Evaluation Of The Anxiety Status Of Patients With Hpv-Positive

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ABSTRACT

Cervical cancer, which constitutes 4.5% of cancers seen in women, ranks fourth in the world and ninth in Turkey. With the recommendation of the World Health Organization, population-based screening programs are carried out for breast, cervix and colorectal cancers, which are among the first in our country. The share of cancers screened is 35% of all female cancers. In 2016; 2,898,424 people were included in cervical cancer screening programs, resulting in an increase compared to 2015. When the causes of death statistics are examined cancer-related deaths account for approximately 20% of all deaths.

Although early lesions are detected with the HPV test, considering the psychological effects such as depression, anxiety and loss of self-esteem caused by the disease itself, as well as the treatment process that brings pain, sexual problems, loss of workforce, and financial burden, it is important to consider how important the precautions to be taken before the disease occurs. It is open. In this study, the anxiety status of patients whose HPV test results were positive in our clinic between November 2021 and June 2022 was evaluated. The mean anxiety score of the participants is 22.25 ± 8.91 . The median is 24. Six of the participants (30%) have low anxiety, 7 (35%) have moderate anxiety, and 7 (35%) have high anxiety.

Keywords: Human papillomavirus, Pap smear, Cervical cancer, Anxiety.

Introduction

Human papillomavirus (HPV), which has more than 200 types, is a DNA virus belonging to the papillomaviridae family (Şahiner & Şener, 2013). The incidence of HPV is around 10% worldwide (Hathaway, 2012). According to studies conducted in Turkey, the incidence of HPV varies between 2% and 6% (Şahiner & Şener, 2013).

HPV is a sexually transmitted viral infection. The sexual transmission is defined as genitalgenital, genital-anal, genital-oral, oral-anal (Şahiner & Şener, 2013). The risk of encountering HPV throughout a person's life is between 50-80% (Hathaway, 2012). HPV is classified as low-risk and high-risk according to whether it is oncogenic or nononcogenic. Warts caused by the low-risk HPV group usually occur in the genital areas and are called genital warts. They can also be seen on the hands, neck and lip edges. Warts are more likely to be seen in cases where immune immunity is reduced and a second infection occurs (Park, Introcaso, & Dunne, 2015).

High-risk HPV group can be fatal up to cervical, vaginal, anal, oropharyngeal cancers (Genital HPV Infection - Fact Sheet, 2022). Cervical cancer is the most common type of cancer among HPV-related cancers. It is the fourth most common cancer among women (World fact sheets, 2022). HPV is seen in almost 100% of women with cervical cancer (De Martel, et al., 2012).

A long period of 10 years has been defined for HPV infection to turn into cervical cancer after ingestion into the body (Şahiner & Şener, 2013). Cervical cancer is rare under the age of 20 and occurs on average in women aged 35-55 years. However, approximately 15% of cervical cancers occur in women over the age of 65 (Kulasingam, Havrilesky, Ghebre, & Myers, 2011).

Among other common cancers caused by HPV, 88% of anal cancers are caused by HPV (De Martel, et al., 2012). Both sexes are equally at risk for anal cancers (Krzowska-Firych, Lucas, Lucas, Lucas, & Pietrzyk, 2019). The incidence of oropharyngeal cancers, which is among the other cancers caused by HPV, was found to be 25.6% (De Martel, et al., 2012). Penile cancer is one of the other HPV-related cancers. The rate of penile cancers caused by HPV is around 50% (De Martel, et al., 2012).

Cytological tests are used in the diagnosis of HPV. HPV DNA testing is a painless procedure. While its sensitivity is 95-98%, this rate is close to 100% when tested with pap-smear. (Şahiner & Şener, 2013). Performing HPV DNA test together with pap-smear test is called co-test and this test is repeated every 5 years when the result is negative (Mavi Aydoğdu & Özsoy, 2018).

Anxiety is a state of fear, distress and tension in which the self feels threatened. (Ozkan, 1993). Anxiety disorder, on the other hand, means marked distress and dysfunction due to anxiety (Tomb, Psychiatry for Family Physicians, 1994). If anxiety occurs even when there is no dangerous situation, it lasts for a long time and cannot be terminated, pathological anxiety is mentioned (Uzbay, 2002). Symptoms may start suddenly or become more frequent. Patients usually try to resist these symptoms with their own efforts. When they have difficulty in overcoming the problem and cannot overcome the symptoms, they may apply for treatment (Alkın & Alptekin, 1995).

Most of the women experience anxiety and distress during the gynecological examination (Demir & Oskay, 2014). Compared to many developed countries, the rate of women having regular pap tests in Turkey remains low (Karaca , Palancı , & Aksu, 2008). In Kılıç's study (1994) one of the reasons why women hesitated from gynecological examination was the fear of a poor diagnosis. Similarly, in the study of Behbakht et al. (2004), it was determined that the level of Pap smear is lower in women who are worried about going to the doctor than women who do not have this anxiety (Behbakht, Lynch, Teal, Koen , & Massad, 2004).

HPV infection causes psychological, emotional and financial problems as well as physical problems. It has been stated that women diagnosed with HPV experience fear of getting cancer, experience sexual dysfunctio, and face financial difficulties (Sexual dysfunction in women with human papilloma virus infection in the Turkish population). World fact sheets, 2022). In this study, the anxiety status of patients with positive HPV test results performed in our clinic between November 2021 and June 2022 was evaluated.

MATERIALS AND METHODS

Study Design

This descriptive study was conducted in our clinic between November 2021 and June 2022. Our study was conducted with twenty patients who admitted to our clinic. After the patients were informed about the study, the volunteers were included in the study.

Data Collection

The Beck Anxiety Scale was used to determine the anxiety, worry and attitudes of the patients who were positive for HPV tests taken for general health examination within 1 week after learning the results. The scale consisted of 21 items and is scored as 0 (never), 1 (mild), 2 (moderate), 3 (severe) for each item. According to the scores obtained, the anxiety levels of the patients; It can be categorically evaluated as \leq 17 points low anxiety, 18–24 points moderate anxiety, \geq 25 points high anxiety.

RESULTS

The mean anxiety score of the participants is 22.25 ± 8.91 . The median is 24. Six of the participants (30%) have low anxiety, 7 (35%) have moderate anxiety, and 7 (35%) have high anxiety.

Table 1. Classification of the participants according to their anxiety level.

Anxiety Levels	Ν	%
Low anxiety	6	30,0
Moderate anxiety	7	35,0
High anxiety	7	35,0
Total	20	100,0

CONCLUSION and DISCUSSION

Early diagnosis of cervical cancer, which is an important cause of mortality among gynecological cancers and the availability of a screening test are of critical importance. For this reason, screening tests and the dissemination of these tests are current research topics.

Although early lesions are detected with the HPV test during this process, the psychological effects such as depression, anxiety and loss of self-esteem caused by the disease itself are quite challenging for the patients. In addition to these, considering the pain, sexual problems, loss of workforce, and the treatment process that brings financial burden, it is clear how important the measures to be taken before the disease occurs.

Thanks to psychological support, it is believed that patients who avoid testing and whose diagnosis is delayed can be reached more easily.

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