Review Article

Indian Journal of Maternal-Fetal & Neonatal Medicine
Volume 10 Number 1, January - June 2023
DOI: http://dx.doi.org/10.21088/ijmfnm.2347.999X.10123.3

Breast Cancer and Improvement Using Multimedia Education

Pooja Jain[1], S.P. Subashini[2], Simrat Kaur[3]

How to cite this article:
Pooja Jain, S.P. Subashini, Simrat Kaur/Breast Cancer and Improvement Using Multimedia Education/Indian Journal of Maternal-Fetal & Neonatal Medicine; 10(1):25–27.

Abstract

In order to identify the variables that have the most influence on women's decision to get a breast cancer screening, the health belief model was utilized as a framework for the research that looked at changes in the study participants following a multimedia health education intervention. Then, we might develop a strategy to improve women's rights.

Upcoming mammograms for breast cancer. In the experimental group, the ratings for perceived susceptibility, perceived seriousness, advantages, perceived barriers, signals to action, and self-efficacy were all considerably higher than in the control group following the multimedia health education intervention.

The effectiveness of multimedia health education, in our opinion, is superior to that of more conventional health education techniques and can encourage women to get screened for breast cancer. A different bodily part was affected by the cancer's spread. Breast cancer, which does not include skin cancer, is the most prevalent type of cancer among women.

Keywords: Breast cancer; Multimedia; Health education.

INTRODUCTION

Breast cancer occur when a malignant tumor in the breast. Breast cancer is an uncontrolled growth of breast cells. It can be ductal carcinoma or lobular carcinoma.

- Lobules a milk producing gland.
- Ducts Milk is transported to the nipples by tubes called the duct.

Authors Affiliation:
[1]Nursing Tutor, [2]Dean, [3]Professor, Department of Medical Surgical Nursing, School of Nursing, Galgotias University, Greater Noida 201306, Uttar Pradesh, India.

Correspondence Author:
Simrat Kaur, Professor, Department of Medical surgical Nursing, School of Nursing, Galgotias University, Greater Noida 201306, Uttar Pradesh. India.

E-mail: simrat.kaur@galgotiasuniversity.edu.in

Received on: 17.03.2023 **Accepted on:** 28.05.2023

CLASSIFICATION

Breast cancers are classified two types.

Because it has not spread into any surrounding breast tissue.

1. **Non invasive Breast cancer**

Which are contained within the lobules or milk ducts of the breast. Pre-cancers are sometimes used to describe non-invasive cancers, also known as carcinomas in situ. Two distinct types exist.

- *Ductal carcinoma in situ:* It start Since it hasn't spread to the breast tissue around it, in the milk duct of the breast.
- *In situ lobular cancer:* Lobular cancers that are non-invasive. There is no surrounding breast tissue where it has spread.

2. **Invasive Breast Cancer**

However, the cancer has not moved outside of

the breast's ducts or lobules into the surrounding breast tissue or lymph nodes. In total, there are two:

- *Invasive ductal carcinoma:* The lining of the breast milk duct has been penetrated by cancer that started there.
- *Invasive lobular carcinoma:* Has spread to surrounding tissue after initially developing in breast lobules.

Risk Factors

So many causes that may lead the risk of breast cancer. These are:

- Smoking, tobaccos.
- *Hormonal* **-** Birth control and development of premenopausal breast cancer.
- *High Cholestrol* **-** Related to increase high fat, and high calories diet.
- *Radiation* **-** Other risk ultraviolet rays.
- *Gender* **-** A women is the main risk for cancer.
- *Family History* **-** Women with close blood relations who have breast cancer are at higher risk.

Cause of Breast Cancer

- Exposure of radiation
- Obesity
- Smoking alcohol
- Genetic
- *Birth control* **-** Women using oral contraceptive (birth control pill) greater risk of breast cancer.
- *Menstrual period***-** Women who began having period Breast cancer risk is higher in the early stages (before age 12 or beyond age 55).
- Longer lifetime exposure to the hormones estrogen and progesterone may be the cause of the increased risk.

Warning Sign of Breast Cancer

- Nipple or breast pain.
- Skin rashes or dimples.
- The skin on the nipple or breast thickens with redness.
- Navel discharge, including blood and substances other than breast milk.
- Breast swelling, either completely or partially.
- A change in the breast's size or contour.
- Modification of your breast and nipple skin. It could be puffed up or irritated.

Diagnostic Evaluation

- History collection
- Physical examination
- *Breast exam***:** Check both of breast and lymph nodes.
- *Mastography*: An x-ray image of the breast is called a mammogram. Using a mammogram to search for breast cancer early signs.
- *Ultrasound*: In this exam, sound waves are used to create an image of your breast.
- *Biopsy:* Remove tissue or fluid from breast. They microscope to check for cancer cell.

MEDICAL MANAGEMENT

- *Drug Therapy* **-** The therapy is used to destroy tumor cell that may have spread distant side.
- *Chemotherapy* **-** Usually consist of combination
- *Doxorubicin* - They type of chemotherapy drug are slow or stop growth of cancer cell.
- *Carboplatin* **-** It is platinum based anticancer drug inside cell molecules DNA with cell.
- *Epirubicin* **-** Replication of DNA and synthesis of RNA in cancer cell.

RADIOLOGICAL THERAPY

Extremely energetic x-ray, particle, or other particles are used in radiation therapy for breast cancer. These particles have a greater impact on cancer cells than healthy cells.

- *External radiation* **-** Radiation from outside the body is delivered to the breast by an equipment known as external radiation. Breast cancer is treated most frequently with radiation therapy.
- *Internal (branchy therapy)* **-** Remove the tumor following surgery. To eliminate cancer cells, a radioactive source is inserted with in the patient.

HORMONAL THERPAY

- *Tamoxifen* **-** Remove the tumor following surgery. To eliminate cancer cells, a radio active source is inserted with in the patient.

SURGICAL MANAGEMENT

- *Lumpectomy***-** Tumor removal with a thin margin of surrounding healthy tissue.

- *Mastectomy*- Surgical procedure that removes tissue from either one or both breasts. Typically, the goal is to eradicate the disease or stop its transmission or occurrence.

PREVENTION

- Maintain a healthy diet.
- Proper eating food and vegetable.
- Avoid alcohol and smoking.
- Avoid exposure to radiation and environmental pollution.
- Protect yourself from the sun.
- Recreational therapies treat to help maintain a person physical mental emotional well being helping to reduce stress, anxiety.
- Promoting communication between the patient and her family.
- Proper medication as follow per care.

COMPLICATION

- *Lung complication* - That spread to the lung lead to symptoms and complication.
- *Brain and nervous system* - Cancer can brain stock and loss function or part of body.
- Wound infection or bleeding.
- Hair loss after radiation, chemotherapy therapy.

CONCLUSION

The early identification of breast cancer and risk reduction are two crucial components of prevention. Early non invasive cancer identification may be possible with Screening does not serve as cancer treatment, but rather identifies invasive cancer at an early stage that can be treated.

REFERENCES

1. Lewis," medical surgical nursing, "volume 2 edition 1st elsevier publication page no-1045-1050.
2. http://www.mayoclinic.org.
3. https:// en.wikipedia.org.
4. Brunner and suddharath's, "textbook of medical surgical nursing, suzzine with smatlzer brenda bare 13Th edition.
5. www.google breast cancer slideshare.com.