Students knowledge and awareness of oral cancer (study at Senior High School 2 Bau-Bau, Southeast of Sulawesi)

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Abstract

Objective: Oral cancer is a malignancy which comes from oral mucosal epithelial and other oral parts including from salivary glands (majority are the minor ones) inside the mouth. The aim of this study is to measure the oral cancer qualitatively and spread knowledge and awareness among the students at SMAN 2 Bau–Bau.

Material and Methods: The type of this research is observational–descriptive study, with cross–sectional study as the research design. This research was carried out at SMAN 2 Bau–Bau. Bau–Bau, Southeast Sulawesi from February to March 2015. The sampling method applied was cluster random sampling.

Results: this research was carried out to 155 students of SMAN 2 Bau–Bau which consisted of 102 female students and 53 male students. There were about 79.3% samples who have never heard about it yet. Samples knowledge about age that have a bigger risk to get oral cancer was 18 samples (11.6%) chosen was 0–18 years old, 65 samples (41.9%) chosen was 19–25 years old, 40 samples (25.8%) chosen was 26–44 years old and about 32 samples (20.6%) chosen was more than 44 years old. There was no sample chose that we can decrease the possibilities to get oral cancer by having a good life style. There were about 108 samples (69.6%) who had never done all of them (smoking, drinking alcohol and piercing their lips or tongue).

Conclusion: The reason behind unknown action is the lack of information and socialization about oral cancer.

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Introduction

Oral cancer is a malignancy which comes from the epithelial oral mucosa and another oral's organ and also from salivary glands (especially the minor one) inside the mouth.[1] The development of oral cancer is so fast. A few of oral cancer can be diagnosed at the late level with high die rate. Only half of diagnostic case will survive more than 5 years, but if we can know it at the early stage, about 80–90% can live.[2] Early detection is one of the most important part of a success treatment and for the survival of the patient especially inside the mouth. However, early detection of the fierceness from the oral cancer is not easy, it can be proved from the low rate of the healing, as reported that 50% diagnosed patients have already reached regional metastasis or even to further stage. Early detection of oral cancer which is asymptomatic will increase quality of life of the patient and minimize hard treatment.[2]

Actually, premalignant condition and early malignant cannot be identified by visual examination because many things that cannot be seen and cannot be ignore, even by the professional who has a lot of experience. Clinical appearance of premalignant and oral malignance is asymptomatic, so it makes the condition hard to be detected. There are varied clinical appearances from oral cancer and usually do not seem so dangerous like ulceration, induration, nodule, bleeding and enlargement of lymphoid glandule in the neck.[2]

Manifestation of oral cancer that is usually seen is leukoplakia. A majority of oral cancer is due to leukoplakia. About 16–23% of leukoplakia can change into oral squamous cell carcinoma, even it has been reported that there is a relationship between oral squamous cell carcinoma and leukoplakia.[2]

Biopsy result shows that about 43% of leukoplakia in the mouth has premalignant sign which is known by dysplastic cell or shoreless carcinoma in the epithelium (carcinoma in situ), even the carcinoma could spread into the layer above epithelium or invasive carcinoma which is a squamous cell carcinoma.[2]

Early detection can make a good prognoses.[2] One of the causes of delayed diagnostic in oral cancer is due to inadequate knowledge and awareness from the society about the danger of oral cancer and it makes them not to approach the medical service[3]

Material and Methods

The type of this research is observational–descriptive study, with cross-sectional study as the

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research design. This research was carried out at SMAN 2 Bau-Bau, Bau-Bau, Southeast Sulawesi from February to March 2015. The sample was the students of SMAN 2 Bau-Bau. The sampling method applied was cluster random sampling and the total samples was 20% from all of the students (155 students)

Results

Figure 1 this research was carried out to 155 students of SMAN 2 Bau-Bau which consisted of 102 female students and 53 male students.

Sample's knowledge about early detection of oral cancer are still low, total samples who have ever heard about early detection of oral cancer was only 32 samples and total samples who have never heard about early detection was 132 samples. In other words, there were about 79.3% samples who have never heard about it yet.

Samples knowledge in term of dominant sex who had a high risk to have oral cancer was 83 samples (53.5%) of the chosen male and female had the same risk to have oral cancer. 64 samples (41.3%) of the chosen male to had a higher risk to have oral cancer and about 8 samples (5.1%) of the chosen female who had a bigger risk to have oral cancer.

Samples knowledge about oral cancer among 10 cancers which occurs the most was still low. As more than half from the samples doesn't know about it. About 109 samples (70.3%) did not know and only 46 samples (29.7%) knew it.

Samples knowledge about age that have a bigger risk to get oral cancer was 18 samples (11.6%) chosen was 0–18 years old, 65 samples (41.9%) chosen was 19–25 years old, 40 samples (25.8%) chosen was 26–44 years old and about 32 samples (20.6%) chosen was more than 44 years old.

