



## A study on raise in incidence of cancer in Erode district

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### ABSTRACT

Cancer is a collection of various diseases characterized by abnormal cell growth. Lung cancer is the top cancer killer and smoking remains the leading preventable cause of death. Furthermore, major disparities in smoking and lung cancer exist by education, income, and race/ethnicity. While tobacco control policies are the most effective strategies to prevent lung cancers, lung cancer computed tomography (CT) screening has also been shown to reduce lung cancer risk among heavy current and former smokers. The Cancer Intervention and Surveillance Modeling Network (CISNET) lung group develops and applies population models for lung cancer, quantifying the impact of tobacco control and CT screening on lung cancer and all-cause mortality. To date, this work has focused on the country as a whole and has yet to account for tobacco and lung cancer disparities by subgroup and region. The smoking and lung cancer models will incorporate other factors that reflect different smoking risks such as race/ethnicity, education, income, and geographic location. This will allow for analyses of the effects of tobacco control policies on smoking prevalence in relevant high-risk groups, and estimation of the impact of policies on health disparities in smoking and lung cancer outcomes.

### I. INTRODUCTION

Cancer is a group of diseases involving abnormal cell growth with the potential to invade or spread to other parts of the body. These contrast with benign tumors, which do not spread to other parts of the body. Possible signs and symptoms include a lump, abnormal bleeding, prolonged cough, unexplained weight loss, and a change

in bowel movements. While these symptoms may indicate cancer, they may have other causes. Over 100 types of cancers affect humans. A COLLECTION OF RELATED DISEASES: Cancer is the name given to a collection of related diseases. In all types of cancer, some of the body's cells begin to divide without stopping and spread into surrounding tissues. Cancer can start almost anywhere in the human body, which is made up of trillions of cells. Normally, human cells grow and divide to form new cells as the body needs them. When cells grow old or become damaged, they die, and new cells take their place. DIFFERENCES BETWEEN CANCER CELLS AND NORMAL CELLS: Cancer cells differ from normal cells in many ways that allow them to grow out of control and become invasive. One important difference is that cancer cells are less specialized than normal cells. That is, whereas normal cells mature into very distinct cell types with specific functions, cancer cells do not. This is one reason that, unlike normal cells, cancer cells continue to divide without stopping.

### II. OBJECTIVES

- To study psychological behavior of the cancer patient at their final stage.

### III. SCOPE OF THE STUDY

- This study will help us to know about the problems and struggles faced by cancer patient.
- This study may be helpful to the general public in knowing the cause and effects of cancer..

### IV. LIMITATIONS OF THE STUDY

- A study that all felt as a more sensitive one, so at first all of them neglected on approving it.
- As doctor is my respondents, so it is tough for us to contact them in their busy schedule.

**V. REVIEW OF LITERATURE**

**LITERATURE REVIEW**

**CANCER CASES ON THE RISE IN ERODE  
JANUARY 06, 2008 00:00 IST**

**66 patients died in six months**

- Over 300 patients getting treatment every month in two major cancer hospitals
- ERODE: “Most people contract cancer owing to environmental problems. **Food path cancer is on the increase and oral cancer is decreasing in Erode district.** But overall cancer cases are on the increase,” said Imayam Trust founder secretary Dr. Abul Hasan. The Trust was formed a year ago to treat terminally ill cancer patients and provide them free food and shelter with donations from doctors in Erode, who are all members of the Indian Medical Association. The then President A.P.J. Abdul Kalam inaugurated it.
- “Most of the terminally ill cancer patients are neglected by their relatives and even their own children. Sometimes they are illtreated. Imayam Trust gives them free shelter and takes care of them till their death,” said Dr. Hasan.
- Erode is located on the banks of Cauvery River and there are many villages on the banks of Kalingarayan Canal.

**VI. RESERCH METHODOLOGY**

**RESEARCH DESIGN**

- A Master plan that specifies the method and procedures for collecting and analyzing needed information.
- A research design is a framework or blueprint
- for conducting the marketing research project.

**CLUSTER SAMPLING:**

Cluster sampling refers to a type of sampling method. With cluster sampling, the researcher divides the population into separate groups called clusters. Then , a simple random sample of clusters is selected from the population. The researcher conducts the analysis on data from the sampled clusters.

**DATA COLLECTION METHOD**

**PRIMARY DATA**

These are data which are collected for the first time directly by the Researcher for the Specific study undertaken by him. In this research primary data are collected directly from the Respondent by using Questionnaire.

**SECONDARY DATA**

These are data which are already collected and used by someone preciously. In this research review of Literature, Details of the industry are collected from the Internet.

**SAMPLING SIZE AND TECHNIQUE**

**SIZE OF THE SAMPLE**

- Size of the sample is 20

**SAMPLE DESIGN**

Sampling is the process of selecting a sufficient number of elements from the population. .

**STATISTICAL TOOLS USED**

To analyze and interpret collected data the following statistical tools were used.

1. Simple percentage method
2. Hentry garrett ranking

**SIMPLE PERCENTAGE METHOD**

Percentage analysis is the method to represent raw streams of data as a percentage for better understanding of collected data.

$$\text{Simple percentage} = \frac{\text{No of respondents}}{\text{Total No of Respondents}} \times 100$$

**HENRY GARRETT RANKING**

Garrett’s ranking technique to find out the most significant factor which influences the respondent, Garrett’s ranking technique was used. As per this method, respondents have been asked to assign the rank for all factors and the outcomes of such ranking have been converted into score value with the help of the following formula:

$$\text{Percent position} = 100 (R_{ij} - 0.5) N_j$$

Where  $R_{ij}$  = Rank given for the  $i$ th variable by  $j$ th respondents

$N_j$ = Number of variable ranked by  $j$ th respondents.

