ORGANIZATION OF PREVENTIVE MEDICAL CARE FOR THE PATIENTS WITH THE DISEASES OF THE CIRCULATORY SYSTEM

(according to sociological survey)

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Abstract

Today, when the value of health itself as a category is growing, and at the same time rapidly increase society's costs for social protection, preservation, strengthening, maintenance and restoration of health, the importance of prevention as a universal, affordable and effective way will increase many times. The objective: according to the data of sociological survey to study the state and organization of preventive medical care for the patients with circulatory system diseases. Materials and methods. In 2020 on the basis of specially developed questionnaire sociological survey of 829 patients with the diseases of circulatory system was made. All the patients referred to out-patients clinics of Kiev region. The results obtained were statistically processed. Results. Sociological survey results highlighted a number of organizational problems in preventive medical care, low level of dispensary observation, preventive activity and awareness and knowledge of the patients in prophylaxis of circulatory system diseases, prevalence of harmful habits and set out priorities, forms and problems for hygienic information of the patients under examination. Conclusions. The survey made allowed establish that preventive medical care for the patients with circulatory system diseases should be improved.

Key words: sociological survey; preventive medical care; circulatory system
Introduction. The urgency of the problem of preventive medicine is that among the principles that underlie the organization of the health care system, the main one is the socio-preventive orientation, the implementation of which allows to preserve the general population health [1]. The level of health of a nation determines its prospects in various spheres of life and future development, which necessitates constant care for public health as a necessary condition for a successful future [1, 2]. Today, health systems around the world give priority to prevention, and develop and implement healthy lifestyle (HL) programs. It is the preventive focus that can ensure success in the fight against disease [3]. At the National Conference on Noncommunicable Diseases held in May 2019 in Kyiv, the following call was made: “We should take steps to ensure that doctors and nurses are armed with all the knowledge and skills needed to diagnose and treat cardiovascular and other non-communicable diseases. In addition, they should be able to provide people with evidence-based information on key risk factors such as smoking, alcohol consumption, unhealthy diet and lack of physical activity, motivating them to choose a healthy lifestyle ”[4].

Medical prevention includes timely visits to the doctor for therapeutic and prophylactic purposes, compliance with the recommendations of medical staff, elimination of bad habits, increasing the level of sanitary literacy of the population [5].

According to Reshetnikov AV (2014), with the help of a sociological survey we can "carry out a sociological understanding of the health care system as the most important area of society and its social institutions, the role and place of medicine, health care, doctor and patient" [6]. The purpose of the work is to study the state and problems of the organization of preventive medical care for patients with diseases of the circulatory system based on the materials of a sociological survey.

Materials and methods. In 2020, according to a specially developed questionnaire, a sociological survey of 829 patients who applied to outpatient clinics (OPC) of Kyiv region for diseases of the circulatory system (DCS). 53.9% of women and 46.1% of men took part in the sociological survey. The age of the interviewed patients ranged from 18 to 85 years and averaged 55.1 years old. Questionnaires were filled out by respondents anonymously after the doctor's appointment. The rate of return of questionnaires was 97.0%. Statistical processing of sociological survey results involved the use of statistical grouping, tabulation, analysis of absolute and relative distribution series, assessment of statistical reliability of sociological survey results and performed using a computer program Microsoft Excel.
Results and Discussion

In order to study the quality of the organization of preventive care for DCS patients, a sociological study was conducted. It included a representative sample of 829 patients with DCS, who in 2020 applied to the OPC of Kyiv region. The questionnaire contained a block of questions related to the problem of prevention. The materials of the sociological survey reflected the objective state of the organization of preventive care for cardiac profile patients dwelling in the region.

Analysis of the DCS patients frequency of receiving preventive recommendations at the doctor's appointment showed that in 38.5 ± 1.7% of cases preventive recommendations were given by the doctor at each appointment, 24.2 ± 1.5% of them were given sometimes, in 15.1% ± 1.9% of recommendations were given only at the patient’s request and 22.2 ± 2.2% of the patients were not given any recommendations at all.

To the question: "How do you feel about the recommendations of a medical – recreational nature received at a doctor's appointment?" the majority of respondents (63.1 ± 1.7%) reported in a positive, 29.7 ± 1.6% - indifferent and 7.2 ± 0.9% attituded in a negative (Fig. 1).

![Fig.1. Distribution of respondents in relation to the recommendations of medical - recreational nature, received at the doctor's office, %](image)

Positively accept the provided recommendations does not mean follow them. Thus, among the respondents who were positive about the doctor's preventive recommendations, the
following reasons were mentioned that hindered the implementation of the recommendations: employment at home (29.4%), at work (19%) and lack of funds (25.8%). Other reasons (the presence of bad habits, incomplete trust in the doctor, lack of faith in recovery) were noted occasionally (Fig. 2).

