DOI: https://doi.org/10.36489/nursing.2020v23i267p4452-4465

Keywords: Breast Neoplasms; Nurses; Knowledge.

Knowledge about breast cancer among primary care nurses in Divinópolis/MG

ABSTRACT Objective: to assess the level of knowledge of nurses in primary care in the public network of Divinópolis (MG) about breast cancer. Method: quantitative, descriptive, cross-sectional research with nursing professionals, who had worked for at least one year in the municipal health system. A structured questionnaire was used, the distribution of the variables of interest was analyzed and for their presentation, descriptive statistics, mean, absolute frequency and percentage were used. Result: Knowledge was identified by the interviewees, with mammography being the most suitable exam for early diagnosis, but doubts were identified in the age and recommended periodicity for the exam, and the most mentioned limiting factors for screening were the lack of knowledge of the population and the equipment insufficient. Conclusion: It is necessary to approach the theme in the period of graduation and continuing education, investment in the training of professionals and expansion of disease prevention and health promotion.

RESUMEN Objetivo: evaluar el nivel de conocimiento de las enfermeras en atención primaria en la red pública de Divinópolis (MG) sobre el cáncer de mama. Método: investigación cuantitativa, descriptiva, transversal con profesionales de enfermería, que habían trabajado durante al menos un año en el sistema de salud municipal. Se utilizó un cuestionario estructurado, se analizó la distribución de las variables de interés y para su presentación, se utilizó estadística descriptiva, media, frecuencia absoluta y porcentaje. Resultado: los entrevistados identificaron el conocimiento, siendo la mamografía el examen más adecuado para el diagnóstico precoz, pero se identificaron dudas en la edad y la periodicidad recomendada para el examen, y los factores limitantes más mencionados para la detección fueron la falta de conocimiento de la población y el equipo insuficiente. Conclusión: es necesario abordar el tema en el período de graduación y educación continua, inversión en la capacitación de profesionales y expansión de la prevención de enfermedades y promoción de la salud.

Palavras claves: Neoplasias de la mama; Enfermeras; Conocimiento.

RESUMO Objetivo: ava¬liação do nível de conhecimento dos enfermeiros da atenção primária da rede pública de Divinópolis (MG) sobre o câncer de mama. Método: pesquisa quantitativa, descritiva, de delineamento transversal com profissionais de enfermagem, que atuavam há pelo menos um ano na rede municipal de saúde. Foi utilizado questionário estruturado, analisada a distribuição das variáveis de interesse e para apresentação dos mesmos, utilizou-se a estatística descritiva, média, frequência absoluta e porcentagem. Resultado: Foi identificado o conhecimento pelos entrevistados, sendo a mamografia o exame mais indicado para diagnóstico precoce, porém foi identificado duvidas na idade e periodicidade recomendada para realização do exame, e os fatores limitantes ao rastreamento mais referidos foram o desconhecimento da população e o equipamento insuficiente. Conclusão: Fazem-se necessários a abordagem do tema no período de graduação e de educação continuada, investimento na capacitação dos profissionais e ampliação da prevenção da doença e promoção da saúde.

Palavras-chaves: Neoplasias da Mama; Enfermeiros; Conhecimentos.

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Received on: 07/17/2020 **Approved on:** 07/22/2020

INTRODUCTION

reast cancer represents the second most common type of cancer in the world and the most common cancer in women.

(1) According to estimates by the National Cancer Institute (INCA), with the exception of non-melanoma skin tumors, it represents the most common site in the female population. Estimates for each 2020-2022 three-year period point out that 625.000 new cases of breast cancer are expected in Brazil, with an assumed risk of 61,61 cases per 100.000 women. (2).

