



Minerva Access is the Institutional Repository of The University of Melbourne

Author/s:

Teh, J;Op't Hoog, S;Nzenza, T;Duncan, C;Wang, J;Radojcic, M;Feng, C;Lawrentschuk, N

Title:

Penile cancer information on the internet: a needle in a haystack

Date:

2018-11-01

Citation:

Teh, J., Op't Hoog, S., Nzenza, T., Duncan, C., Wang, J., Radojcic, M., Feng, C. & Lawrentschuk, N. (2018). Penile cancer information on the internet: a needle in a haystack. *BJU International*, 122 (S5), pp.22-26. <https://doi.org/10.1111/bju.14532>.

Persistent Link:

<https://hdl.handle.net/11343/284741>

Penile cancer information on the internet: a needle in a haystack

Teh J^{1,2,3}, Op't Hoog S^{1,2}, Nzenza T^{1,2,3}, Duncan C^{1,2,5}, Wang J^{1,4}, Radojicic M¹, Feng C¹, Lawrentschuk N^{1,3,4}

1. University of Melbourne, Department of Surgery, Austin Hospital, Melbourne Victoria AUSTRALIA
2. Young Urology Researchers Organisation (YURO), AUSTRALIA
3. Department of Surgical Oncology, Peter MacCallum Centre, Melbourne, Victoria, AUSTRALIA
4. Olivia Newton-John Cancer Research Institute, Austin Hospital, Melbourne, Victoria, AUSTRALIA
5. North East Urology, Melbourne, Victoria AUSTRALIA

Corresponding author: Jiasian Teh

ORCID: 0000-0002-7882-5155

Austin Health

Department of Urology

Level 8, Harold Stokes Building

145 Studley Road, Heidelberg VIC 3084

Email: Jiasian@gmail.com

Author's Contribution

J Teh: project development, data collection, data analysis, manuscript writing/editing

S Op't Hoog: data analysis, manuscript writing/editing

T Nzenza: project development, manuscript writing/editing

C Duncan: project development

J Wang: data collection

This is the author manuscript accepted for publication and has undergone full peer review but has not been through the copyediting, typesetting, pagination and proofreading process, which may lead to differences between this version and the [Version of Record](#). Please cite this article as [doi: 10.1111/bju.14532](https://doi.org/10.1111/bju.14532)

This article is protected by copyright. All rights reserved

M Radojic: data collection

C Feng: data collection,

N Lawrentschuk: project development, manuscript editing

Keywords

Penile cancer; internet; health information seeking; urogenital malignancy

Disclosure

Authors have no potential conflicts of interest to disclose

Funding

This research did not receive any funding

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32

DR. JIASIAN TEH (Orcid ID : 0000-0002-7882-5155)

DR. TATENDA NZENZA (Orcid ID : 0000-0002-1157-7003)

DR. NATHAN LAWRENTSCHUK (Orcid ID : 0000-0001-8553-5618)

Article type : Supplement Article

Article Category: USANZ

Introduction

Primary cancer of the penis is an uncommon disease, with an overall incidence of around 1/100,000 males in industrialised countries(1). In contrast, in the developing world, such as South America, South East Asia and parts of Africa, the incidence is significantly higher and can account for 1-2% of malignant disease in men. The highest incidence rate of penile cancer in the world is reported in Brazil.(2)

Penile cancer is often associated with a delayed diagnosis, with the most common reason for patients' delayed presentation identified as the feeling of embarrassment over symptoms localised in a sexual body area. Psychological factors such as denial may also be involved, as well as insufficient awareness or knowledge about the disease(3). Subsequently, patients often present with locally advanced tumours and a high risk of invasive disease. Given the potentially significant embarrassment associated with the diagnosis of penile cancer, men may utilise the information available on the internet prior to seeking medical attention.(4) Thus, high quality, readily accessible and accurate information on penile cancer is an important part of encouraging men to engage with medical services.

Over 80% of patients and health care professionals use the internet to seek medical information, seeing it as a reliable, accessible and trustworthy source.(5) After patients are diagnosed with serious medical conditions, it is accepted that they will explore the internet for answers(4, 6). Although the internet is a powerful tool, much of the information fails to meet a generally accepted standard for medical information

33 – namely the World Health Organisation Health on the Net (HON) standards(7),
34 which are a reasonable measure of the commitment of medical websites to provide
35 quality information regarding cancer, among other diseases, and its treatment.

