

PREVENTIVE TEST FOR CERVICAL CANCER DURING PREGNANCY: EXPERIENCES OF PREGNANT WOMEN

EXAME PREVENTIVO PARA O CÂNCER DE COLO DURANTE A GRAVIDEZ: EXPERIÊNCIAS DAS GESTANTES

EXAMEN PREVENTIVO PARA EL CÁNCER DE CUELLO UTERINO DURANTE EL EMBARAZO: EXPERIENCIAS DE LAS MUJERES EMBARAZADAS

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How to cite this article: Teixeira LM, Santos AAP, Sanches METL, Silva JMO, Cavalcante MV. Preventive test for cervical cancer during pregnancy: experiences of pregnant women. Rev baiana enferm. 2019;33:e33698.

Objective: to describe the experience of pregnant women with the accomplishment of the cervical preventive test in pregnancy. Method: descriptive and exploratory research, with qualitative approach, performed with 20 pregnant women linked to prenatal care from a Family Health Strategy unit in the city of Maceió, Alagoas, Brazil. Information produced between April and August 2018 through the Socioeconomic Identification Form and semi-structured interview. The data were analyzed through content analysis technique of Bardin. Results: the experiences about the accomplishment of the test during pregnancy were often permeated by feelings like shame, fear and pain, negatively affecting the acceptance of many pregnant women, even as part of prenatal routine tests. Conclusion: pregnant women considered the cervical preventive test in pregnancy an important procedure in health maintenance, although they had no clear knowledge about its true purpose.

Descriptors: Nursing. Pregnancy. Papanicolaou Test. Self Care.

Objetivo: descrever a experiência de gestantes com a realização do exame preventivo de colo de útero na gestação. Método: pesquisa descritiva e exploratória, de abordagem qualitativa, realizada com 20 gestantes vinculadas ao pré-natal de uma unidade de Estratégia de Saúde da Família da cidade de Maceió, Alagoas, Brasil. Informações produzidas entre abril e agosto de 2018, por meio do Formulário de Identificação Socioeconômica e entrevista semiestruturada. Os dados foram analisados pela técnica de análise de conteúdo de Bardin. Resultados: as experiências vivenciadas acerca da realização do exame durante a gestação eram, muitas vezes, permeadas por

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sentimentos como vergonha, medo e dor, causando impacto negativo na aceitação de muitas gestantes, mesmo fazendo parte dos exames de rotina do pré-natal. Conclusão: as gestantes consideraram o exame preventivo de colo de útero na gestação um procedimento importante na manutenção da saúde, embora não tivessem claro conhecimento acerca da sua verdadeira finalidade.

Descritores: Enfermagem. Gravidez. Teste de Papanicolaou. Autocuidado.

Objetivo: describir la experiencia de mujeres embarazadas con la realización del examen preventivo del cuello uterino durante el embarazo. Método: investigación descriptiva y exploratoria, con enfoque cualitativo, con 20 embarazadas vinculadas a la atención prenatal en unidad de Estrategia de Salud Familiar, en Maceió, Alagoas, Brasil. Información producida entre abril y agosto de 2018, a través del Formulario de Identificación Socioeconómica y entrevista semiestructurada. Datos se analizaron utilizándose de la técnica de análisis de contenido de Bardin. Resultados: las experiencias vividas sobre la realización del examen durante embarazo, a menudo, estuvieron impregnadas de sentimientos, como vergüenza, miedo y dolor, lo que causó impacto negativo en la aceptación de muchas mujeres embarazadas, incluso formando parte de los exámenes prenatales de rutina. Conclusión: las mujeres embarazadas consideraron el examen preventivo cervical durante el embarazo como procedimiento importante para mantener la salud, aunque no tenían claro cuál era el verdadero propósito.

Descriptores: Enfermería. Embarazo. Prueba de Papanicolaou. Autocuidado.

Introduction

Pregnancy involves various feelings and challenges. The maternal organism undergoes various physiological changes to sustain the developing fetus and prepare the body for the delivery process. The maternity, singular and remarkable moment in a woman's life, besides characterized by various psychological, physiological and hormonal transformations, it is also a step strongly influenced by family habits. In this sense, the care knowledge and practices in pregnancy influence the way the woman takes care of herself and the way the family and the people of her social life take care of her⁽¹⁻²⁾.

This physiological phenomenon and its evolution occur, in most pregnancies, without interferences. Despite this, some pregnant women suffer with some disease or develop some complication during pregnancy, which increases the probability of unfavorable developments, for both the baby and the mother. Pregnant women are an important risk group for developing infections due to the action of the immune modulation added to the influence of hormonal factors that can change the course of some diseases during the gestational period. The infections in the mother can affect both her health as well as the fetus', and the transmission

of these infections can occur during pregnancy, delivery and postpartum⁽³⁻⁴⁾.