Regarding prevalence, the situation in Brazil is similar to the international scenario. According to data from the global report of the GLOBO-CAN project, in recent years, breast cancer is the most diagnosed in most countries and is also the leading cause of death from cancer in more than 100 countries. (3,4)

The increase in the incidence and mortality from breast cancer in Brazil may be related to the improvement in the diagnosis and the quality of the information available, however the high mortality rates can be attributed to the late diagnosis of this neoplasm due to the population's difficulty in accessing public health services, the low training of health professionals and difficulties of municipal and state managers in structuring the flow of suspected cases at different levels of care. (5,6)

In developed countries, the strategy used to reduce mortality from breast cancer is screening, with the purpose of detecting cancer at an early stage. In addition, early diagnosis and adequate referral are essential to improve cure and survival rates. The primary and secondary prevention of this neoplasia can reduce the incidence and prevalence of diseases. (1,7)

In recent years, INCA and the Ministry of Health have expanded

the method of communication for women and health professionals, favoring the development of various educational actions in the control of breast cancer, in Primary Care (PC). Thus, the professionals who work in the PC have a fundamental role in the development of these actions, especially the nurse, due to their articulating activity between users and the health team. (8,9,10).

In relation to the actions developed by professionals for the early detection of breast cancer in AB, studies show flaws in its execution, both due to the lack of structure, as well as the lack of theoretical and technical knowledge, such as the lack of knowledge for the indication and carrying out of exams. clinical and gynecological. (10)

In this context, the evaluation of the knowledge of primary care professionals about breast cancer, especially nurses, is essential for the design of actions that include training on a continuous basis and the establishment of a referral flow in order to establish permanent surveillance.

This study aimed to assess the knowledge related to breast cancer of nursing professionals who work in primary health care in the city of Divinópolis-MG.

METHOD

This is a quantitative, descriptive, cross-sectional study carried out in the city of Divinópolis, Minas Gerais. Divinópolis is a municipality of 235.977 inhabitants (11), located in the Midwest of the state of Minas Gerais, which has a referral cancer service for a population of 1.200.000 inhabitants. ccording to data from DATASUS, (12) Divinópolis has 43 primary health care units (UAPS), distributed in health regions.

In 2018, there were 55 nurses working in the municipality's UAPS.

All professionals, of both sexes, without age restriction and who had worked in the municipal health system for at least one year, were invited to participate in the study, however only 48 (87.27%) nurses accepted, after signing the Term of Free and Informed Consent. The other nurses reported lack of time and lack of interest.

Data collection was carried out from May to October 2018, at the service hours of the health units and according to the availability of nurses. For data collection, a structured questionnaire consisting of 26 multiple-choice questions was used, composed of questions aimed at the sociodemographic characterization, training and experience time of the participants, in addition to questions regarding the nurses' knowledge about breast cancer, referring to attitudes and practices regarding the detection of this neoplasm. This guestionnaire was built based on studies carried out with a methodology similar to that adopted in this work. (6, 13)

The questionnaires were delivered using a direct approach, that is, the researcher personally delivered the document, being answered by professionals, without any interference, allowing him to express himself freely. The data were categorized and transcribed to a printed form. Then, the distribution of the variables of interest was analyzed. For their presentation, descriptive statistics, mean, absolute frequency and percentage were used. This study was carried out according to the principles that guide the conduct of research involving human beings, according to resolution 466/2012, (14) and all procedures involving the subjects were approved by the Human Research Ethics Committee of the Fundação Educacional de Divinópolis - FUNE-DI, Opinion No. 2,740,529 (CAAE: 85479318.0.0000.5115). Written in-

Tabela 1. Distribuição de enfermeiros de acordo com as variáveis sociodemográficas, ter	npo
de formação e experiência no serviço da APS do Município de Divinópolis (MG), 2018.	