36 We aim to assess the quality of information about penile cancer on the internet and
37 to compare the quality of internet information from developed countries such as
38 Australia, France, Germany and Spain with Brazil, a country with significantly higher
39 rates of penile cancer.

40

41 **Methods**

42 We searched English, French, Spanish, German and Portuguese internet websites
43 in February 2018 using previously published methods(8). Briefly, using the Google
44 search engine(9) in February 2018 we performed internet searches and assessed
45 600 websites using ‘penile cancer’ in English, and equivalent terms in French
46 (‘cancer du pénis), Spanish (‘cáncer de pene’), German (peniskrebs’), and
47 Portuguese (‘câncer peniano’). The first 150 websites yielded by each search were
48 identified and sequentially screened for quality as defined by the Health on the Net
49 (HON) Foundation using the HONcode toolbar function. The HON toolbar connects
50 in real-time to the HON server to verify the certification status of health/medical
51 websites. Websites that have HON certification have been assessed by an
52 independent regulator to contain reliable and credible information relating to
53 health.(7) The HON function has been validated in several studies, and is deemed
54 to be a high calibre tool(10).

55

56 On the basis of the observation that patients rarely access more than the first page
57 of search results, the first 150 websites yielded by each search were screened.(5)
58 An analysis of the first 150 websites in English, French, Spanish, German and
59 Portuguese was undertaken to determine the Web site sponsors and each was
60 characterised according to a previous study of quality of Web sites on the internet(8,
61 11). The sites were deemed to be sponsored by (1) lawyers, (2) non-profit
62 organisations, (3) government organisations and/or educational institutions, (4)
63 commercial, (5) urologist and their professional organisations, (6) other health

64 professionals or (7) other. Sponsorship was determined independently by two
65 examiners.

66 A secondary analysis of the first 150 websites for all 4 languages, the websites were
67 divided into three groups of first 50, middle 50 and last 50 websites. The number of
68 accredited sites in each language was then analysed and compared using a Chi-
69 squared test or Fisher exact test when the cell counts were <5. All statistical tests
70 were performed using SAS University Edition (SAS Institute, Inc, Carry, NC) and
71 statistical significance was defined as $p < 0.05$. This was to determine where
72 accredited websites were appearing preferentially.

73 **Results**

74 Based on the assumption that the first 50 websites were most likely to be viewed,
75 followed by the second 50 websites and third 50 websites, the 150 websites
76 analysed were divided into 3 groups of 50. Overall, there was a significantly higher
77 percentage of HON accredited sites appearing in the first 50 websites than the
78 middle or last 50 websites (table 1). 20.80% of the first 50 websites were HON
79 accredited and the percentage of HON accredited websites decreased in the middle
80 and last 50 websites ($p = < 0.001$). When the websites were separated into language
81 groups this trend was again observed (figure 1). This trend was statistically
82 significant in all languages ($p = < 0.05$) with the exception of Spanish where there were
83 more HON accredited websites in the last 50 websites compared to the middle 50
84 (table 1).

85 Of the 750 websites analysed, 10.4% were HON accredited. French language
86 websites had the most HON accredited websites, followed by English, Portuguese,
87 Spanish and German (table 1). There were significantly more HON accredited
88 websites in English and French compared with Portuguese ($p = 0.009$ and $p = 0.0007$)
89 (table 2).

90 Overall, 44.7% of all websites were commercially sponsored. 27.1% were
91 sponsored by Government or Educational organisations and 11.6% were sponsored
92 by not-for-profit organisations (figure 2). 0.04% of all websites were sponsored by a
93 health organisation. The proportion of websites sponsored by other groups was 7.2%
94 overall but within each language group there was large variation in the breakdown of

95 groups. Both English and Portuguese had only 0.67% of websites sponsored by
96 other groups while both Spanish and German had 16%. English language websites
97 were more likely to be sponsored by a Government or Educational organisation, with
98 45.3% being sponsored by one of these groups while 36% were sponsored by a
99 commercial group.

