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A Study to Assess the Health-Seeking Behavior among Older Persons Residing in Selected Community Areas at Kancheepuram District

Vijayalakshmi Radhakrishnan*, Thirunavukarasu

Department of Psychiatry, SRM Medical College, Tamil Nadu, India

*Corresponding author: Dr. Vijayalakshmi Radhakrishnan, Department of Psychiatry, SRM Medical College, Tamil Nadu, India, E-mail: rvlakshmi.srm@gmail.com

Abstract

The world's population is ageing rapidly between 2000 and 2050. The proportion of the world's older adults is estimated to double from about 11% to 22%. In absolute terms, this is an expected increase from 605 Million to 2 Billion people over the age of 60. Older people face special physical and mental health challenges which need to be recognized. (WHO -fact sheet - September 2013 on mental health and older adults). Among the elderly population depression complicates the existing morbidity conditions such as diabetes, hypertension, and Cerebrovascular accidents. It decreases the quality-of-life, functional ability, increases the mortality, and decreases health care utilization. Mental health problems will have a negative influence on health seeking behavior among older persons.

Keywords: Health behavior; Mental health; Auto immune diseases; Inferential analyses

Introduction

Objectives:

- To assess the health seeking behavior and quality of life among older persons.
- To associate the health seeking behavior with selected demographic variables of the older persons.

Ethical clearance

The study was approved by the Institutional Ethical Clearance Committee (IECC). Permission was obtained from the authorities of the community medicine department, SRM medical college. Informed consent was obtained from the older persons [1].

Methodology

Quantitative research approach and descriptive research design was used to assess health seeking behaviour among 70 older persons in potheri village, kattankulathur, kancheepuram district [2]. Structured questionnaire to assess health seeking behavior and the reliability of the tool is checked using cronbach's alpha Based on standardized Items [3].

Results and Discussion

Data analysis, both descriptive and inferential analyses were used for data analysis.

- Frequency and percentage distribution of demographic variables of older persons.
- Assessment of the health seeking behaviour among older persons.
- Association between the demographic variables and health seeking behaviour among older persons.

Among 70 older persons 6 (8.6%) of them had inappropriate health seeking behaviour, 43 (61.4%) of them had moderately appropriate health seeking behaviour, 21(30.0%) of them had appropriate health seeking behavior [4]. The p value corresponding the demographic variable "Type of family" is

significant at 5% level since it is less than 0.05. Hence we can say that there is significant association between the “Type of family” and “Health Seeking Behaviour” of old age people (Table 1). The p values of all other demographic variables are not significant since they are not less than 0.05. Hence we can say that there is no significant association between age, gender, religion, educational status, monthly income, marital status, having children gender of children, financial status, previous occupation, currently employed and satisfaction at work place” with “Health seeking behaviour of old age people”(Figure 1).

Conclusion

The study results revealed that majority 43 (61.4%) of them had moderately appropriate health seeking behavior and only 21(30.0%) of them had appropriate health seeking behavior. The p value corresponding the demographic variable “Type of family” is significant at 5% level since it is less than 0.05 .Hence we can say that there is significant association between the “Type of family” and “Health Seeking Behaviour” of old age people. This indicates that to promote health and well-being among older persons more motivation and awareness need to be created among older persons and their family members.

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Table 1: Association between the demographic variables and Health seeking behaviour of old age people.

S.No.	Demographic Variables	Class	Level of Health Seeking Behaviour			Chi-Square Value	DF	P-value
			Inappropriate	Moderately appropriate	Appropriate			
1	Age	61- 65 years	4	25	11	5.674	4	0.225
		66-70 years	0	15	7			
		71-75 years	2	3	3			
2	Sex	Male	1	12	4	0.809	2	0.667
		Female	5	31	17			
3	Religion	Hindu	6	41	17	4.347	4	0.361
		Christian	0	1	2			
		Muslim	0	1	2			
4	Educational status	Illiterate	5	20	12	4.716	6	0.581
		Primary School Education	1	13	7			
		Middle School	0	9	2			
		High School Education	0	1	0			
5	Type of family	Nuclear family	1	17	5	12.784	4	0.012*
		Joint family	4	26	16			
		Extended family	1	0	0			

