



Family Physicians' Knowledge and Attitudes About Human Papillomavirus Vaccine

Aile Hekimlerinin Human Papillomavirus Aşısı Hakkındaki Bilgi ve Tutumları

Human Papillomavirus Aşısı / Human Papillomavirus Vaccine

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Özet

Amaç: Bu çalışmadaki amacımız, aile hekimlerinin Human papillomavirus (HPV) aşısı hakkındaki farkındalık, bilgi ve tutumlarını değerlendirmektir. **Ge-reç ve Yöntem:** Farklı aile sağlığı merkezlerinde çalışan 53 aile hekimi çalışmaya dahil edildi. Sosyo-ekonomik demografik özellikleri, HPV aşısı ile ilgili farkındalık, bilgi ve tutumlarla ilgili soruları içeren bir anket, yüz yüze görüşülerek dolduruldu ve olasılık değeri (p) <0.05 istatistiksel olarak anlamlı kabul edildi. **Bulgular:** HPV aşısı hakkında farkındalık %77.4 ($n=41$) ve bu konuda yetersiz bilgiye sahip olan hekim oranı %60.4 ($n=32$) idi. Bayan aile hekimlerinin erkeklerle göre bilgi düzeyleri daha yüksekti ($p=0.028$). HPV aşısı hakkında temel bilgi kaynağı %83.0 ile medya olarak bulundu. Hekimlerin %49.2'si ($n=26$) yetersiz bilgi ve güvensizlikten dolayı aşırı reddederken, %50.9'u ($n=27$) kendileri ve aileleri için aşırı onaylamaktaydı. Bununla birlikte, merkezlerine başvuran hastalara aşırı öneren hekim oranı yalnız %62.3 ($n=33$) idi. **Sonuç:** Sonuç olarak, HPV aşısının prekanseröz servikal lezyonları önlediği son çalışmalarda gösterildiğinden, aile hekimlerinin bu konuda bilgilendirilmeleri, toplumun aşırı karşı olan eğilim ve isteklerini artırabilir.

Anahtar Kelimeler

Human Papillomavirus Aşısı; Aile Hekimi; Farkındalık; Bilgi; Tutum

Abstract

Aim: In this study, our aim was to evaluate family physicians' awareness, knowledge and attitudes about the human papillomavirus (HPV) vaccine. **Material and Method:** Fifty-three family physicians working in different family health care centres were included. A questionnaire including their socio-demographic characteristics, awareness, knowledge and attitudes was administered via the face-to-face conversation method. A probability value of $p < 0.05$ was considered statistically significant. **Results:** Only 41 (77.4%) of the family physicians were aware of the HPV vaccine, and 32 (60.4%) had insufficient knowledge about it. Female family physicians' knowledge was significantly higher than that of their male counterparts ($p = 0.028$). The predominant source of information about the HPV vaccine in the study group was the media (83.0%). Whereas 26 (49.2%) of the family physicians had no consent for the vaccine because of insufficient knowledge and confidence, the remaining 27 (50.9%) were in favour of it for themselves and their partners and children. Only 33 (62.3%) of the family physicians recommended the vaccine for patients attending the family health centres. **Discussion:** In conclusion, because recent studies have shown the preventive effect of the HPV vaccine on precancerous cervical lesions, informing family physicians of the vaccine may lead to an increase of people willing to receive a vaccination.

Keywords

Human Papillomavirus Vaccine; Family Physician; Awareness; Knowledge; Attitude

Introduction

Human papillomavirus (HPV) infection is the most common sexually transmitted disease, with a 30-50% prevalence amongst women [1, 2]. HPV, which has more than 100 types, has been held for responsible for anogenital cancers and precancerous intraepithelial lesions [3, 4]. HPV types 6, 11, 42 and 44 are non-oncogenic and cause anogenital warts; HPV types 16, 18, 31, 33, 35, 45, 51, 52, 58, 59 and 68 are oncogenic and are related to anogenital cancers [5-8].

