

A Study to Assess the Knowledge Regarding Lifestyle Modifications Among the Cardiac Patients in NMCH, Jamuhar, Sasaram, Rohtas (Bihar)

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Abstract: *Introduction: Essentially a pump, the heart is a muscle made up of four chambers separated by valves and divided into two valves. Each half contains one chamber and first half is called an atrium and the other half is called a ventricle. The atria collect blood, and the ventricles contract to push blood out of the heart. There are many Disease coming under the cardiovascular disorder Hypertension, myocardial infarction, coronary artery disease, rheumatic heart disease, arrhythmias, stroke and congenital cardiovascular defects. IN recent year, Non- Communicable Disease (NCDs) are also one of the biggest threats to humanity by causing significant mortality and morbidity worldwide including Low and Middle income countries (LMICs).*

Aim Of The Study: To assess the level of knowledge regarding lifestyle modifications .

Methodology: The Cross sectional research is conducted using group of Cardiac patient in NMCH Jamuhar, Sasaram, Rohtas , Bihar from 6/02/2023 to 11/02/2023. A self structured questionnaire tool was used to assess the knowledge regarding lifestyle modification among 60 Cardiac Patients adopting Convenient sampling technique.

Results: There are 60 cardiac patients sample, (23.33%) patient have good knowledge, (53.34%) patient have average knowledge, and (23.33%) patient have poor knowledge. This shows that these variables had influenced knowledge in this study. No association was found.

Conclusion: The present study was aimed at assessing the knowledge regarding lifestyle modifications among the cardiac patients in NMCH, Jamuhar, Sasaram, Rohtas (Bihar)'' .The relevant data was collected statistically based on objectives of the study. There are 60 cardiac patients sample, (23.33%) patient have good knowledge, (53.34%) patient have average knowledge, and (23.33%) patient have poor knowledge. This shows that these variables had influenced knowledge in this study.

Keywords: Cardiovascular Disease, Lifestyle Modification, Cardiac Patient.

I. INTRODUCTION

Cardiovascular diseases (CVDs) are a group of disorders of the heart and blood vessels, including coronary heart disease, cerebrovascular disease, peripheral arterial disease, rheumatic heart disease, congenital heart disease, deep vein thrombosis and pulmonary embolism. There are many Disease coming under the cardiovascular disorder Hypertension, myocardial infarction, coronary artery disease, rheumatic heart disease, arrhythmias, stroke and congenital cardiovascular defects. Lifestyle modifications consist of five components: adoption of Dietary Approach to Stop Hypertension plans (DASH), low sodium diet, engage in physical activity, moderate alcohol consumption and cease smoking. Even though most people choose therapeutic drugs, the adherence to pharmacological and non-pharmacological treatment should be equally considered. Hypertension (HTN), High Blood Pressure (HBP), Is common problems Which affects 1.13 billion people worldwide. It is commonly termed as silent killer disease. Lifestyle modifications consist of five components: adoption of Dietary Approach to Stop Hypertension plans (DASH), low sodium diet, engage in physical activity, moderate alcohol consumption and cease smoking.

Aim of the study: To assess the level of knowledge regarding lifestyle modifications.

Objectives:

1.To assess the level of knowledge regarding lifestyle modifications. 2.To find the association of knowledge regarding cardiac patients with selected socio demographic variables.

II. METHODOLOGY

The Cross sectional research is conducted using group of Cardiac patient in NMCH Jamuhar, Sasaram, Rohtas , Bihar from 6/02/2023 to 11/02/2023. A self structured questionnaire tool was used to assess the knowledge regarding lifestyle modification among 60 Cardiac Patients adopting Convenient sampling technique.

III. RESULT

Section I: Analysis of Socio Demographic data. Section II: Analysis of self structured questionnaires on knowledge. Section III Association of knowledge regarding lifestyle modifications with the selected socio demographic variables among Cardiac Patients. Organization of finding The study findings were organized and presented in following Section:-

Section I: Analysis of socio -demographic data

Table 1 representing frequency and percentage of cardiac patients in NMCH, Jamuhar ,Sasaram.

n=60

	Demographic Variables	Frequency(f)	Percentage(%)
1. Age (in year)			
a)	25-35 Year	4	6.67%
b)	36-65 Year	37	61.67%
c)	66-80 Year	17	28.33%
d)	Above 80 Year	2	3.33%
2. Educational Qualification			
a)	Graduated	19	31.67%
b)	Post graduated	9	15%
c)	Uneducated	9	15%
d)	Matriculation	23	38.33%
3. Type of family			
a)	Nuclear	16	26.67%
b)	Joint	41	68.33%
c)	Extended family	3	5%
4. Residence			
a)	Urban	13	21.67%
b)	Rural	47	78.33%
5. Gender			
a)	Male	37	61.67%
b)	Female	23	38.33%
c)	Transgender	0	0%
6. Duration of illness			
a)	1-5 Year	42	70%
b)	6-10 Year	11	18.33%
c)	11-15 Year	4	6.67%
d)	Above 15 Year	3	5%