Variáveis	Número de indivíduos (N = 48)	%
Faixa etária (anos)		
20 a 29 anos	01	2,1
30 a 39 anos	31	64,6
40 a 49 anos	13	27,1
50 a 59 anos	03	6,2
Sexo		
Feminino	40	83,3
Masculino	08	16,7
Estado Civil		
Solteiro	17	35,4
Casado	27	56,3
Divorciado	04	8,3
Renda Familiar (salários)		
2 a 4	14	29,1
5 a 7	24	50,0
8 a 10	09	18,8
> De 10	01	2,1
Tempo de Formação		
1 a 9 anos	09	18,8
10 a 20 anos	34	70,8
Mais de 20 anos	05	10,4
Tempo de atuação na atenção básica de saúde		
1 a 5 anos	08	16,6
6 a 10 anos	19	39,6
11 a 15 anos	09	18,8
Mais de 15 anos	12	25,0
Realizou alguma especialização?		
Sim	46	95,8
Não	02	4,2
Fonte: Pesquisa de Campo		

Tabela 2. Conhecimento sobre câncer de mama entre enfermeiros que atuam na APS do Município de Divinópolis (MG), 2018

Variáveis (Conhecimento)	Número de indivíduos (N = 48)	%
Há indicação de exame clínico de mamas (ECM) em mulheres assintomáticas		
Sim	47	97,9
Não	01	2,1

Qual o melhor período para a realização do ECM

formed consent was obtained from all participants.

The limitations for carrying out the work were, respectively, on the professionals who refused to participate in the research, due to the fear of making mistakes in the questionnaire answers, lack of time and because they did not want to be evaluated by students.

RESULTS

In the studied group, of the 48 nurses, 83,3% were female, 64,6% were under 40 years old, predominantly "married" marital status and average remuneration of 5,85 minimum monthly wages. The time of graduation among nurses ranged from 1 to 29 years. As for the length of experience in primary health care (PHC) in the city of Divinópolis, 56,2% of nurses reported having a maximum of 10 years of experience (Table 01).

Regarding the qualification of these professionals, most of the interviewees have more than 10 years of training and only two of the interviewees do not have any specialization, with 43.6% having two or more specializations, with "family health" being the most performed. As for continuing education courses on breast cancer, only about 40% said they had participated in courses with this approach less than five vears ago.

Table 2 demonstrates the knowledge about the early detection of breast cancer among nursing professionals. It was found that mammography is the most suitable test for the early detection of breast cancer, however many professionals have expressed doubts regarding age and the recommended frequency for this test. As for the limitations of breast cancer screening, the factors most mentioned among nurses were the insufficiency of qualified health professionals, the

Ovulatório	01	2,1
Período menstrual	01	2,1
3 a 5 dias após a menstruação	40	83,3
Independente	05	10,4
Não sabe	01	2,1
Qual a idade recomendada para solicitação da mamo- grafia?		
30 anos	01	2,1
40 anos	20	41,6
50 anos	27	56,3
Qual o exame mais indicado para o diagnóstico precoce do câncer de mama?		
ECM		
Mamografia	09	18,8
US mamária	35	72,9
Ressonância magnética	04	8,3
O câncer de mama tem cura?	0	0
Sim	48	100
Não	0	0
Quais os fatores limitantes ao rastreamento do câncer de mama?		
Desconhecimento da população	38	79,2
Poucos profissionais habilitados	11	22,9
Número de profissionais insuficientes	14	29,2
Equipamento insuficiente	28	58,3
Gestor público não comprometido	18	37,5
Com que frequência encontra formulário de referência e contrarreferência em sua US?		
Sempre	40	83,3
Frequentemente	0	0
Raramente	06	12,5
Nunca	01	2,1
Não respondeu	01	2,1
Fonte: Pesquisa de Campo		

Tabela 3. Distribuição dos enfermeiros que atuam na APS, segundo a aprendizagem e ducação pormanonto no âmbito do câncor do mama do Município do Divinóno

educação permanente no arnisto do career de maria do Mariapio de Divinopona (Maj, 2010		
Variáveis (Atitudes)	Número de indivíduos (N = 48)	%
Você gostaria de receber educação permanente?		
Sim	48	100
Não	0	0

SMS estimula os profissionais da APS a participarem de programa de educação permanente?

lack of equipment and the population's lack of knowledge.