Among these diseases, the cervical cancer is the most common among pregnancy-associated cancers, because, during pregnancy, immunological changes create an environment conducive to the proliferation of the Human Papilloma Virus (HPV), which can cause various injuries, such as the common warts and genital warts (also known as condyloma). The imbalance in the vaginal flora resulting from pregnancy favors the development of both HPV and other infectious agents, and may bring risks to maternal and fetal health⁽⁵⁾.

Cervical cancer is very common in the female population, with 500 thousand new cases per year in the world. It is responsible for the death of approximately 5,400 women per year⁽⁵⁾. The main strategy for screening Cervical Cancer (CC) is the periodical accomplishment of the cytopathological test, more commonly known as "Pap Smear", which detects early lesions and allows for diagnosing the disease in its early stages, even before the appearance of symptoms⁽⁶⁾.

During pregnancy, the accomplishment of several tests is recommended, which include

the cervical cancer preventive test, being an opportune moment for the early detection of precursor lesions (which are asymptomatic), because the test allows for the early detection of abnormal cells, being one of the most efficient methods in the diagnosis of this pathology⁽⁶⁻⁷⁾. The test should be conducted for all women with active sexual life, including pregnant women⁽⁸⁾.

Pregnancy constitutes an opportune moment for the screening of precursor lesions, since the test is part of the routine prenatal visits recommended by the Brazilian Ministry of Health. Another important factor to perform this test during pregnancy is the accelerated development of precursor lesions, since, during pregnancy, the mother enters into a state of immunosuppression, in which an exacerbated development of warts and lesions may occur⁽⁷⁾.

Papanicolaou test is extremely important for the early diagnosis of cervical cancer and remains the most widely adopted strategy for screening this type of cancer. This easy-access test has low cost regarding its great efficiency in the early detection of precursor lesions, in addition to being a procedure that does not require anesthesia or sedation⁽⁹⁾.

The lack of knowledge results in low awareness about the meaning, the importance of the Papanicolaou test and restricted access to health care. This fact, in part, is responsible for a significant number of women who have never undergone the test and end up discovering the disease at an advanced stage⁽¹⁰⁾. Therefore, health units need to know the understanding of women about the importance of the undergoing the preventive test in pregnancy. When assuming as principle the perception of pregnant women, knowledge of experiences and practices that can prevent them from undergoing the preventive test can enable the intensification of educational process during prenatal consultations and improve the quality of care, planning and use of health resources.

In view of these considerations, this study aimed to describe the experience of pregnant women with the accomplishment of the cervical preventive test.

Method

This is a descriptive and exploratory research with a qualitative approach, developed in a Family Health Strategy unit in the city of Maceió, Alagoas, Brazil, which has prenatal follow-up. The data were generated during the period from April to August 2018, through Socioeconomic Identification Form and semi-structured interviews. Twenty women were randomly invited to participate in the study, aged between 14 and 49 years, met by the health unit. The number of participants was delimited in the course of the fieldwork, seeking to interview different age ranges, with divergent ideas, practices and world views.

The interviews were conducted with the aid of a guide of overall identification, containing obstetric and gynecological data, and life habits, and a guide containing five open questions, whose answers were recorded with a tape recorder, upon the prior permission of the participants. All signed the Informed Consent Form (ICF) and the Informed Assent Form (IAF). All ethical principles of researches involving humans from Resolution n. 510/16 of the National Health Council were assured. The Research Ethics Committee (REC) of the Federal University of Alagoas approved the study, under the number 75867417.3.0000.5013.

The participants' anonymity and the confidentiality of the interviews were assured. To identify them, the letter P was used, followed by the sequential numerical order of the interviews (P1, P2, P3 through P20). Only the authors of the study had access to the full interviews. The inclusion criteria were: age between 14 and 49 years, undergoing prenatal care in the unit during the period of information collection and acceptance to participate in the research as a volunteer. The exclusion criteria were: pregnant women in situations that hampered answering the questionnaire, such as labor, mental disorder, among others, as well as adolescents who were not accompanied by their legal guardian.

The empirical material generated in the interviews was treated by the thematic analysis

method, following the three proposed steps: floating reading of the transcription of interviews recorded at digital environment; exploration of the material with identification of thematic units; and treatment and interpretation of the results.

Results and Discussion

The speeches allowed for analyzing the knowledge of pregnant women about the importance of undergoing the preventive test during pregnancy and identifying three thematic units: the importance of the preventive test during pregnancy; stories about the test; and experiences during the test.