6	M o n t h l y income	<1520	0	3	1	7.799	8	0.453
		1521-4555	3	6	6			
		4556-7593	2	22	8			
		7594-11361	1	6	5			
		11,362 - 15,187	0	6	1			
7	Marital status	Married	6	37	19	1.475	4	0.831
		Single	0	1	0			
		Widower	0	5	2			
8	H a v i n g children	Yes	6	42	21	0.637	2	0.727
		No	0	1	0			
9	Sex of children	Male	0	17	7	6.725	6	0.347
		Female	0	5	3			
		H a v i n g both male and female children	6	20	11			
		N o t Applicable	0	1	0			
10	F i n a n c i a l Status	Independent	1	15	3	3.391	2	0.183
		Dependent	5	28	18			
11	P r e v i o u s occupation	Unemployed	1	9	9	8.998	8	0.342
		Unskilled worker	5	23	10			
		Semiskilled worker	0	1	1			
		S k i l l e d worker	0	4	1			
		C l e r i c a l , Shop owner, Farmer	0	6	0			
12	C u r r e n t l y employed	Yes	4	30	14	0.074	2	0.964
		No	2	13	7			
13	S a t i s f a c t i o n at work place	Not satisfied	3	9	4	3.647	4	0.456
		Moderately satisfied	1	21	9			
		N o t Applicable	2	13	8			

Note: *-Significant at 5% level

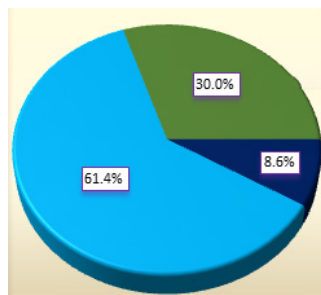


Figure 1 : Level of health seeking behaviour among older persons.

Note: (■) Inappropriate Health Seeking Behaviour;
(■) Moderately appropriate Health Seeking Behaviour

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Health Risks Related to Obesity

Anurag Aggarwal*

Department of Community Medicine and Public Health, Postgraduate Institute of Medical Education and Research, California, United States

*Corresponding author: Dr. Anurag Aggarwal, Department of Community Medicine and Public Health, Postgraduate Institute of Medical Education and Research, California, United States, E-mail: anuragagarwal@naboard.edu.in

Description

Obesity is a multipart disease involving a production of excessive amount of body fat. Obesity is not just a skin-deep disease. It is a medical problem that raises the risk of other diseases and health problems such as heart disease, diabetes, high blood pressure and different types of cancers. Obesity is usually caused by taking too much junk food. If we consume high amounts of energy, particularly fat, carbohydrates and sugars, if you do not use the energy through exercise and physical activity, then unutilized energy will be stored by body under the skin and converted as fat. The most common causes of obesity are diets that are high in carbohydrates, frequency of eating, overeating, physical inactivity, genetics, and psychological factors. Sometimes, diseases such as hypothyroidism, insulin resistance, polycystic ovary syndrome, and Cushing's syndrome also lead to obesity. It is divided into 3 categories there are:

- Class 1 having BMI (Body Mass Index) of 30 to <35,
- Class 2 having BMI (Body Mass Index) of 35 to <40 and higher
- Class 3 Obesity is sometimes considered as “severe” obesity.

Obesity is unhealthy for both body and mind. It makes the person to feel uncomfortable. Overweight is somewhat different from obesity. Obesity means having extra body fat. Everyone requires some body fat for energy, heat insulation, and other body functions. The weight is controlled by complex interactions between hormones and neurons in your hypothalamus hence it is difficult to lose the overweight. There are some factors that lead to obesity like some people have genes that make it difficult for them to lose weight, by taking limited healthy food and taking many food sources high-calorie, like fast-food restaurants. Sometimes depression can lead to overweight, as some people may take excessive amount of food for emotional comfort. Antidepressants can also increase the risk of weight gain. By taking Medications, such as steroids or birth control pills, may also lead to the condition of obesity. The obesity can be diagnosed by body mass index is a rough calculation of a person's weight in relation to their height. Skinfold thickness tests, waist-to-hip comparisons. Screening tests like ultrasounds, CT scans, and MRI scans. Doctor may suggest certain tests to help diagnose obesity-related health risks. They are thyroid tests, heart tests, such as an Electro Cardio Gram (ECG or EKG), diabetes screening, liver function tests and blood tests to examine cholesterol and glucose levels. A measurement of the cholesterol around your abdomen is also a good sign of your risk for obesity-related diseases. It also leads to inflammation in the body, which is the risk factor for cancer. Obesity is also a major reason for the type 2 diabetes. It may lead to many health problems like type 2 diabetes, heart disease, breast cancer, colon cancer, stroke, gallbladder disease, fatty liver disease, high cholesterol, arthritis, infertility and other breathing problems. Obesity can be treated by a structured exercise program and increased daily activity — up to 300 minutes a week — which help to build up your strength, endurance, and metabolism.

Conclusion

Obesity and overweight are increasingly recognized as not only individual problems, but also societal and population-wide issues. To respond to this understanding, multidimensional, population-based changes in socio-environmental variables that influence energy intake and expenditure will be required.

