Knowledge, Attitude and Practice Regarding Hepatitis C Prevention among People of Rural Community, Lahore

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Abstract

Introduction: Cardiovascular disease (CVD) is the disease that is related to heart, blood and vessels. In Pakistan, prevalence data for the cardiovascular disease is sparse, and literature indicates that there is 30–40% of all deaths in Pakistan due to cardiovascular diseases Aziz et al.

Methods: This was descriptive cross-sectional study. Convenient sampling was used and data was analyzed by SPSS version 21.

Results: The findings of the research were good knowledge and (67%) high responses of correct answer were smoking is risk factor of CVD. The attitudes were negative, (28%) high correct response was “do exercise for good health”. The practices were very poor regarding the risk-factors of cardiovascular diseases.

Conclusion: The knowledge of participants towards the risk factors of cardiovascular diseases was somehow better. The attitude was comparatively negative and practices were poor. No one was following regular exercises, dietary modifications, manage stress and smoking.

Keywords: Knowledge; Attitude, Practice; Cardiovascular diseases; Risk factors of cardiovascular diseases

Introduction

The Cardiovascular diseases (CVDs) are a group of disorders of the heart and blood vessels and they include coronary heart disease, cerebrovascular diseases, deep vein thrombosis and pulmonary embolism and some other disorders of heart (WHO, 2013). According to Texas Heart Institute (THI) the risk-factors for cardiovascular-diseases are groups into two major and minor contributing factors. Main risk factors are hypertension, cig smoking, high fat level, diabetes, obesity and physically inactive. The minor risk factors contain stress due to anxiety, sex-hormone intake, birth-control pills and alcohol drinking, Pagani et al. [1]. Cardiovascular diseases are the number one cause of death globally more people die annually (WHO, 2013). The WHO statistics indicate that CVD related deaths are seventeen million yearly, and this amount is gradually increasing up to twenty three million by the end of 2030 Kumar [2].

In Pakistan, cardiovascular diseases are also the leading cause of morbidity and mortality. Prevalence data for the Cardiovascular disease is less, thirty to forty percent of all deaths in Pakistan are the result of cardiovascular diseases Aziz et al. The women are not only the target of this disease but also included men. In literature the risk for cardiovascular diseases are equal both in men and women Mosca et al. Knowledge of risk factors of CVDs is crucial for every young and adult. As stated in a study, increase numbers of young adults have increased risk of developing cardiovascular diseases Gaziano et al.

In this study the major modifiable risk factors are tobacco smoking, physical inactivity, unhealthy dietary intake, high cholesterol and stress. According to study conducted in Peshawar, Pakistan showed there is less knowledge regarding risk factors of cardiovascular diseases, which are lack of physical activity, excessive sugar intake, obesity, family history and stress Zuhaid, Zahir, &Diju, [3]. A study reported that Pakistani young adult students have high prevalence of shisha smoking Habibullah et al. [4]. Another modifiable risk factor is physical inactivity. The term physical inactivity is also called “sedentarism”. It is the lack of physical activity (WHO, 2011). Eating fast food and carbonated drinks are also dangerous for health. In Pakistan, the prevalence of high cholesterol level is about twelve percent due to junk foods Sherin [5]. Stress is the minor risk factor. As stated by the Dr. Susan, stress is the strain and anxiety that occur due to physical factors those are not be in a stable range Dr. Susan.

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Research Questions

Research Question 1: What kind of knowledge rural community have regarding modifiable risk factors of cardiovascular diseases?

Research Question 2: What kind of attitude rural community possess toward modifiable risk factors of cardiovascular diseases?

Research Question 3: What are the preventive practices of rural community toward modifiable risk factors of cardiovascular diseases?

Aim of the study

The purpose of the research was to assess the knowledge, attitude and practice regarding modifiable risk factors of cardiovascular diseases among adults in Hussain Abad community, Lahore.