The importance of the preventive test during pregnancy

The Papanicolaou test is essential for preventing cervical cancer and its implementation is extremely important for the early diagnosis. The pregnancy represents an excellent opportunity for the screening of precursor lesions, because vaginal tests are more frequent in the gestational period, when the woman usually seek the health service. When questioned about the importance of undergoing the test during pregnancy, all participants readily acknowledged its importance.

Essential, isn't it? We really have to undergo it. (P16).

Ab, it is very important! (P2).

Although some women understand the importance of undergoing the Papanicolaou test during pregnancy, other showed unawareness about its accomplishment, associating it to Sexually Transmitted Infections (STI) and factors related to the baby's health and the type of delivery.

I can't tell you. (P7)

It's to check if everything is fine, to check, during delivery, to check if everything will be fine for the baby be born. It's to check if it will be normal or cesarean section. (P2).

It is important, because of the diseases, to see if you have AIDS, syphilis, these diseases, right? (P13).

It is important that women know the purpose and importance of the cervical preventive test, since it undoubtedly contributes to reducing

female morbidity and mortality⁽⁹⁾. The analysis of the discourses of pregnant women showed that they had a distorted knowledge about the goals of the preventive test and showed a deficit of self-care. This makes necessary the intensification of the educational process among them, aiming to approach them to the health service and enlighten them about the importance of this test.

Only two interviewees associated the test with an important way for the early diagnosis of precursor lesions:

I know that this cancer begins with a small injury, right? Then it turns into it [cancer] [...] the importance of the test is to early discover this small injury, not to become one that no longer has cure. (P15).

Well, what I know is that it's a test to find out if the cervix has any small injury, and if it can turn into a cancer later. (P19).

Knowledge is an important factor related to self-care, because it makes the individual able to develop actions that contemplate their own needs, in addition to being the best resource to motivate the population. In women's case, it is important to decide to seek health services and learn how to use positive care practices⁽¹¹⁾.

The nursing consultation is important for pregnant women, since it contributes to deconstructing prejudices brought by them, as well as to the clear understanding about the purpose of the test.

Stories about the test

In relation to the myths constructed about the preventive test and its accomplishment during pregnancy, pregnant women kept the idea or had already heard, sometime in life, that the cytopathological test is painful, unpleasant and uncomfortable or that it should not be performed in the gestational period. The negative reports were divided between fear, shame, nuisance and lack of information.

I've never undergone it, but the girls say it hurts, it's uncomfortable. (P10).

I undergo it because I have to, but it's very uncomfortable, it hurts, it burns. The person is ashamed without clothing, exposed. (P15).

Among the main reasons for not undergoing the cytopathological test are the unawareness about its

accomplishment during the pregnancy and the feeling of fear and/or shame in relation to the exposure of genitals to people with whom they have no bond or proximity⁽⁸⁻⁹⁾.

There was also concern of the participating pregnant women in relation to the request of the oncological cytology during pregnancy. Many assumed that this test should not be done during this phase, because they believed it would harm the progress of pregnancy.

I thought it shouldn't even be done during pregnancy, because I thought it would affect the baby or anything. I thought it was a harmful test. (P2).

I didn't know it could be done, because I've never done it. I thought we couldn't because of the baby, because it's intrusive. (P7).

I got surprised when the nurse told me. I thought that pregnant women couldn't do it because it touches your inside, right? I thought the baby could be preterm or that it could cause abortion. (P11).

The test must be carried out as a complementary test during the prenatal consultations. It is also recommended in case of 36 months or more since the last cytological test, aiming to update the cytology, as well as prevent complications in the gestational period⁽⁷⁾.

For most female population, the cytological test is still little adopted. This test is the most cited by health professionals as one of the most feared by women. This may be related to cultural, education factors and distorted information, because many are unaware that the exam should also be done during the gestational period⁽⁸⁾.

Education and culture have great potential to influence individuals, being self-care learnt through human interaction and communication. The notable lack of information about the cytological test is worrying, putting at risk the opportunity to screen cervical cancer in a moment as timely as the prenatal consultations^(2,12-13).

Pregnancy is an excellent opportunity for preventing cervical cancer, since the test is part of the routine prenatal care, and may be performed any time in pregnancy. However, the ideal is to request it at the beginning of pregnancy, during the first consultation. The squamocolumnar junction is often externalized in the ectocervix during pregnancy, exempting from endocervical collection, but a collection of endocervical

specimen does not seem to increase the risk over pregnancy, provided that an appropriate technique is applied⁽⁷⁻⁹⁾.