**VII. DATA ANALYSIS**

**TABLE NO 1.1 PROFILE OF THE RESPONDENTS**

Details of the doctor		No. of Respondents	Percentage
Gender	Male	12	60%

	Female	8	40%
	Total	20	100%
Age Group (in Years)	20- 30	2	10%
	30-40	8	40%
	Above 40	10	50%
	Total	20	100
Year of experience (in years)	Less than 10	6	30%
	10 – 20	7	45%
	20 – 30	7	35%
	More than 30	-	-
	Total	20	100%
Number of cancer patient handled	1-5	5	25%
	5-10	1	5%
	10 – 20	2	10%
	More than 20	12	12%
	Total	20	100%

### 1.1 INTERPRETATION

From this table it evident that respondents of male are 60% and the female are 40%. Mostly 50 % of the respondents are under above 40 age group. 30% of the respondents have less than 10 years of the experience, 45% of the respondents have 10 – 20 years of experience, and 35% of the respondents have 20 – 30 years of experience. 25% of the respondents have handled 1 – 5 number of cancer patient, 5% of the respondents have handled 5 – 10 number of cancer patient, 10% of the respondents have handled 10 – 20 number of cancer patient, 12% of the respondents have handled 1more than 20 number of cancer patient.

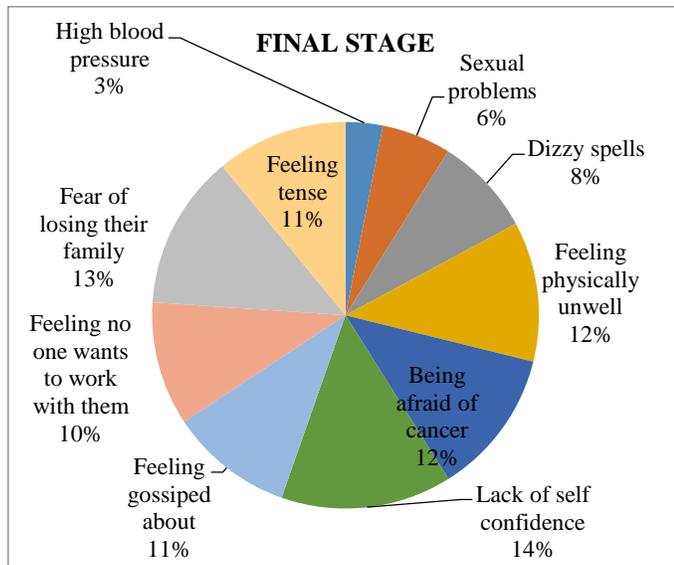
**TABLE NO 1.2 RANK THE PSYCHOLOGICAL BEHAVIOUR OF CANCER PATIENT AT THEIR FINAL STAGE**

S.NO	FACTORS	MEAN SCORE	TOTAL	RANK
1	High Blood Pressure	151	151	10
2	Sexual Problems	141	282	9

3	Dizzy Spells	134	402	8
4	Feeling Physically Unwell	57	570	4
5	Being Afraid Of Cancer	66	594	3
6	Lack Of Self Confidence	87	696	1
7	Feeling Gossiped	126	504	6
8	Feeling No One Wants To Work With Them	126	504	6
9	Fear Of Losing Their Family	105	630	2
10	Feeling Tense	107	535	5

### 1.2 INTERPRETATION

From this study, it find that “From the above table it is evident that “Lack of self-confidence” ranked as no.1 with a total score of 696,”fear of losing their family” is ranked as no.2 with a total score of 630, “being afraid of cancer” is ranked as no.3 with a total score of 594, “ Felling physically unwell” is ranked as no.4 with a total score of 570, “feeling tense” is ranked as no.5 with a total score of 535, “Felling gossiped and feeling no one wants to work with them” is ranked as no.6 with a total score of 540, “Dizzy spells” is ranked as no.4 with a total score of 402, “sexual problems” is ranked as no.9 with a total score of 282 and “high blood pressure” is ranked as no.10 with a total score of 151.



### X. WEBSITES

[www.thehindu.com/news/national/tamil](http://www.thehindu.com/news/national/tamil)  
[https://www.physio-pedia.com/Breast\\_Cancer](https://www.physio-pedia.com/Breast_Cancer)  
<https://www.cancer.net/>  
[https://www.cancertutor.com/cancer\\_reference/](https://www.cancertutor.com/cancer_reference/)

### SUGGESTIONS

- Some cancer diseases are preventable so that the food habits, to reduce pollution and they need to avoid smoking & alcohol as the cancer therapy is well advanced and they need to diagnosed early.
- Today life style has been changed people life style, work, attitude are the main reason if we able to change the living atmosphere so that we can reduce cancer.
- More awareness is needed especially among females and gives the cancer patient's good hope, confidence, palliative care is necessary.

### VIII. CONCLUSION

A plan for the diagnosis and treatment of cancer is a key component of any overall cancer control plan. It also needs to be integrated with a palliative care programme, so that patients with advanced cancers, who can no longer benefit from treatment, will get adequate relief from their physical, psychosocial and spiritual suffering. Furthermore, programme should include an awareness-raising component, to educate patients, family and community members about the cancer risk factors and the need for taking preventive measures to avoid developing cancer.

### IX. REFERENCES

- *The Hindu Published On January 06, 2008*
- *World Cancer Research Fund / American Institute for Cancer Research. Continuous Update Project Report. Food, Nutrition, Physical Activity, and the Prevention of Breast Cancer. [Internet]. AICR. 2010 [updated 2010; cited 2015 Feb 18].*
- *The Canadian Task Force on Preventive Health Care. Recommendations on screening for breast cancer in average-risk women aged 40–74 Years. CMAJ 2011 Nov 22; 183(17):1991–2001.*