Significance of the Study

The significance of the research work is to give awareness about the modifiable risk factors of cardiovascular diseases. The benefit to the community is to reduce the burden of cardiovascular diseases. Lessen the morbidity and mortality rate. The results of this study could be used by other researchers for further research study. The benefit to adults is giving education and awareness of cardiovascular diseases and its risk factors. It might reduce the occurrence of disease to some extent in future.

Literature Review

According to WHO fact sheet (2017), cardiovascular-diseases are the top and foremost reason for death, annually most of the people die due to cardiovascular diseases than any other disease. Moreover, in 2015 millions of people die due to cardiovascular diseases that represents 31 % of deaths (WHO, 2017). Kazakh population indicates that the prevalence of cardiovascular disease risk is high and level of knowledge is less Kulkayeva et al. At International level, many countries have major causes of deaths due to risk factors of cardiovascular diseases. In Malaysia most of deaths are due to coronary heart diseases and heart attacks and ratio is higher in women than men Ibrahim et al.[6].

In Middle East region, such as in Kuwait due to rapid changes in economic and due to lifestyle changes like smoking, obesity and diabetes the prevalence of cardiovascular diseases are very high Awad et al.[7]. Asians have very high prevalence of cardiovascular diseases. In India, cardiovascular diseases are high due to risk factors include unhealthy diet, physical inactivity and tobacco smoking Bhagyalaxmi et al.[8]. The Attitude of respondents of rural community are bad toward cardiovascular diseases. In Contrast with study of North-East coastMalaysia (2012), where higher proportion of positive attitude were due to awareness of healthy lifestyles Muhamad et al. [9]. Tobacco smoking is the common risk factor for cardiovascular diseases. In National Academies Press Council, exposure to smoking in adults causes increase risk of heart diseases approximately 25-30% Council [10].

Another study conducted in Kuwait also represent that smoking is common risk factor of heart diseases Awad et al. [7]. A study in North Ireland related to knowledge of risk factors of cardiovascular diseases stated that in activity in lifestyle is the factor of cardiovascular diseases Al Hamarneh et al.[11]. In another study of Nepal respondents have lack of knowledge regarding physical inactivity which is the risk factors of cardiovascular diseases Vaidya et al. [12]. However, fruit and vegetables intake are very low in rural community. These are included in unhealthy diet. In Jordanian research respondents have lack of knowledge about healthy diet Mukattash et al.[13].

In addition, respondents take oily and fatty food excessively which causes the obesity and high cholesterol level. Stress is also an important risk factor for cardiovascular disease. The study conducted in Canada shows that the participants have less knowledge about stress Gill & Chow [14]. Many respondents are associated with sedentary lifestyle, lack of exercise, poor diet, stress full life these factors are challenge for them to maintain healthy living Kulkayeva al.[PRECEDE] Model as a logic model for the needs assessment of self-managing CVD and its modifiable risk factors [6].

Thanks to all the community members. I am thankful to Ibrahim et al. [6], for giving me permission to use questionnaire. I am also thankful to Sir Afsar Ali as a guide for me during this research. I am much thankful to the authority of University of Lahore for all cooperation to extend this study.
Methodology

a. **Setting**: The research was conducted at Hussain Abad community.

b. **Research Design**: The research was descriptive cross-sectional.

c. **Population**: People of Hussain Abad were the target population.

d. **Sampling**: Convenient sampling technique. The sample was 110.

**Research Instrument**: An adopted questionnaire was used for this study to gather data and to answer the research questions Ibrahim et al. [6].

**Data Gathering Procedure**: A formal letter of approval was taken before starting the research. Verbal consent took from the participants.

**Methods Used to Analyze Data**: Data was analyzed by SPSS version 21.

**Study Timeline**: The study duration was September, 2017 to December, 2017.

**Ethical Consideration**: Ethical permission was obtained from Institutional Review-Board (IRB) of University of Lahore. At the household level, purpose of this study was explained to the respondents and verbal consent was taken before conducting the research.