In relation to the nurses' attitudes in detecting breast cancer, a motivation was identified in the search for permanent health education, in which all interviewees reported an interest in receiving training. However, 25% of professionals reported that they do not feel encouraged by the Municipal Health Secretariat (Secretaria Municipal de Saúde - SMS) (Table 3). When asked about the knowledge obtained in their undergraduate courses for breast cancer screening, 87.5% responded that there was such an approach in undergraduate courses. In relation to continuing education activities on this neoplasm, it was found that 16.7% did not receive training in the diagnosis of breast cancer by the SMS and 43.8% received it for more than five years, which does not meet the recommendations of SUS regarding the qualification of human resources.

Regarding the practices of nurses in assessing breast cancer screening, 77.1% stated that requesting a mammogram for women over 35 years of age at high risk is the ideal approach. As for women who complain about a breast lump, 77.1% reported performing CBE. During the consultation, about 79% of professional nurses advise on breast cancer, clarifying doubts, passing on pertinent information and emphasizing the importance of family research (Table 4).

DISCUSSION

The basic health units are considered the "gateway" of the Unified Health System for the population and should bring together professionals with the capacity to develop educational and preventive actions, including in relation to breast cancer, providing the identification and referral of cases suspects for the reference

Sim	36	75,0
Não	12	25,0
Você se sente preparado para a realização Exame Clínico da Mama (ECM) na unidade de saúde (US)?		
Sim	46	95,8
Não	2	4,2
Existe motivação na sua US na busca constante da qualidade no atendimento?		
Sim	41	85,4
Não	06	12,5
Não sabe	01	2,1
Participou de cursos de educação continuada sobre câncer de mama?		
Ano anterior	06	12,5
Entre dois a cinco anos	13	27,0
Há mais de cinco anos	21	43,8
Nunca	03	6,3
Não lembra	05	10,4

Fonte: Pesquisa de Campo

Tabela 4. Práticas e condutas, com relação à detecção do câncer de mama, de enfermeiros que atuam na APS do Município de Divinópolis (MG), 2018			
Variáveis (Conduta)	Número de indivíduos (N = 48)	%	
Qual a sua conduta com uma mulher de 35 anos com alto risco para o câncer de mama?*			
Retornar com 6 meses	02	4,2	
Solicitar US mamária bilateral	06	12,5	
Encaminhar ao mastologista	09	18,8	
Realizar ECM	26	54,2	
Solicitar mamografia (MMG)	37	77,1	
Qual a sua conduta frente a uma mulher de 30 anos com queixas de nódulo mamário?**			
Retornar com 6 meses	0	0	
Solicitar US mamária	11	22,9	
Encaminhar ao mastologista	19	39,6	
Realizar o ECM	37	77,1	
Qual a sua orientação sobre o câncer de mama?***			
Fornecer informações sobre CA mama e investigação familiar	38	79,2	
Ensinar o AEM a partir dos 20 anos	32	66,7	
Importância das consultas periódicas	33	68,8	
Orientar a importância de exames complementares Fonte: Pesquisa de Campo	23	47,9	

service implemented in the municipality.(13, 15)

One of the propositions of the primary care model is the integral approach of the individual. Thus, it is essential that all professionals who work in the basic health units articulate and know the problems that affect the population. And nurses are one of the main elements of this strategy, because they are in direct contact with the user. In addition, nursing professionals have the role of health educator and must be qualified to develop prevention and early detection of breast cancer, with a fundamental knowledge of the subject (8, 13, 15).

In a study carried out in the city of Ribeirão Preto (SP) it was evidenced that the level of knowledge of the nursing professional in relation to breast cancer was related to the association of professional experience and the realization of courses after graduation in nursing, which shows the importance of professional training and constant updating on this neoplasm. (13)

Considering this statement, according to data previously presented about this research, it can be seen that there is experience of professionals regarding its performance, but when it comes to specific performance in ABS, more than half of the interviewees have less than 10 years in this type of care. Most graduate courses are held, however, continuing education, which is the way to keep up to date on the pathology, is not carried out effectively.