100

101 **Discussion**

102 Web based resources are especially important when obtaining information from
103 health professionals is challenging, such as when symptoms are embarrassing or
104 stigmatised(12). This suggests that there is potential for the internet to be particularly
105 important in men with penile cancer, a disease in which a considerable proportion of
106 patients have a delay of more than 6 months prior to seeking medical treatment.(3)
107 Despite increased openness about male health problems such as prostate cancer,
108 there is still a great need for public discussion about penile disease. In a prospective
109 study of men with newly diagnosed penile cancer, most of the men remarked that
110 they had never heard of penile carcinoma before being diagnosed with the disease
111 themselves, and the symptoms they experienced were an impediment to seeking
112 help.(3) In addition, the low incidence of penile cancer in developed countries may
113 also contribute to prolonged time before diagnosis as clinicians were less familiar
114 with the disease. Men with penile cancer represent a vulnerable group that may turn
115 to the internet for information. As patients use information on the internet from
116 throughout all stages of the disease, from symptom onset to long-term disease
117 management, online tools can provide patients with a sense of empowerment but
118 they should also specifically contribute to each stage of the healthcare process(13).
119 Internet use can be primarily patient-driven or guided by medical teams. Clinicians
120 involved in the care of these patients should participate in the development of
121 informative and reliable health websites and direct patients to them. The greatest
122 barrier on the internet is not the difficulty of finding healthcare information, but rather
123 the difficulty of finding valid and reliable information(14).

124 It must also be taken into account that a website can be influenced by commercial
125 interests, with 44.7% of overall websites across all languages found to have a
126 commercial sponsor. Websites may be a conduit for advertising, with health

127 information increasingly being controlled by marketing and commercial interests,
128 taking advantage of a significant proportion of the population searching for health
129 information [28]. This can induce selective disclosure of evidence and the presence
130 of biased information. In order to assist users to differentiate between websites, a
131 broad range of organisations have developed methods and instruments for quality
132 evaluation and classification. The HONcode is a simple means by which a clinician
133 or patient can objectively correlate a website with high quality information. Compared
134 with other instruments for evaluating website quality, it appears to be a
135 straightforward, valuable tool, and fulfils its goal of identifying reliable health websites
136 [29]. However, HONcode is not the only way to rate quality and several other tools
137 such as the DISCERN instrument [30] and LIDA tool [31] are freely available online,
138 also designed to help users evaluate the quality of health information on the internet.

139 Using the HON seal as an indicator of information quality, we found that only 10.4%
140 of all sites analysed relating to penile cancer are HON-accredited. HON-accredited
141 websites were overall more likely to appear in the first tertile than in the second or
142 third tertiles. This tertile discrepancy was expected since the Google algorithm
143 generally places the most relevant websites first. The low number of HON-accredited
144 websites relating to penile cancer is concerning, as it suggests that patients will
145 encounter unreliable information about penile cancer. Evidently, this makes website
146 assessment difficult for patients and clinicians alike, potentially leading to distrust of
147 penile cancer resources found on the internet.

148 Convenience, anonymity and the volume of information that can be found on the
149 internet make it an attractive option for patients with genital malignancies, and may
150 be especially useful in developing countries, where access to healthcare may be
151 limited by socioeconomic factors. We found that Portuguese and Spanish language
152 websites had significantly less HON-accreditation than English language websites
153 despite the unequal distribution of penile cancer between the developed and
154 developing world. This highlights the importance of education and public health
155 measures to address the various aetiological factors which are proposed to play a
156 role in penile cancer. These generally relate to inflammatory processes that occur in
157 the penis and include human papilloma virus infection, phimosis, lichen sclerosis and
158 poor penile hygiene.(15) Limited available web resources in Spanish and Portuguese

159 contribute to disparities in information access and disease outcomes.(16) A study of
160 both English and Spanish-speaking internet users found that penile cancer was the
161 5th most commonly searched cancer in Spanish, whereas it was not in the top 10
162 cancers searched in English.(16) By recognising the differences in both search
163 patterns and web resources available, content of web-based oncology resources can
164 be developed to best target the needs of populations at higher risk of penile cancer.

165 Patients with cancer believe their needs to obtain information about their disease
166 from their healthcare providers are often unmet.(17)Clinicians directing patients to
167 reliable information has many benefits such as improving patient-doctor
168 relationships, reinforcing consultation discussions, assisting informed decision-
169 making, providing education before and after events, and helping patients seek
170 appropriate consultation for sensitive topics. (18) Online health information can
171 impact on both the decision to seek help and on communication with health
172 professionals. Health websites must ensure they provide useful information to
173 support patients in their decisions and health care interactions.(18)

174 **Limitations**

175 The HONcode is a predictive indicator for high quality websites, which has limitations.
176 As of 2015, HONcode certification is provided as a paid service which may distort
177 the validity of website information with HONcode criteria. Thus, a proportion of
178 websites with objectively high-quality information may not fulfil HONcode criteria. In
179 addition, the HONcode is a measure of quality of the website and not necessarily the
180 medical accuracy of the content in relation to penile cancer, thus may lack relevant
181 information about the disease on the website.