![Pie Chart](image)

**Fig. 2. Distribution of respondents with DCS by reasons that prevent them to follow the doctor's recommendations, %**

The level of their knowledge on DCS prevention was considered sufficient by 35.7 ± 1.7% of respondents, absent - 33.4 ± 1.6%, the rest 30.9 ±1.6% hesitated in answering this question.

Most patients needed medical advice on medication (65.7%) taking, DCS risk factors (61.5%), their prevention (57.4%), principles of good nutrition (40.8 ±1.7%), psychohygiene (25.7±1.5%).

The majority of the patients needed doctor's recommendations as to medications taking (65.7%), DCS risk factors (61.5%) and methods of their prevention (57.4%).

Among the desirable sources of knowledge on DCS prevention more than half of the patients mentioned mass - media (53.9 ± 1.7%), a third (32.8 ± 1.5%) of them - conversations with a doctor, much less often - popular science literature ( 10.8 ± 1.1%) and lectures for the population (2.5 ± 0.5%).

To the question: "What do you do to maintain your health and prevent disease?" 23.7 ± 1.5% of respondents answered that they do nothing. At the same time, according to the respondents answers, 19.9 ± 1.4% of the individualse exercised regularly, 22.3 ± 1.4% gave up bad habits, and 20.4 ± 1.4% had daily walks in the fresh air, followed healthy diet 12.6 ±
1.2% of respondents. Only 1.1 ± 0.4% of patients reported rest in the sanatorium (Table 1.).

Table 1 - Distribution of respondents by types of preventive activity, %

| Types of preventive activity          | P ± m, % |
|---------------------------------------|---------|
| Abandonment of bad habits             | 22.3 ± 1.4 |
| Daily walks in the fresh air          | 20.4 ± 1.4 |
| Regular physical therapy exercises    | 19.9 ± 1.4 |
| Healthy eating                        | 12.6 ± 1.2 |
| Rest in sanatorium                    | 1.1 ± 0.4 |
| Absence of any preventive activity    | 23.7 ± 1.5 |

The proportion of DCS patients with bad habits was significant. 67.5 ± 1.6% of respondents smoked, and 32.5 ± 1.6% often drank alcohol.

More than a half (53.9 ± 1.7%) of respondents indicated that they are subjects to stress: 23.5% systematically, 30.6% periodically. Among the causes of stressful situations were family problems, problems in the work - team, problems with education, health, financial difficulties, loneliness, and others.

It should be noted that only 38.5 ± 1.7% of respondents who took part in the sociological survey underwent regular preventive examinations.

30.2 ± 1.6% of respondents were subjects to regular medical check-ups for DCS.

Conclusions:

The results of the sociological survey allowed to obtain a description of the organization of preventive work with DCS patients in outpatient clinics of Kyiv region.

It was found that only 38.5 ± 1.7% of respondents underwent regular preventive examinations.

38.5 ± 11.7% of the patients under survey always got doctor’s recommendations for treatment and health care; 24.2 ± 1.5% of the patients got such recommendations sometimes, 15.1% ± 1.9% of the patients got them only at the request and 22 , 2 ± 2.2% of the persons under survey never got any.

The majority (63.1 ± 1.7%) of respondents accepted positively to the received preventive recommendations, 29.7% ± 1.6 were indifferent, and 7.2% ± 0.9 were negative.

Among the reasons that prevent the implementation of the recommendations, respondents most often mentioned employment at home (29.4%), employment at work (19.0%) and lack of funds (25.8%).

Only a third (35.7 ± 1.7%) of respondents considered their level of knowledge on DCS prevention to be sufficient.
Most patients (65.7 ± 1.6%) needed medical advice on medication taking. DCS risk factors (61.5 ± 1.7%) of them needed information on DCS risk factors and 57.4 ± 1.7% of the persons under survey should know more about DCS prevention.

According to DCS patients opinion, the priority sources of receiving medical and prophylactic information are mass media (53.9 ± 1.7%) and conversations with a doctor (32.8 ± 1.5%).

In order to maintain health, 19.9 ± 1.4% of patients engaged in physical therapy, 22.3 ± 1.4% gave up bad habits, 20.4 ± 1.4% walked daily in the fresh air, 12.6 ± 1.2% followed the principles of healthy diet.

Many patients reported the persistence of bad habits. Thus, (67.5 ± 1.6%) of them continue to smoke, and 32.5 ± 1.6% often drink alcohol. More than half (53.9 ± 1.7%) of respondents are stressed.

Only a third (30.2 ± 1.6%) of patients are registered at the dispensary for diseases of the circulatory system.

The analysis of the sociological research results showed an unsatisfactory state of preventive work with DCS patients.

**Prospects for further research.** The data obtained will be used to substantiate ways to improve the organization of treatment and prevention care for DCS patients.

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