INTRODUCTION

When cells divide abnormally and uncontrollably they form a mass or lump of tissue. This lump is called a tumor. The neoplastic growth of tissue in bone is bone tumor. As the tumor grows, abnormal tissue displaces the healthy tissue. Tumors can be benign or malignant. Benign bone tumors won’t spread to other parts of the body and are unlikely to be fatal and cancerous. But they can grow and compress your healthy bone tissue. Other tumors are malignant, meaning they’re cancerous. (1) Malignant bone tumors can cause cancer to spread throughout the body. Benign bone tumors include:

- Osteochondromas
- Nonossifying fibroma unicameral
- Giant cell tumors
- Enchondroma
- Fibrous dysplasia
- Aneurysmal bone cyst

Types of Malignant bone tumors are:

- Osteosarcoma
- Ewing sarcoma Family of tumors (ESFTs)
- Chondrosarcoma(2)

Classification

Bone tumors may be classified as “primary tumors”, which originate in bone or from bone-derived cells and tissues, and "secondary tumors" which originate in other sites and spread (metastasise) to the skeleton. Carcinomas of the prostate, breasts, lungs, thyroid, and kidneys are the carcinomas that most commonly metastasise to bone. Secondary malignant bone tumors are estimated to be 50 to 100 times as common as primary bone cancers. (3)

Primary tumors

Primary tumors of bone can be divided into benign tumors and cancers. Common benign bone tumors may be neoplastic, developmental, traumatic, infectious, or inflammatory in etiology. Some benign tumors are not true neoplasms, but rather, represent hamartomas, namely the osteochondroma. The most common locations for many primary tumors, both benign and malignant include the distal femur and proximal tibia (around the knee joint). Primary tumors also include benign bone tumors.

Secondary tumors

As benign bone tumors do not metastasize, all secondary bone tumors are metastaticlesions which have spread from other organs, most commonly carcinomas of the breast, lung, and prostate. Reliable and valid statistics on the incidence, prevalence, and mortality of malignant bone tumors are difficult to come by, particularly in the oldest (those over 75 years of age), because carcinomavasthat are widely metastatic to bone are rarely ever curable, biopsies to determine the origin of the tumor in cases like this are rarely done. (3, 4) This article deals with the knowledge and awareness of middle aged population on bone tumors.
MATERIALS AND METHODS
A cross-sectional questionnaire survey was carried out to assess the knowledge on bone tumors in middle aged population. A specially designed questionnaire consisting of 13 close-ended questions was said to assess the awareness on bone tumor among the middle aged population. The questionnaire was printed and distributed to the participants. The identity of the participants was maintained anonymous. The total responses were 100 in number.

RESULTS
63% of the population have stated that they have knowledge about bone tumor. Many people are confused with the terms bone tumor and bone cancer. About 87% of the people have replied that both bone tumor and bone cancer are same. Most of the people are unaware of the causes of bone tumor (80%)

Bone tumors, one of the least common neoplasms, account for less than 0.2 percent of all cancers. The clinical, radiographic, and pathological understanding and classification of these rare tumors has slowly developed over the past several decades. But the awareness among the middle aged population is far less than expected.(9) Till now there is no established national screening program for bone tumor in the country. In the present study we found that only 63% of the respondents were aware of breast cancer as a disease. Those who were aware were of higher socio-economic strata or the more educated.(10)

CONCLUSION
This study has shown that the participants have poor knowledge about bone tumor be it about causes, symptoms, diagnosis and treatment. Therefore it is important to create awareness and educate the community and to remove the misconceptions associated with ignorance through community based educational/awareness campaign. Early warning signs, significance of a painless lump need to be emphasised. Educating health care workers is also very important aspect. We also have to keep in mind only campaigns will not be enough, information need to be disseminated in a form which is appealing to the community.

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