182 An inherent limitation of this study involves the search terms used. It cannot be
183 guaranteed that patients would use these terms in their own research of penile
184 cancer. However, given that the search terms used in this study are the most formal
185 and objective, informal search terms would likely defer to pages with the formal
186 terms by the Google search algorithm. One solution to this limitation is to encourage
187 clinicians to use the formal medical terms for their patients, thereby empowering
188 patients more accurately research their disease.

189 **Conclusion**

190 Health care workers must appreciate the lack of validation of most penile cancer
191 websites, with discrepancies apparent in both quality and number of websites
192 between languages. Clinicians must be proactive in identifying and directing patients
193 to trustworthy and accurate information. HONcode is an uncomplicated search tool
194 and can serve as the vanguard to detect appropriate and trustworthy websites.(7)
195 The total percentage of HON-accredited websites was low across all languages and
196 search terms. There were significant language differences in HON-accredited
197 websites, with English and French websites having significantly more HON-
198 accredited websites compared with Spanish and Portuguese despite these
199 languages being native to countries with significantly higher rates of penile
200 cancer.(19)

201 Internet use for symptom appraisal has the potential to influence the timing of health
202 seeking for symptoms, and the communication between patients and health care
203 professionals during consultations.(5) This is essential in penile cancer, a disease
204 with typically delayed presentation, and has the potential to significantly impact on
205 patient morbidity and mortality.

206 **References**

- 207
- 208 1. Backes DM, Kurman RJ, Pimenta JM, Smith JS. Systematic review of human
209 papillomavirus prevalence in invasive penile cancer. *Cancer Causes Control*. 2009;20(4):449-
210 57.
 - 211 2. Favorito LA, Nardi AC, Ronalsa M, Zequi SC, Sampaio FJ, Glina S. Epidemiologic study
212 on penile cancer in Brazil. *Int Braz J Urol*. 2008;34(5):587-91; discussion 91-3.
 - 213 3. Skeppner E, Andersson SO, Johansson JE, Windahl T. Initial symptoms and delay in
214 patients with penile carcinoma. *Scand J Urol Nephrol*. 2012;46(5):319-25.
 - 215 4. Couper MP, Singer E, Levin CA, Fowler FJ, Jr., Fagerlin A, Zikmund-Fisher BJ. Use of
216 the Internet and ratings of information sources for medical decisions: results from the
217 DECISIONS survey. *Med Decis Making*. 2010;30(5 Suppl):106S-14S.

- 218 5. Eysenbach G, et al. How Do Consumers Search For And Appraise Health
219 Information On The World Wide Web? Qualitative Study Using Focus Groups, Usability
220 Tests, And In-Depth Interviews. *BMJ: British Medical Journal*. 2002;324(7337):573-7.
- 221 6. Risk A, Dzenowagis J. Review of internet health information quality initiatives. *J Med
222 Internet Res*. 2001;3(4):E28.
- 223 7. HONcode: Principles - Quality and trustworthy health information. 2018.
- 224 8. Lawrentschuk N, Abouassaly R, Hackett N, Groll R, Fleshner NE. Health information
225 quality on the internet in urological oncology: a multilingual longitudinal evaluation.
226 *Urology*. 2009;74(5):1058-63.
- 227 9. Google 2018 [Available from:
228 https://www.google.com.au/?gfe_rd=cr&dcr=0&ei=mU2fWtsqkevzB73PI4AO.
- 229 10. Gaudinat A, Grabar N, Boyer C. Machine learning approach for automatic quality
230 criteria detection of health web pages. *Stud Health Technol Inform*. 2007;129(Pt 1):705-9.
- 231 11. Kaimal AJ, Cheng YW, Bryant AS, Norton ME, Shaffer BL, Caughey AB. Google
232 obstetrics: who is educating our patients? *Am J Obstet Gynecol*. 2008;198(6):682 e1-5.
- 233 12. Rice RE. Influences, usage, and outcomes of Internet health information searching:
234 Multivariate results from the Pew surveys. *International Journal of Medical Informatics*.
235 2006;75(1):8-28.
- 236 13. Somera LP, Lee HR, Badowski G, Cassel K. Health Information Seeking, Source Trust,
237 and Culture: A Comparative Analysis of Health Information Trends and Needs Between
238 Guam and the United States. *J Health Commun*. 2016;21(4):469-78.
- 239 14. Eysenbach G, Powell J, Kuss O, Sa ER. Empirical studies assessing the quality of health
240 information for consumers on the world wide web: a systematic review. *JAMA*.
241 2002;287(20):2691-700.
- 242 15. Alemany L, Cubilla A, Halc G, Kasamatsu E, Quiros B, Masferrer E, et al. Role of
243 Human Papillomavirus in Penile Carcinomas Worldwide. *Eur Urol*. 2016;69(5):953-61.
- 244 16. Simone CB, 2nd, Hampshire MK, Vachani C, Metz JM. The utilization of oncology
245 web-based resources in Spanish-speaking Internet users. *Am J Clin Oncol*. 2012;35(6):520-6.
- 246 17. Skalla KA, Bakitas M, Furstenberg CT, Ahles T, Henderson JV. Patients' need for
247 information about cancer therapy. *Oncol Nurs Forum*. 2004;31(2):313-9.
- 248 18. Mueller J, Jay C, Harper S, Davies A, Vega J, Todd C. Web Use for Symptom Appraisal
249 of Physical Health Conditions: A Systematic Review. *J Med Internet Res*. 2017;19(6):e202.