**Results**

**Table 1**: Demographic related to Age, Gender, Education.

| Age     | n (%)     |
|---------|-----------|
| 18-23   | 19 (17.3%)|
| 24-29   | 28 (25.5%)|
| 30-35   | 36 (32.7%)|
| 36-40   | 27 (24.5%)|

| Gender  | n (%)     |
|---------|-----------|
| Male    | 33 (30%)  |
| Female  | 77 (70%)  |

| Marital Status | n (%) |
|----------------|-------|
| Married        | 82 (74.5%)|
| Unmarried      | 23 (20.9%)|

| Education | n (%)     |
|-----------|-----------|
| Illiterate| 40 (36.4%)|
| Primary   | 34 (30.9%)|
| Middle    | 23 (20.9%)|

Socio-Demographics In demographic majority of were females 70% (77) and males 30% (33) respectively with mean and standard deviation of 1.7±0.46. The mean age of the participants was 28.5 years. 35%, 31%, 21%, 7%, and 5% of respondents were illiterate, primary, middle, secondary and some others respectively (Table 1).

**Knowledge Regarding Cardiovascular Disease Risk Factors**

The items with higher results of correct replies were “Smoking is the risk factor of cardiovascular diseases” (64%, 70) with mean and standard deviation of 1.13±0.59. It is followed by “Cardiovascular-disease is related to heart and blood-vessels” ((60.9%, 67) with mean and standard deviation of 1.28±0.56 (Table 2).

**Table 2**: Knowledge Regarding CVD Risk Factors.

| Sr. No | Statements | TRUE n (%) | FALSE n (%) | Don’t Know n (%) |
|--------|------------|------------|-------------|------------------|
| 1      | Cardiovascular disease is related to heart and blood vessels | 67(60.9) | 37(33.6) | 6 (5.5) |
| 2      | Most cardiovascular disease cases are hereditary | 48(43.6) | 49(44.5) | 13(11.8) |
| 3      | CVD is the leading cause of death | 48(43.6) | 35(31.8) | 27(24.5) |
| 4      | Cardiovascular disease is the disease of women only | 31(28.2) | 67(58.2) | 15(13.6) |
| 5      | CVD can occur to young people | 35(31.8) | 63(57.3) | 12(10.9) |
| 6      | Smoking is the risk factor of cardiovascular disease | 70(63.6) | 27(24.5) | 13(11.8) |
| 7      | Doing house work as exercise is enough for a day | 46(41.8) | 41(37.3) | 23(20.9) |
| 8      | If you have a slim body, you do not need to exercise | 45(40.9) | 47(42.7) | 18(16.4) |
| 9      | Eating fruits or vegetables is able to prevent from cardiovascular diseases | 38(34.5) | 31(28.2) | 41(37.3) |
| 10     | Irregular eating patterns has no harm on health | 45(40.9) | 46(41.8) | 19(17) |
| 11     | High density lipoprotein (HLP) is a good type of cholesterol | 40(36.4) | 32(29.1) | 38(34.5) |
| 12     | Prayer can help to reduce stress | 64(58.2) | 19(17.3) | 27(24.5) |

**Table 3**: Attitude Regarding Cardiovascular Diseases Risk Factors (n=110).

| Sr No | Statements            | SD n (%) | D n (%) | U n (%) | A n (%) | SA n (%) |
|-------|-----------------------|----------|---------|---------|---------|----------|
| 1     | Smoking is bad for health | 30 (27.3) | 23 (20.9) | 13 (11.8) | 18 (16.4) | 26 (23.6) |
| 2     | Do exercise to maintain healthy lifestyle | 3 (2.7) | 31 (28.2) | 20 (18.2) | 32 (29.1) | 24 (21.8) |
Attitude Regarding Cardiovascular-Disease Factors

The answer with positive attitude was not accurately correct. However, the answer which was nearly correct was “Do exercise to maintain healthy lifestyle” (28%, 32) with mean and standard deviation of 3.3±1.18. While, “Choose to use laptop but not prefer exercise” (16%, 18) other one is “Sometime eating super late at night is good” (11%, 13) the correct answer was Strongly Disagree. Result showed that respondents had negative attitude toward risk factors of cardiovascular diseases (Table 3).