Cervical cancer, which is one of the most preventable cancers, is second amongst worldwide cancer-related deaths after breast cancer in females of reproductive age. In our country, it is the ninth most common and thirteenth most fatal cancer [9-11]. HPV infection is the most important risk factor causing cervical cancer, as HPV has been detected in all cancerous and pre-cancerous intraepithelial lesions of the cervix [3, 12]. Although performance of the Papanicolaou test worldwide and use of condoms have been successful in decreasing the incidence of cervical cancer, it is not possible to totally eliminate the transmission of HPV infection [2, 13, 14]. Therefore, scientists have been interested in improving an HPV vaccine to prevent HPV infection and also cervical cancer. The vaccine has reached success in the primary prevention of cervical cancer, and two forms of vaccines—bivalent and quadrivalent—are in global use today.

In our country, the HPV vaccine has been used since April 2007 [15]. However, relevant to the administration of the vaccine, professional recommendation is considered to be crucial. Hence, the provider’s knowledge, opinion, intention and confidence play a significant role in the willingness of the general population to receive a vaccination and in the successful prevention of cervical cancer. This study was designed to evaluate family physicians’ and nurses’ knowledge, intention and attitudes about the HPV vaccine.

Material and Method

This study included 53 family physicians working in different family health care centres. A questionnaire developed by researchers and based on the literature was administered to participants via the face-to-face conversation method. Items on the questionnaire were related to socio-demographic features (n = 6); awareness of HPV, cervical cancer and the HPV vaccine (n = 3); and knowledge about the HPV vaccine (n = 4) [2, 16, 17]. Each correct answer was scored as ‘1’, and knowledge level was classified as ‘poor’ (0-1), ‘moderate’ (2-3) or ‘high’ (4) according to the total score.

Statistical analysis was made by using the SPSS for Windows 11.5 program. The descriptive statistics were expressed as mean and standard deviation for age, as middle-sized for number of children and as number of cases and percent (%) for categorical variables. The comparisons between the subjects in terms of the importance of the means and middle-sized values were done by using Student’s t test and Mann Whitney U test. The nominal variables were evaluated by using Pearson’s Chi-square or Fisher’s tests. A probability value of $p < 0.05$ was considered statistically significant.

Results

The study group included 53 family physicians consisting of 30 men and 23 women, and the mean age was 37.7 ± 5.9 years. The demographic characteristics are shown in Table 1.

Table 1. Family physicians’ demographic characteristics.

Demographics	N = 53
Age	37.7 ± 5.9 (30-60)
Gender	
Male	30 (56.6%)
Female	23 (43.4%)
Marital status	
Married	45 (84.9%)
Single	8 (15.1%)
Having children	2 (0-3)

Female family physicians’ knowledge about the HPV vaccine was significantly higher than that of their male counterparts ($p = 0.028$). There was no significant difference between married and single family physicians in terms of knowledge about the HPV vaccine ($p = 0.240$) (Table 2).

Table 2. Demographic characteristics and family physicians’ knowledge about the HPV vaccine.

	Poor	Moderate- High	p
Age	38.4 ± 5.8	36.7 ± 6.1	0.303
Gender			0.028
Male	22 (68.8%)	8 (38.1%)	
Female	10 (31.2%)	13 (61.9%)	
Marital status			0.240
Married	29 (90.6%)	16 (76.2%)	
Single	3 (9.4%)	5 (23.8%)	
Having children	2 (0-3)	1 (0-3)	0.122

Amongst the study group, only 41 (77.4%) of the family physicians were aware of the HPV vaccine, whereas they were more aware of cervical cancer (94.3%) and HPV infection (83.0%). Media was mentioned as the main source of information about the HPV vaccine in the study group (83.0%).