250 19. Montes Cardona CE, García-Perdomo HA. Incidence of penile cancer worldwide:
251 systematic review and meta-analysis. *Revista Panamericana de Salud Pública*. 2017:1-10.
252

Author Manuscript

Language	Percentage HON accredited			P value	Overall HON accreditation
	First 50 sites	Middle 50 sites	Last 50 sites		
English	34	8	6	<0.0001	16
French	42	18	10	<0.0001	23
Spanish	6	0	2	0.0484	2.7
German	10	0	0	0.0036	3.3
Portuguese	12	6	2	0.0123	6.7
All languages	21	6	4	<0.0001	

Table 1. Percentage of HON accredited websites

Other languages compared to Portuguese (first 50 sites)		
	% Accredited (PoHONA)	P value
English	34	0.009
French	42	0.0007
Spanish	6	0.1637
German	10	0.2377
All	23	0.0865

Table 2. Percentage of HON accredited English, French, Spanish and German websites compared to Portuguese

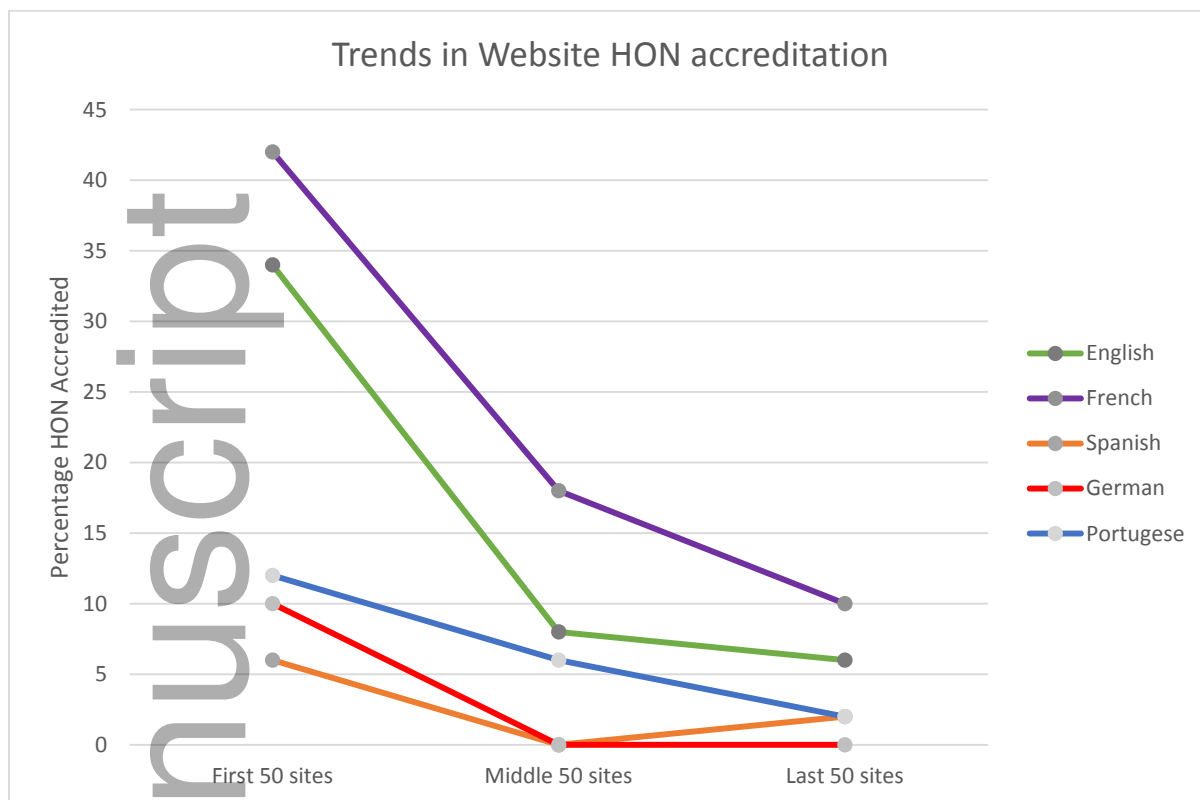


Figure 1. Trends in website HON accreditation versus tertile.

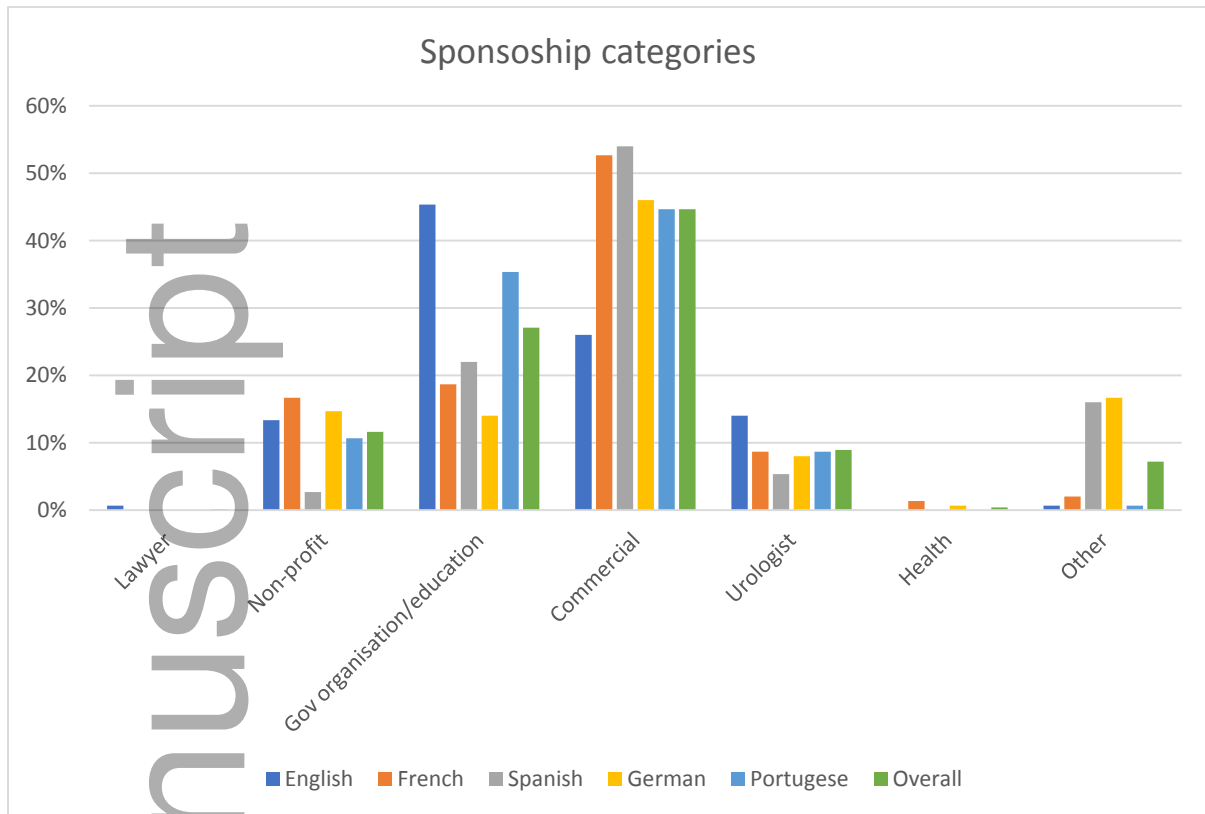


Figure 2. Sponsorship categories of website