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HIGH RISK OF OVARIAN CANCER IN RURAL AND NON TRIBAL WOMEN

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Abstract

Background: The term "ovarian cancer" includes several different types of cancer that arise from cells of the ovary, most commonly, tumors arise from the epithelium or lining cells of the ovary. Smoking is an established risk factor for many diseases and is one of the most important public health problems worldwide. Rural areas of the United States have a higher smoking prevalence than urban areas. Chronic stress associated with high income inequality has been hypothesized to increase ovarian cancer risk and other adverse health outcomes.

Material & methods: The present study was conducted at Geetanjali Medical College and Hospital, Udaipur (Rajasthan). Total 100 cases (females) attending the obstetrics and gynecology department for some gynecological and other problem were selected for this study between the age of 40-60 years, who were attending cancer centre at GEETANJALI MEDICAL COLLEGE AND HOSPITAL, Udaipur (Rajasthan).

GROUP I: - It consisted of healthy females control subjects (n=50) .By routine examination and tests, we ensured that all the subjects were healthy and there were no signs and symptoms or history of ovarian tumor and diseases

GROUP II: - It consisted of ovarian cancer females subjects (n=50) with a history of ovarian tumor.

Results: high risk of ovarian cancer occurs in female who lives in rural area and takes alcohol

Conclusion: The present study we highlights the diagnosis, prognosis and recurrence of the role of smoking and alcohol in rural area womes so they need to aware for the same.

Key words: Ovarian cancer, smoking, alcohol, rural area.

Introduction:

"Ovarian cancer" includes several different types of cancer that arise from cells of the ovary. These include epithelial ovarian (from the cells on the surface of the ovary), fallopian tube, and primary peritoneal (the lining inside the abdomen that coats many abdominal structures)[1]

Smoking is a risk factor for ovarian cancer in 2009 the International Agency for Research on Cancer added mucinous ovarian tumours (which comprise about a tenth of all ovarian cancers) to their list of tobacco-related cancers.[2]

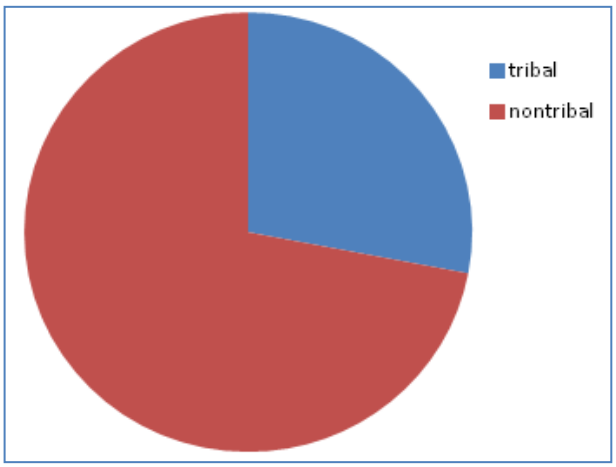
population live in rural areas but there is little information on rural–urban patterns of cancer survival Studies in other countries suggest that rural residence is associated with poorer survival,and higher chance of develop ovarian cancer.[3,4] which could reflect more advanced stage at diagnosis and less adjuvant treatment [5,6,7] .

Material and Methods: This Study was conducted in department of biochemistry, Geetanjali Medical College & Hospital, Udaipur (Rajasthan) in collaboration with department of oncology and gynecology after obtaining institutional ethical committee permission. The total sample of 50 patients including cases (female). Informed consent was obtained from all subjects for participating in the study.

Results:

TABLE 1: DISTRIBUTION ACCORDING TO AREA (40-60 YR) IN SUBJECTS

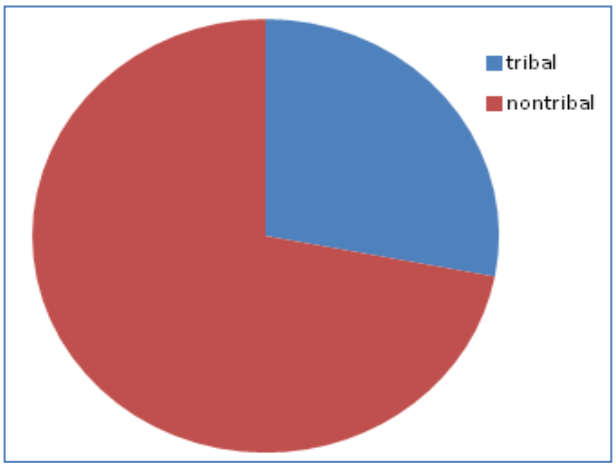
AREA	NO. OF SUBJECTS	PERCENTAGE (%)
Rural	28	56%
Urban	22	44%



GRAPH 1:

TABLE 2: DISTRIBUTION ACCORDING TO TRIBAL/ NON TRIBAL (40-60 YRS) IN SUBJECTS

SUBJECTS	NUMBER (n=50)	PERCENTAGE (%)
Tribal	14	28%
Non Tribal	36	72%



GRAPH 2:

Discussion:

The present study was conducted at Geetanjali Medical College & Hospital, Udaipur, on 50 subjects, attending the obstetrics and gynecology department for some gynecological and other problems. 50 normal healthy subjects were also included for comparison as control.

Out of 50 cases, there were 28 (56%) cases from rural and 22(44%) cases were from urban area (Table no 1). Out of 50 control, there were 27 (54%) from rural and 23 (45%) from urban area . There are large number of studies are available who are reported higher number of cases from the rural area and lower from urban area[8]. Therefore our results are in close agreement with the above findings.

Out of 50 cases, 36 (72%) cases were Non Tribal and 14(28%) cases were Tribal (Table no 2). Out of 50 control, 39 (78%) were Non Tribal and 11 (22%) were Tribal (Table no 13). These data suggest that mostly cases and control were Non tribal in our study.

Limitation: A very few number of patients were enrolled for this study

Conclusion: females from rural area and low status were at high risk of ovarian cancer, due to ipoor hygine and less awareness.

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