The family physicians’ consent for the HPV vaccine for themselves, partners or children was different according to their level of knowledge and confidence about the vaccine. Whereas 26 (49.2%) of the family physicians had no consent for the vaccine because of insufficient knowledge and confidence, the remaining 27 (50.9%) were in favour of it for themselves and their partners children. According to the scores obtained from the questionnaire about HPV vaccination, 32 (60.4%) of the family physicians had insufficient knowledge of the HPV vaccine. Therefore, only 33 (62.3%) of the family physicians recommended the HPV vaccine for patients attending the family health care centres (Table 3).

Table 3. Family physicians’ awareness and attitudes about the HPV vaccine.

	N = 53
Awareness	
HPV infection	44 (83.0%)
Cervical cancer	50 (94.3%)
HPV vaccine	41 (77.4%)
Information source	
Physician	9 (17.0%)
Media	44 (83.0%)
Friends and neighbourhood	3 (5.7%)
Vaccination consent for	
Her-/himself and partner	27 (50.9%)
Her/his daughter	17 (32.1%)
Her/his son	14 (26.4%)
Having no consent	26 (49.1%)
Reason to refuse vaccination	
Insufficient knowledge	17 (65.4%)
Lack of confidence	8 (30.8%)
Knowledge about HPV vaccine	
Poor	32 (60.4%)
Moderate	19 (35.8%)
High	2 (3.8%)
Recommend vaccination for patients	33 (62.3%)

Discussion

Studies on the HPV vaccine have shown that, according to the efficacy of the vaccine, screening frequency and starting age of the screening, the risk of cervical cancer has decreased between 67% and 99%. The success of the vaccine in the prevention of persistent HPV infection and cervical dysplasia has been found to be 100% [18]. Therefore, family physicians’ awareness and attitudes of the HPV vaccine are important to convince people to receive a vaccination. In this study, we evaluated the knowledge and attitudes of the family physicians working in our district and aimed to increase their awareness about the HPV vaccine on account of the population.

The study of Naki et al. [19] assessed physicians’ and non-physicians’ awareness, knowledge and attitudes about HPV infection and the HPV vaccine. The results indicated that the awareness of HPV infection was higher in the physician group. Whereas participants’ consent levels for the HPV vaccine for themselves were similar, consent for their offspring was significantly higher in the physician group [19]. In our study, 44 (83.0%) family physicians were aware of HPV infection, and 27 (50.9%) had higher vaccination consent for themselves than for their offspring. They mentioned that insufficient knowledge and lack of confidence fundamentally affected their decision about the HPV vaccine. However, in a study from France, where the family physicians were administered a similar questionnaire about their views and practice concerning the HPV vaccine, 89.6% of the participants were confident about the vaccine’s safety and were in favour of HPV vaccination [20]. Moreover, in the United States, Pearce et al. [21] conducted a survey focusing on paediatric providers’ knowledge and opinions about the HPV vaccine.

They discovered that most providers (78%) felt comfortable counselling about the vaccine and administering it [21]. Duval et al. [3] reported that most of the Canadian physicians (86.7%) in their study indicated they expected an important benefit from HPV vaccination and intended to prescribe the HPV vaccine to patients. Recall that only 33 (62.3%) family physicians in our study recommended the HPV vaccine to patients.

On the other hand, Chow et al. [22] evaluated Asian mothers’ and physicians’ knowledge and attitudes about HPV vaccination. Their results showed that physicians should be more proactive in discussing and recommending the HPV vaccine, as the Asian mothers had poor knowledge and low perceptions of self-relevance [22]. In addition, the study by Barnack et al. [23] revealed that religiosity, perceiving their children as susceptible to HPV and perceived negative consequences of HPV infection were significant predictors of parents’ willingness to vaccinate for HPV. Therefore, the physicians’ decision to vaccinate their own children was important to encourage parents to vaccinate their children [23].

In conclusion, family physicians’ knowledge and awareness about the HPV vaccine are related to patients receiving prescriptions for the vaccine and their willingness to become vaccinated. Therefore, medical awareness programs including information about the characteristics of the vaccine may be beneficial.

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