

PERCEPTION AND AWARENESS ABOUT CORONARY HEART DISEASE AMONG OLDER ADULTS.

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ABSTRACT

The cross sectional study was Conducted among 191 adults of either gender in Maharashtra, India. Among the participants adults who participated in the study 107 males (56%) & females 84 (44%). Their age groups 18-30 yrs total number 39 (20.41%), 30-40 Yrs total number 25 (13.08%), 40-50 yrs total number 99 (51.83%) & above 50 Yrs total number of responses. 28 (14.67%). Among total responses 71.7% were residing in Urban area & 28.3% belong to rural area. Their education 10th Standard (3.1%), 12th Standard (47.1%) Graduate (30.9%), Post-Graduate (7.3%) & Other (11.5%). As per occupation 11% (working), 6.8% (Farming) 5.2% (House wife), 0.5% (Retired) & other (76.4%). Regular BP check Yes (34.6%) No (65.4%) responses. 58.3% go to Doctors clinic & self check 41.7%. About Coronary heart disease 74.9% had Know about it 25% do not know about this About 11% of the & participants have family history of CHD 25% do not have family history of CHD, 8.4% of their parents have heart disease.

KEYWORDS: Coronary Heart disease(CHD). Awareness & Perception Adult population.

INTRODUCTION

As per WHO Coronary heart disease (CHD) is a disease in which fatty deposits made up of Cholesterol & Other Cellular materials (Collectively Called plaque) accumulate inside the Coronary arteries on the surface of the heart, leading to narrowing of the arteries. This decreases the flow of oxygen-rich blood to the heart, which can trigger a heart attack & may Cause serious heart damage or Sudden death CHD is influenced by a Chronic disease. Unhealthy behaviour, such as tobacco use alcohol abuse, Unhealthy diets & physical inactivity are major examples of risk factors.

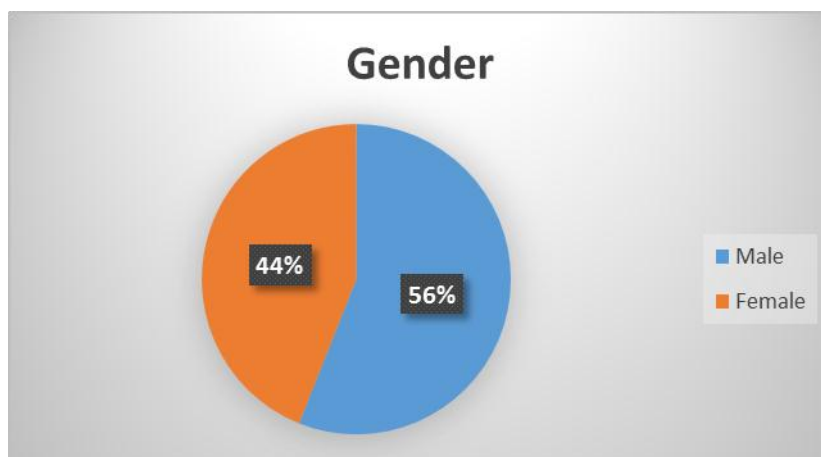
CHD, the leading cause of death & disability globally, causes the loss of 9.4 million lives. The increase in the number of CHD suffers from year to year is due to lack

of public knowledge about-risk factors for CHD & lack of efforts in preventing the disease. The frequency of Coronary heart disease in young individuals has been increasing in recent years. The higher prevalence of coronary artery disease in Indians is attributed to genetic predisposition & faulty lifestyle.

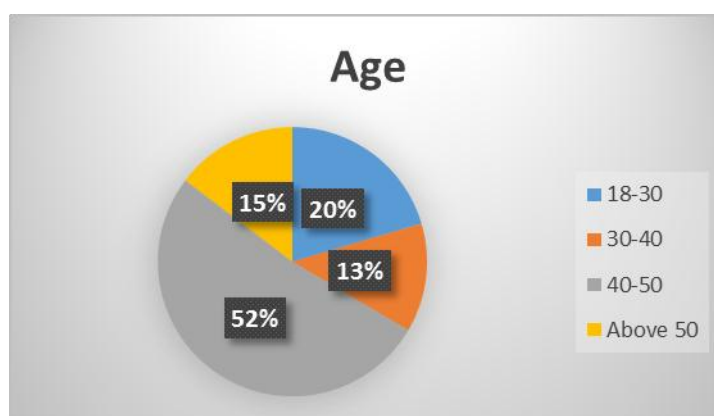
MATERIALS AND METHODS

This cross sectional study was conducted by administering a pre-tested & pre-validated questionnaire via Google form to the participants who stayed in Urban & Rural area in Maharashtra, India. Informed Consent was taken on the Google form. The Statistical Calculation were adapted to Microsoft Excel Spreadsheet.