It is noteworthy that for the early detection of breast cancer in Brazil, women at standard risk should undergo clinical breast exams annually from the age of 40 and biennial mammography between 50 and 69 years. Women from population groups considered to be at high risk for this neoplasm should undergo a clinical breast exam and mammography from the

age of 35, annually. In recent years, INCA (National Cancer Institute) and the Ministry of Health have expanded the method of communication for women and health professionals. Thus, nurses must know the main risk factors for breast cancer and the main signs and symptoms, which, when identifying such signs, should immediately refer these women to a referral health service for clarification and diagnosis. (1,6)

Mammography was the most suitable test for early diagnosis, with the recommended age for requesting it being 50 years (56.3%), but many professionals expressed doubts about their age, so that many marked 40 years (41.6 %), so the value was very approximate. And the periodicity indicated for this exam was biennial (64.6%), but with an expressive number of the annual exam (33.3%). Another study carried out in São Paulo indicated that 72.9% of respondents reported that the period of MMG is annual and 61.7% that the age is 40 years. (16)

Regarding early diagnosis, risk factors and conditions for breast cancer, most professionals demonstrated knowledge. Regarding the performance of the CBE, the indication for asymptomatic women was 97.9% of the interviewees and the period indicated for the performance was three to five days after menstruation. In the study carried out in the city of Espírito Santo (RN), the interviewees also affirmed indication of CBE for asymptomatic women (87%) and the same period for carrying out the same. (17)

Regarding the factors limiting breast cancer screening, more than 60% of the interviewees selected two or more factors, the most recurrent being the lack of knowledge of the population (79.2%), insufficient equipment (58.3%) and public manager not compromised (37.5%). Based on the first factor, a lack of training



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can be observed with regard to the development of preventive and educational actions in relation to breast cancer, since health education is the responsibility of nurses. In another study carried out in Mossoró (RN) it was also identified that the majority of the interviewees marked two or more alternatives in this question. The population's lack of knowledge (53.1%) and insufficient equipment (23.4%) were identified as the most recurrent limiting factor. (5)

As for the practice and conduct of the nursing professional towards a 35-year-old woman at high risk for breast cancer, half (50%) say they perform two or more actions, the most used being the request for a mammogram (77.1%) and the performance of CBE (54.2%), most often associated. As for the conduct towards a 30-year-old woman with a complaint of breast lump, 35.4% say they perform two or more conducts, the most frequent being the CBE (77.1%).

According to the interviewees when providing guidance to the population about breast cancer, 70.8% use two or more types of approach. Of these, the most frequently performed, respectively, are informing about breast cancer and family research, talking about the importance of periodic consultations, teaching breast self-examination and advising on complementary exams. But only 39.6% said they did all four types that were contained in the questionnaire, which would be ideal for a complete approach to guidance, aiming at disease prevention and health promotion.

Thus, a preventive approach to these factors in basic health units (UBS) and in Family Health Strategies (FHS) is essential. It is noteworthy that nurses who work in primary care have greater capacity for intervention in terms of knowledge, attitudes and behaviors in the health



of the population, their educational function should bring social media and the culture interrelated in them closer. In addition, these professionals can play an essential role in the process of preventing this pathology, through health guidelines directed at the population. (13,15,18)

CONCLUSION

It was evidenced that most questions of clinical diagnosis, risk factors and conditions for breast cancer were answered correctly by nursing professionals, however a gap was identified in the knowledge of these professionals, in relation to the frequency and recommended age for mammography. Continuing education is not carried out effectively, since more than half of the interviewees received training more than five ye-



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ars ago or did not receive it, not complying with SUS recommendations regarding the qualification of human resources. It was detected a deficiency in health promotion about breast cancer, regarding breast cancer screening and an insufficiency in health education, regarding breast cancer guidelines. These findings reinforce the need to address the theme in the period of academic training and investment in continuing education, in the qualification of qualified professionals and equipment, and also essential, the promotion and health education for the population, motivating self-care. 👻

ACKNOWLEDGMENT

The authors would like to thank Fapemig for their support.



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