7. Socioeconomic Status

a)	<15,000\ Month	13	21.67%
b)	15,000 to 25,000\ Month	16	26.67%
c)	26,000 to 35,000\ Month	19	31.66%
d)	>35,000\ Month	12	20%

8. Source of information

a)	Mass media	39	65%
b)	Internet	6	10%
c)	Book	1	1.67%
d)	Health professionals	14	23.33%

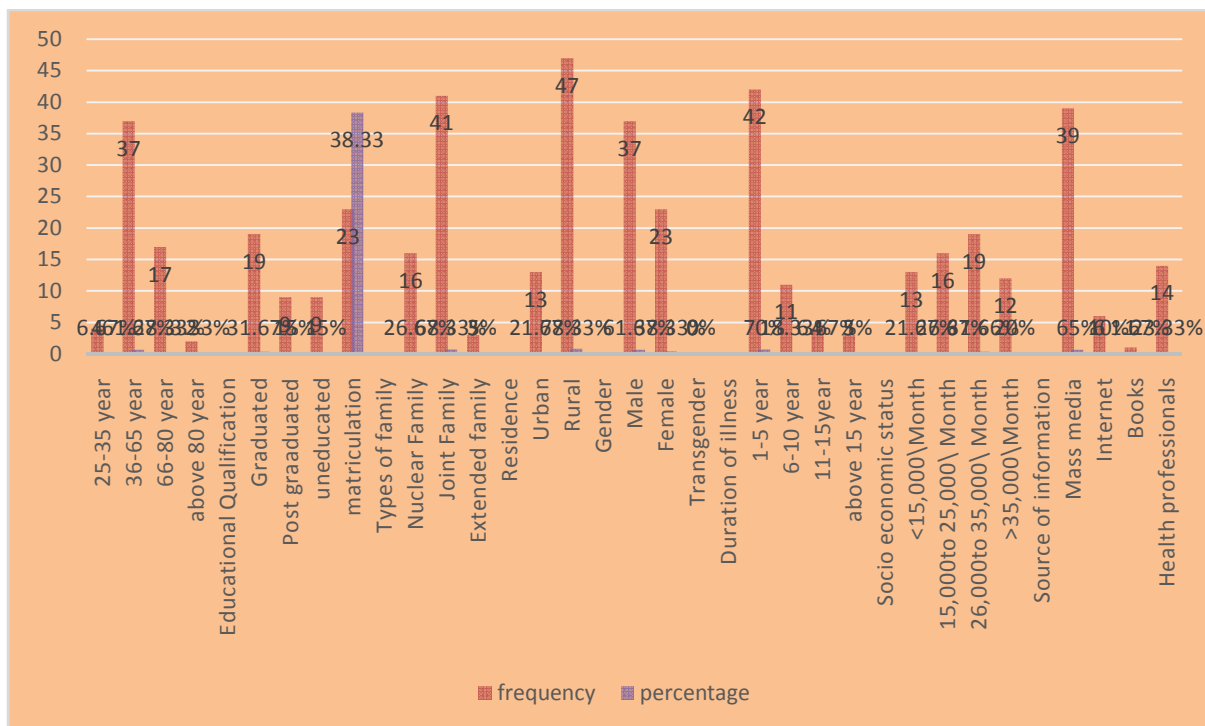


FIG:1 Distribution of Sociodemographic Data

Section II: Level of knowledge regarding lifestyle modifications among cardiac patients.

Table no. II represent the level of knowledge regarding lifestyle modifications among cardiac patients.

n=60

SI. NO	Level Of Knowledge	Frequency	Percentage
1.	Good	14	23.33%
2.	Average	32	53.34%
3.	Poor	14	23.33%

Reveals that Majority of Sample 32(53.34%) have average knowledge level about lifestyle modifications, 14(23.33%) Sample have good and 14(23.33%) Sample have poor knowledge.