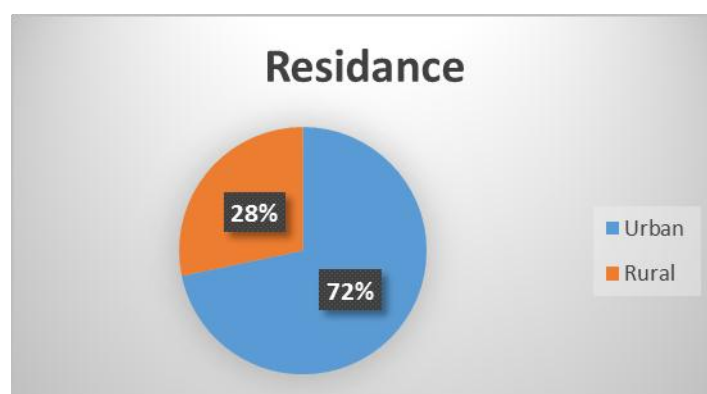
Socio Demographic Details	No. of Participants (Out of 191)	%		
Gender			Average Weight	Average height
Male	107	56%	63kg	172 cm
Female	84	44%	56kg	152 cm



Age		
18-30	39	20.41%
30-40	25	13.08%
40-50	99	51.83%
Above 50	28	14.67%



Residence		
Urban	137	71.70%
Rural	54	28.30%



RESULTS AND DISCUSSION

Total 191 of male & Female adults participated. As per the table about blood pressure, (BP) monitoring regularly 34.6% Checked regularly. As per Michael Bohm & Othery^[5] with patients with hypertension medical treatment should be further intensified. Among

them 58.3%. Check Bp from doctor's Clinic & 41.7%. Self check. Around 74.9% people heard about-CHD & 25.1% did not hear about-CHD. About 56.02%. felt that someone sitting on the chest, 55.48% felt pain in left shoulder, 59.68% felt pain in left side of the chest. Tingling sensation felt by 50.78% of population. Sudden

onset of vomiting 25.65%, feeling of suffocation around neck 63.62%. Regarding Men & women different symptoms during heart attack 50.78% agreed & many symptoms are common to both the Gender 59.68% Said Yes. As per Jennifer et al^[6], female have a longer life expectancy than males, women make up the most-significant percentage of Cardiovascular disease (CVD) diagnoses in the elderly population. About 11% agreed about family suffering from CHD. Jingyi W & others^[7] reported that family history should be a strong incentive to investigate early preventive & therapeutic measures. Around 82.20% agreed that those who consume tobacco in any form there is a higher risk of heart disease. Emily Barks et al^[8] revealed that smoking increases the risk of all CVD subtypes, quitting reduces the risk. As per Mark Woodward^[9] a broader women's health agenda is needed, integrating sexual & reproductive health with CVD. Among 191 participants 83.24% agreed that a consumption of alcohol there is a higher risk of heart disease. Steven Bell & others^[10] described that moderate alcohol consumption is associated with a lower risk of Cardiovascular disease. A.L. Klatsky^[11] describes the association between heavy alcohol intake & increased risk of Cardiomyopathy, atrial arrhythmias & haemorrhagic strokes are established. About Chest pain Floor Getal reported in both men & women, the diagnostic value of non-acute chest pain Characteristics & Risk factors in differentiating CAD from no CAD was high. Thomas J. Flegal described. The optional and management of patients with known or suspected angina begins with establishing the correct diagnosis. 76.44% participants agreed that Diabetes increases the risk of developing heart disease. A. Saldanha & Others^[14] described the classical risk factors for the development of CVD in subjects with diabetes are the presence of Obesity, dyslipidemia & other hypertension.

As per Pamela Betal^[15] there has been an overall increase in the number of people who smoke world-wide. Yatish T.R. & others described that Smoking increases the risk for the development of Coronary artery disease. In the present study 94.20% reported normal blood glucose level, 2.10% high blood glucose level. 2.6% participants reported that they are under medications to control blood glucose. Aman Sharma et al^[17] reported that the related CVD could also be predicted to increase as the incidence of Diabetes mellitus keeps growing due to both the conventional factors, risk of Diabetes & the direct impact on CVD. Another report by Danyang T & others, physical activity is regarded as an efficient way to prevent CVD. Individuals can choose one of way of physical activity or combine moderate and rigorous activity. In the present work majority of the participants (50.30%) prefer to exercise at home. The work of Flegal explained, exercise enhances Cardiovascular function and helps to modify cardiac risk factors. As per M. Villela et al^[20] exercise to a physiologic stressors that can have a multiple beneficial effects on Cardiovascular System.

The present study shows 6.81% take fast food, Salads 4.1% Biscuits 4.71%, Bhakri 7.85%. S. Viparietal^[21] explained that total dietary patterns should be emphasized for CVD prevention.

CONCLUSION

Coronary risk factors particularly tobacco use physical inactivity & dietary modification can be modified appropriately by health education. From the present study we can be suggested that high level of education is advisable for the knowledge, risk perception & to adopt preventive behaviours about CHD.

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