Samples knowledge about the belief that if we can decrease the possibilities to get oral cancer by having a good lifestyle was 145 samples (93.5%) so 10 samples (6.5%) did not know about it and there was no sample chose that we can decrease the possibilities to get oral cancer by having a good life style.
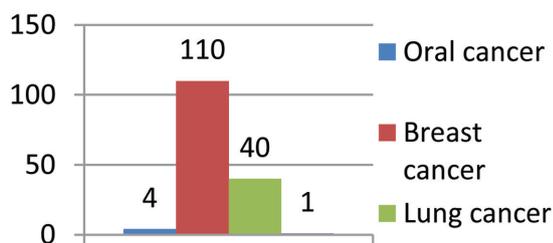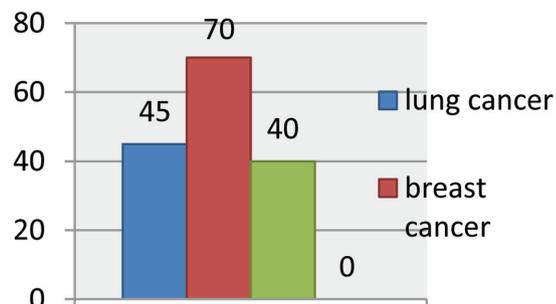

Figure 1   Well-known cancer

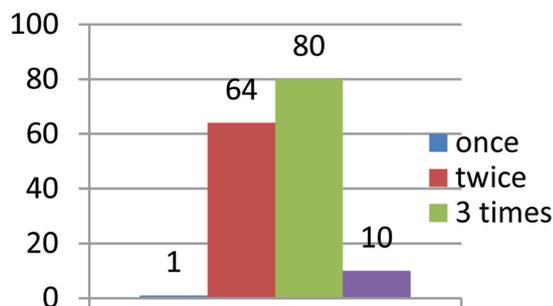**Figure 2**   The easiest detectable cancer

Figure 3   Frequency of brushing teeth

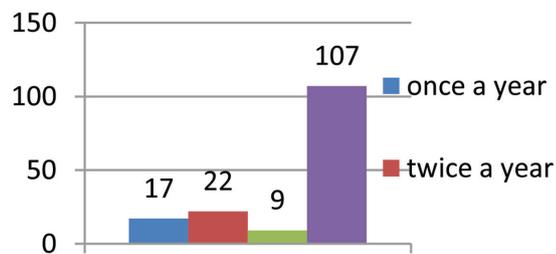
Figure 4   Frequency of visiting dentist
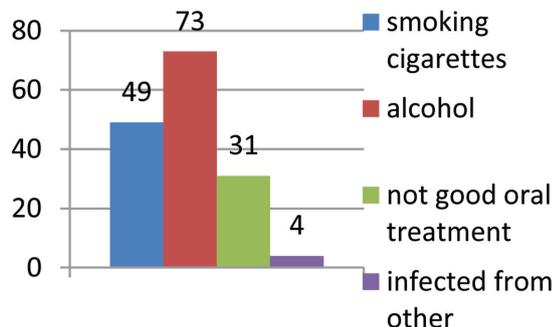

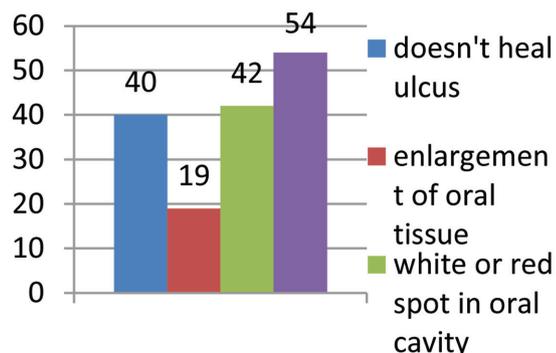**Figure 5**   The cause of oral cancer

Figure 6   Samples knowledge about the signs of oral cancer

Samples habits related to the awareness of oral cancer and a good lifestyle were 16 samples (10.3%), that had smoking habit were 8 samples (5.2%) and had ever scrapped their teeth 5 samples (3.2%), used fix orthodontic not from their dentist 5 samples (3.2%), pierced their lips or tongue 5 samples (3.2%), smoked and consumed alcohol 3 samples (1.9%). Finally, there were about 108 samples (69.6%) who had never done all of them (smoking, drinking alcohol and piercing their lips or tongue)

Discussion

Oral cancer awareness and knowledge on oral cancer of SMAN 2 Bau-Bau students are still low. In this research, we found that 2.6% chosen samples with oral cancer as the well-known cancer, followed by breast cancer (70.9%), lung cancer (25.8%) and prostate cancer (0.7%). Samples believed that drinking alcohol is the main cause of oral cancer, (31.6%) chose smoking cigarettes to be one factor contributed to oral cancer and the rest chose bad treatment as the cause of oral as well as infected by other patients.

Research done by Palensia et al.[3] reported that society realizes smoking cigarettes as the main cause of dentomaxillofacial cancer. In term of student's knowledge about the sign of oral cancer's sign, there were about 54 samples (34.8%) did not know the sign, 42 samples (27.1%) chose enlargement of oral tissue as the sign of oral cancer and 19 samples (12.2%) chose red or white spot as the sign of oral cancer. The majority of students agreed that if they do a good lifestyle then they can decrease the possibilities of having oral cancer. Research in Portugal also reported that only ulcers that never healed as the sign of oral cancer.[3] A situation like this happened in Bau-Bau, the family of the patient said that the early sign of oral cancer that their family gets was ulcers which never healed, even when they already gave it medical attention. They also reported that their family who got oral cancer did not have a healthy lifestyle, in which they love to eat fast food and were also being active smokers.

Sample's knowledge about early detection of oral cancer was still low, total samples who have heard about early detection of oral cancer were only 32 samples and total samples who have never heard about early detection were 132 sample, there were about 79.3% who had never heard about oral cancer.

The awareness of students in SMAN 2 Bau-Bau on oral cancer was proved by keeping their mouth clean, even a number of students routinely to visit dentist. It shows that there is a relationship between the oral cancer awareness and knowledge. If the society knows the sign, causes and effect of oral cancer, then their awareness about it also will increase.

Conclusion

Oral cancer awareness and knowledge among the students in SMAN 2 Bau-Bau is still low because they have inadequate information among the students and there are less socialization about oral cancer.

Conflict of Interest

The authors report no conflict of interest.

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