Although the cytopathological test in the gestational period still cause great impact on the acceptance of many women, its accomplishment is essential during this period. Health professionals need to have technical and scientific knowledge that can contribute to the awareness of pregnant women about the importance of the cytopathological test. For this reason, these professionals need to be trained, regarding both reception and technical-scientific knowledge, to enlighten and encourage women to carry out the examination and intensify the educational process during the pre-natal, to reduce the asymmetry in the pregnancy-health service and to improve the quality of care⁽¹⁴⁾.

The entire health team must be involved to ensure the accomplishment of the preventive test by pregnant women. Furthermore, the active search of this group by community health agents is recommended, because all health professionals are responsible for clarifying, encouraging and ensuring the test. With this purpose, the nursing consultation stands out during the prenatal period, in which the nurse must receive the pregnant woman and promote the construction of bond with the intention to guide her and ensure maternal health^(8,13).

Experiences during the test

The participants expressed several feelings about the accomplishment of the preventive test, because each one brought her own perception about this procedure and specific ways of expressing her feelings and experiences. The pregnant women, when questioned about the experience of performing the test, revealed that the fear, embarrassment and shame were present during the test.

I felt ashamed at the time. It's very embarrassing. (G13).

I thought it was uncomfortable. It's an examination that bothers you and has the anxiety issue as well. Fear, it's nervous! (G16).

I was afraid it hurt, I couldn't relax. And I was ashamed to show myself, too. (G9).

The negative feelings expressed by pregnant women about the experience of undergoing the preventive test can be associated with factors such as lack of knowledge regarding the physiology and anatomy of the body, gender relations little discussed and restricted experiences about sexuality throughout their lives. The embarrassment of exposing the body reveals how sexuality can influence a woman's life, because pregnant women many times put their health at risk due to shame and fear to undergo the cytology^(9,15).

These feelings are part of the individuality of each pregnant woman. They need to be aware that the cytological test is a fundamental test during the pre-natal and an efficient screening of precursor lesions of CC, accessible to the population, and painless, provided it is accomplished with a good technique and with the woman relaxed^(13,16). Moreover, the health professional must also use a speculum of adequate size for each woman, and establish a relation of empathy and trust. These factors directly influence the experience during the test, since they provide comfort and safety to the patient⁽¹⁷⁻¹⁸⁾.

In this perspective, the nurse's role in deconstructing these pre-established concepts and experiences becomes important. They must be aware of the doubts and afflictions of the pregnant woman, creating bond of trust and mutual respect that integrates the health service and makes her feel safe to undergo this procedure. Thus, their role is fundamental in the intensification of the educational process in the gestational period^(8,19).

The study presented limitations regarding the demand of pregnant women, due to constant cancellation of pre-natal consultations carried out by the responsible professionals, in addition to infrastructure, because the unit was under renovation and had no place for the accomplishment of the interviews, which were often postponed until acquiring a suitable location.

Conclusion

The present study allowed for analyzing the knowledge of pregnant women about the importance of undergoing the preventive test for cervical cancer in pregnancy. The pregnant women interviewed considered the preventive test an important procedure in health maintenance, but had no clear knowledge about its true purpose, revealing a deficit of self-care.

For these women, the experiences of the preventive test during pregnancy are permeated by negative feelings. Many fear it because they consider it a procedure that causes shame by the exposure of their genitalia, by fear and pain and by fearing it may harm the progress of pregnancy. In this way, the self-care, with the timely detection of the disease and prognosis for the most positive outcome, often loses its sense.

There is need for intensifying the educational process during prenatal consultations, aiming to improve the quality of care. The nurse and the nursing consultations are important to encourage women to carry out the preventive test, as well as to work the deconstruction of these prejudices and ideas, which often hinder the adherence of women to health services.

Thus, activities for permanent education and health education at universities, schools, health centers and organizations that work with the theme are essential, aiming to raise greater attention to issues of prevention of cervical cancer and to reduce women's rates of morbidity and mortality.

Collaborations:

1 – conception, design, analysis and interpretation of data: Larissa de Morais Teixeira and Amuzza Aylla Pereira dos Santos;

2 – writing of the article and relevant critical review of the intellectual content: Larissa de Morais Teixeira, Amuzza Aylla Pereira dos Santos, Maria Elisângela Torres de Lima Sanches, Jovânia Marques de Oliveira e Silva and Marília Vieira Cavalcante;

3 – final approval of the version to be published: Larissa de Morais Teixeira and Amuzza Aylla Pereira dos Santos.

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Received: October 8, 2019

Approved: November 12, 2019

Published: March 11, 2020



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