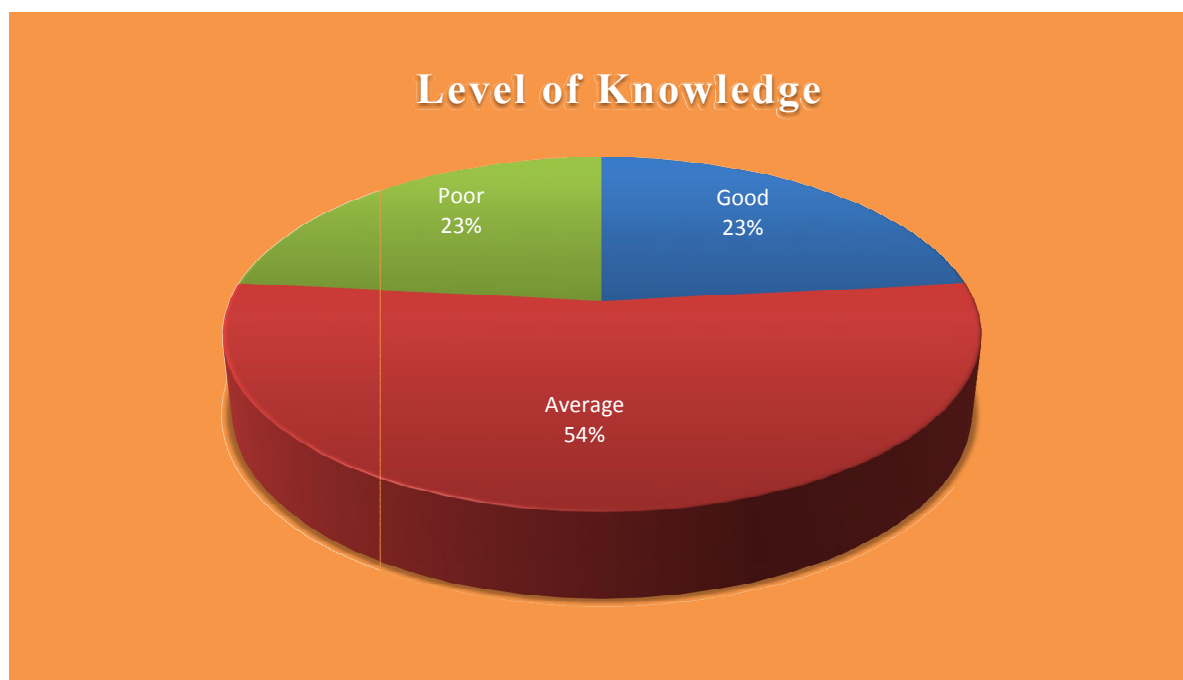


FIG: 2 Level of Knowledge

SECTION III :- Association of knowledge regarding lifestyle modifications with the selected socio demographic variables among Cardiac Patients

Table III represent the association between sociodemographic variable and level of knowledge

n =60

Sl. No.	Socio Demographic variables	Knowledge related to lifestyle Modifications Mean± SD	F/t value	Df	P value
1.	Age (in year)				
a)	25-35 year	14.06 ±1.04	0.073	3	0.67
b)	36-65 year	12.45±1.09			
c)	66-80year	13.47±1.67			
d)	Above 80 year	12.02±1.13			
2.	Gender				
a)	Male	13.02±2.09	0.056	1	0.055
b)	Female	12.97±1.07			
3.	Educational Qualification				
a)	Graduate	12.78± 1.01	0.054	3	0.066
b)	Post graduate	11.98±1.98			

c)	Uneducated	12.87±1.89			
d)	Matriculation	11.89±1.90			
4.	Residence				
a)	Urban	12.01±1.07	1.07	1	0.078
b)	Rural	13.09±1.15			
5.	Source of information				
a)	Mass media	12.09±1.09	0.77	3	0.067
b)	Internet	11.07±1.88			
c)	Book	12.08±1.37			
d)	Health professional	11.78±1.78			

$p \geq 0.05$, Not significant

Table III depicts the association of Mean Knowledge related to Lifestyle Modifications Scores with selected Sociodemographic. The association was assessed using individual t test and One way ANOVA and as appropriate. It is evident from the Table that no significant association was found between Knowledge related to Lifestyle Modifications with selected Sociodemographic Variables. Hence the researcher fails to reject the null hypothesis. The chapter deals with the details discussion of finding of the study interpreted from statistical analysis. The findings are discussed in relation to objectives formulated, compared and contrasted with the dose of other similar study conducted in different settings.

IV. CONCLUSION

The present study was aimed at assessing the knowledge regarding lifestyle modifications among the cardiac patients in NMCH, Jamuhar, Sasaram, Rohtas (Bihar)”. The relevant data was collected statistically based on objectives of the study. There are 60 cardiac patients sample, (23.33%) patient have good knowledge, (53.34%) patient have average knowledge, and (23.33%) patient have poor knowledge. This shows that these variables had influenced knowledge in this study.

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