

## INTRODUCTION

Cancer is the second leading cause of death in the united stated cancer cells divide rapidly and tend to be aggressive such as genital tract cancer. This type of cancer can invade near by tissues and can spread to the other areas of the body (*Willian & Elisabeth 2007*).

Genital malignancies account for 13% of all cancers in women in (USA), while in Egypt the incidence of female genital malignancy is 10.9% half of them located on cervix and the other half equally distributed between ovary and endometrial this according to the latest statistical reports (*CRMCA & Ian et al., 2008*).

The primary sites for cancer in the female reproductive organs are the uterus, ovaries, and cervix. Cancer of the vagina, vulva, and fallopian tubes is relatively uncommon although cancer can occur at any age, the incidence increases with age (*Andron et al., 2007*).

The real causes of female genital tract cancer is not discovered (*Smeltzer and Bare 2007*).

Risk factors for cervical cancer include a history of sexually transmissible diseases, particularly condyloma acuminatum, or genital warts, caused by HBV. Prolonged use of unopposed estrogen replacement therapy predisposes to overgrowth (hyperplasia) or endometrial tissue and is a significant risk factor for uterine cancer. Family history is an important risk factor for ovarian cancer. Other factors such as the use of talcum powder and feminine hygiene products that contain talc and the use of fertility drugs have also been implicated (*Lero-lua et al., 2008*).

Cancer of the reproductive organs may not be diagnosed until it is advanced because few symptoms are experienced in the early stages. When symptoms occur, they are often nonspecific and could be caused by infection or other benign conditions. (*Patrica & Susan 2008*).

Cancer of the ovaries is particularly difficult to diagnose because the condition may remain "silent" until far advanced, when the chance of long- term survival is

greatly reduced. The site of occurrence included the ovaries, fallopian tubes, uterus, cervix, vagina and vulva (*Patrica & Susan 2008*).

Complications of genital malignancies can be divided into two categories; the first category includes symptoms, signs, and syndromes such as bleeding, nausea and vomiting, obstructive uropathy, and para neoplastic syndromes which are often due to the natural history of genital tumors themselves. The second category includes treatment- related complications (*Reynolds, 2005*).

Early diagnosis is strongly associated with long term survival. A variety of screening and diagnostic procedures are useful in early detection. Screening tests include periodic pelvic examinations, aptest ,ultrasonography (*Sharon, 2008*).

Treatment of cancer of the reproductive organs is based on location and extent of the disease as well as the age and desire of the woman to have children. Early treatment of cervical cancer may consist of cryosurgery, destruction of abnormal tissue by laser, loop electgrodiathermy excision procedure, or surgical conization of the cervix to remove the affected area. After treatment, a surveillance schedule should be established because there is risk of recurrent squamous intra epithelial lesion (SIL) after treatment.

Treatment for uterine, ovarian, or advanced cervical cancer usually consists of a total abdominal hysterectomy and bilateral saplingo-oophorectomy and may include adjuvant therapy with radiation or chemotherapy (*Louise et al., 2007*)

Nurses can be pivotal in cancer education they constitute the largest group of health professionals involved in cancer care and they practice in a variety of settings where they become intact with the public. Nurses are often approached informally by friends and neighbors who want special information about cancer and Risk factors (*Ash et al., 2007*).

Nurses, can play a vital role in the healing process for many patients. Nurses can have a positive impact by providing answers to clients to help guide them through the "medical maze" of diagnostic tests and decision-making (*Wanch, 2008*).



### **Justification of the problem:**

Women experience and knowledge are inadequate about genital tract cancer so they need up dated information about risk factors to decrease incidence of genital cancer .So this study was implemented to assess knowledge and attitude of women about risk factors of female genital tract cancer .