Table 4: Practices Regarding Cardiovascular Diseases Risk Factors (n=110).

| Sr No | Statements                                      | Always n (%) | Frequently n (%) | Seldom n (%) | Never n (%) |
|-------|------------------------------------------------|--------------|------------------|--------------|-------------|
| 1     | How often do you smoke?                        | 33 (30)      | 18 (16.4)        | 7 (6.4)      | 52 (47.3)   |
| 2     | Does your daily activity involve vigorous activity? | 2 (1.8)      | 27 (24.5)        | 41 (37.3)    | 40 (36.4)   |
| 3     | Do you walk for 10 minutes daily?               | 5 (4.5%)     | 17 (15.5)        | 57 (51.8)    | 31 (28.2)   |
| 4     | Do you spend your leisure time to exercise at least 20 minutes? | 9 (8.2%)     | 25 (22.7)        | 36 (32.7)    | 40 (36.4)   |
| 5     | How often do you take fruits in your diet?      | 22 (20)      | 22 (20)          | 46 (41.8)    | 20 (18.2)   |
| 6     | How often do you take vegetables in your diet?  | 46 (41.8)    | 24 (21.8)        | 20 (18.2)    | 20 (18.2)   |
| 7     | How often do you eat fast food?                 | 10 (9.1)     | 26 (23.6)        | 50 (45.5)    | 24 (21.8)   |
| 8     | Do you like to eat in between main meals? e.g. snacking | 8 (7.3)      | 25 (22.7)        | 39 (35.5)    | 38 (34.5)   |
| 9     | Do you eat fried food as your main course?      | 11 (10)      | 23 (20)          | 51 (46.4)    | 25 (22.7)   |
| 10    | Do you lead a stressful life?                   | 35 (31.8)    | 27 (24.5)        | 24 (21.8)    | 24 (21.8)   |

Discussion

Results showed that cardiovascular are the top and foremost reason for death in Pakistan. CVD history included topped the list hypertension, diabetes, heart attack and stroke. O'Donnell et al. [16]. There was a high possibility of occurrence of cardiovascular diseases due to hereditary but mostly due to behavior changes and sedentary styles. Respondents had better knowledge that smoking is risk factor of cardiovascular diseases. In another study, secondhand exposure to smoke causes heart diseases, which increases the risk of disease by approximately 25–30% Pope III et al. [17]. Moreover, the participants showed lower knowledge related to physical inactivity as risk factors when compared with study conducted in Iran Mazloomi et al. [18].

Eating fresh fruits and vegetables keeps your heart healthy. Less intake of fibers contributes to 20.0% of heart diseases in universe. Fruit and vegetables comprises some elements that defend against cardiac diseases, stroke and hypertension. Rosamond et al. [19]. The relationship between stress and cardiovascular disease is not clear. Stress is a risk factor of cardiovascular diseases. It was identified by 64% of respondents, which is close to that study reported Jordan Mukattash et al. [13]. The study findings showed that approximately more than half of the participants assumed that they cannot reduce...
their stress. Stress-management plays a vital role in controlling the different factors of cardiovascular diseases Nekoueiet al. [20].

Limitations

This research had few limitations. First, the sample was convenient, which limited the generalizability of results to the population. In this study, women were unintentionally oversampled (70%) because they were more likely to be available in the house when visited the home.

Conclusion

The study suggests that, level of knowledge regarding CVD is high in the rural community of Lahore, but there is no relation with the attitude and practices. The community people have negative attitude due to which practices are very poor.

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