledge.

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Considering the risk factors (15) of the subjects could not tell what were the possible causative factors of prostate cancer, (two) attributed the contact surface with high temperature (hot), (two) related to the cause of the pathology work in a seated position for prolonged periods and (one) reported to be related to the use of tight clothing. The following are some of the answers, when asked about the main risk factors for the development of prostate cancer.

*Yes, when a person works hard time sitting, and gets warm. (M2)*

*Yes, get warmth and wear tight clothes. (M13)*

When asked about the signs and symptoms of disease, (16) said they did not possess such knowledge and the other reported respectively, dysuria, urethral obstruction, dysuria with difficulty in urination and itching.

Related to knowledge and realization of diagnostic tests, (eight) were unable to pinpoint which tests would be necessary for the diagnosis of prostate cancer, (six) reported to be important the digital rectal examination, (five) reported the two examinations (digital rectal examination and PSA) and only (one) cited only the blood test. None of the diagnostic tests performed.

The data collection instrument used in the study presented alternatives for the not performing the diagnosis of rectal examination. The answers were: (11) see no reason, (five) were never told to do, (three) had to be ashamed, and only (one) reported wants to take the exam after 40 years of age, the recommended age.

## DISCUSSION

It is noticed that most men just are exposed when the subject matter is himself health. An aggravating factor is the difficulty of organizing health services in programs for prevention and health promotion for men, since in general for them pain, discomfort and suffering must be minimized. It is recurrent associate care to the decline of his image, representing weakness<sup>(10)</sup>. These records indicate that the majority of respondents seek health services before the onset of signs or symptoms. This fact indicates a lack of clear guidance to the public about diseases like prostate cancer.

The results showed that a significant number of respondents have little schooling, but most of them show some degree of instruction. It was noticed that, although few of the respondents had completed high school, their knowledge about the disease proved to be level with those who have not completed primary school. It was found that both groups share ideas and feelings influenced by the predominance of the social imaginary. This fact differs from data published by other research.

In a study of men about the same topic held in Portugal, it was observed that, 70% of respondents had not completed elementary school and had not knowledge about the disease. However, individuals with higher education showed some knowledge on the subject <sup>(2)</sup>.

It is understood that health professionals, especially, nurses must hone their skills and competencies, especially in the care plan - health education. Thus, will be able to develop strategies/interventions, as for example, leisure activities and/or other support for the men on the knowledge of prostate cancer.

About the discussion in relation to risk factors, respondents showed misleading ideas. You can see the evident lack of information front of the inquiry, the same mistake prostate cancer with other diseases, because the only factors reportedly related to prostate cancer are age and family history. Thus, age is an important risk factor, winning a special significance in prostate cancer, since both the incidence and mortality increase exponentially after 45 years of age. A positive family history for prostate cancer before 60 years of age may increase risks of cancer from 3 to 10 times compared to the general population <sup>(6)</sup>.

Regarding symptoms, the knowledge of respondents do not differ from other issues, there is confusion and misinformation. Regarding the single symptoms is pointed dysuria. Because it is a disease that often develops silently presenting as asymptomatic people tend to associate it with pain. The symptoms, are the main: polyuria, nocturia, dysuria and hematuria. In its most advanced, prostate cancer can be characterized by a framework of bone pain, or if more severe, associated with generalized infections or renal failure <sup>(6)</sup>. Concerning to prostate surgery or use of any medication for any condition related to the prostate, all participants denied.

Through the responses collected, it was observed that respondents find it difficult to broach the subject. This fact arouses in men feelings such as fear and prejudice, pushing them to the completion of existing diagnostic tests, further damaging the early detection. Given the importance of this fact by the negative impact that may result in men's health, it is necessary to prioritize alternative measures



of tracking as there are indicators that the mortality of prostate cancer appears to be decreasing which actively encourages the screening.

The rectal examination is a relatively inexpensive preventive measure. However, it is a procedure that negatively permeates the male imaginary point away countless men prevention of prostate cancer. Through the facial expressions of those surveyed was observed that the rectal examination still interferes on masculine identity characteristics. The completion of the examination may raise the fear of pain both physically as symbolical. The touch that involves penetration can be read as a violation, and it almost always associated to pain, although it is not felt; at least, experience the physical and psychological discomfort of being touched in part prohibited.

The recommendation is that both the digital rectal examination as PSA is made annually. In Brazil it is recommended that these tests begin to be made after 45 years. For better adhesion of the population, preventive and diagnostic tests are essential and active through three pillars: education health; paid up share and interdisciplinary health professionals; and accessibility to health services <sup>(5)</sup>. Thus, in the field of public health is essential to promote discussion focused on the meanings attributed to men's health in its various dimensions, and nursing an important role in the promotion and prevention of prostate cancer. These are key elements in maintaining health.

That is to say, the process of health education is valuable and essential, in what is included in the acts and operations of the nurses and they are part of "what-how" and "know-how" in the art of nursing care. It is necessary that the public contact the nursing profession, in the presence of any health-related questions, as they take in their daily care practices seen that this is not a complementary area, but paid in the "Nursing Care" In this competency, however, beyond proper techniques used in individual or collective, must constantly be alert to cultural competence. It is essential that the relationship established nurse and client/server be a relationship of help that leverage through genuine dialogue and systematic, so that the latter clearly understand the information received, allowing them to make their own choices and decisions <sup>(11)</sup>.

## FINAL THOUGHTS

Through the study we observed that the male population of workers interviewed knows little about prostate cancer. This fact indicates the need for the production of new studies and debates to walk targeted for the construction of knowledge about prostate cancer.

Therefore, it becomes essential for greater investment in knowledge production at all levels of health care assistance, from the specialized centers to tertiary services, to the primary care units, as another important factor found through this research, it occurs some resistance in the male membership of preventive measures, and professionals should be prepared to deal with this type of occurrence that is routinely found. Therefore, an aspect of considerable importance and deserves attention is the important role of nurses in relation to health education.

Another aspect is the work of uptake of possible new cases, the primary, ie, early screening. It is necessary to entice the male population to resort to health stations, even in the absence of symptoms, because we know that as well as some chronic diseases, prostate cancer is an insidious disease that though, can develop as asymptomatic. Symptoms may present themselves, when it reaches a much more advanced stage, negatively affect the probability of cure. Then the importance of screening, because when you make an early diagnosis and adoption of preventive measures itself, there is greater chance of success in the fight against cancer, including prostate cancer in the medium and long term.

The digital rectal examination, even in modern times gets a stigma, being considered the main difficulty in the acceptance of men in the adhesion of diagnostic methods. It is felt that this examination does not touch the prostate exclusivity, but also masculinity, and may in some cases assaulting her. In the present study is still evident that the majority of respondents considered their health status as positive, and takes care about the same, but a few men usually just go to the doctor regularly. This factor tends to make them have a fragmented view of health.

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