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Different Types of Threats to Human Health by Environment

Hendrik Bernardus*

Department of Environmental, Queensland University, Brisbane, Australia

*Corresponding author: Dr. Hendrik Bernardus, Department of Environmental, Queensland University, Brisbane, Australia, E-mail: Hendrik.B@gmail.com

Description

There are numerous environmental threats to human health. Some environmental threats even lead to the death of human beings. The environmental threats include both major ones, such as earthquakes, tsunamis and volcanoes, etc. and the minor forms such as pollution, climate change, etc. Some way or the other human's careless behavior is also the cause for the environmental threats which gets back as a serious illness to human health. These threats can be physical such as toxic chemicals, food contamination, and various type of pollution or they can be social such as poor housing conditions, dangerous work, poverty, and urban sprawl. These environmental threats can be divided into two branches: traditional hazards, and modern hazards.

Traditional hazard

The traditional hazards include lack of development and poverty that is increasing in wide-range, and is also associated with indoor air pollution from cooking or heating using coal, inadequate basic sanitation in the household, and the community and also lack of access to safe drinking water or inadequate solid waste disposal and biomass fuel.

Modern hazard

The modern hazard includes unsustainable development. These hazards are related to unsustainable consumption of natural resources and development that lacks health and environmental safeguards. They include urban air pollution from motor cars, coal power, industrialization, stations, and industry resulting in climate change, stratospheric ozone depletion, and boundary pollution. Pollution in water is from intensive agriculture and industry-populated areas. Polluted air and water, excessive levels of noise, nuclear weapons fall-out, overcrowded slums, toxic industrial waste dumps, inadequate or overly adequate diet, stress, food contaminants, medical X-rays, drugs, cigarettes, unsafe working conditions, and others are often considered causative agents of environmental diseases. Most environmentally induced diseases, unlike those caused by bacteria or other pathogens, are difficult to cure but theoretically simple to stop. Remove the adverse environmental influence and therefore the ailment will disappear. This is simply to say that if environmental health is taken care of, there will be fewer environmental threats and there will be fewer human health issues. Those strategic ways to improve environmental health can be done through personal wellness for families, communities, and individuals. Preventing the discharge of poisonous pollutants into water and food, avoiding radiation exposure, avoiding cigarette smoke, and avoiding synthetic colouring or materials are just a few examples. The issue with environmental health concerns is our limited knowledge of those toxic agents that are literally distributed over our earth due to different activities by man in the ecosystem. For example, worldwide, there are about 10 million chemical compounds that have been synthesized so far. However, only one percent is produced commercially and is regulated. A healthy environment is essential for helping people live longer and enhance their quality of life. Consider data from healthy people, which shows that 23% of all deaths result from entirely preventable environmental health problems. Optimal environmental health is not only beneficial, it's also important, both for surrounding communities and their individuals. Some of the benefits include cleaner water, cleaner air quality, increased access to healthy foods, reduced hazardous waste, and safer outdoor environments for children, adults, and youngsters, improved population health, and improved health equity.

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The Main Causes of Functional and Structural Gastrointestinal Diseases

Adhitya Manikanta*

Department of Internal Medicine and Public Health, Shahjalal University of Science and Technology, Dhaka Bangladesh

***Corresponding author:** Dr. Adhitya Manikanta, Department of Internal Medicine and Public Health, Shahjalal University of Science and Technology, Dhaka, Bangladesh, E-mail: Adhityamanikanta@gmail.com

Description

Gastrointestinal diseases affect the gastrointestinal tract from mouth to the anus. There are two types, functional and structural. A few examples of gastrointestinal problems are nausea/vomiting, food poisoning, lactose intolerance, and diarrhea. Functional gastrointestinal diseases are those in which the GI tract looks normal when observed but does not transport correctly. A few common problems that affect the GI tract are constipation, irritable bowel disorder, nausea, food poisoning, and gas, bloating, (GERD)Gastro- Esophageal Relux Disease, and diarrhea. Many factors may affect your GI tract and its motility, including eating a diet low in fiber, not having enough exercise, traveling or other changes in daily life, eating large amounts of junk products, stress, and resisting the urge to have a bowel movement because of hemorrhoids. Overusing anti-diarrheal medications weaken bowel muscle actions called motility. Taking antacid medicines containing calcium or aluminum and taking certain prescriptions can help to treat gastrointestinal diseases. Common examples of structural GI diseases include strictures, stenosis, hemorrhoids, diverticular disease, colon polyps, colon cancer, and inflammatory bowel disease. The main reasons for structural gastrointestinal diseases are constipation, irritable bowel syndrome, hemorrhoids, internal hemorrhoids, external hemorrhoids.

Constipation, a functional issue, makes it tough for you to have a bowel movement when stools are infrequent (not more than two times a week) or incomplete. Constipation is usually affected by inadequate "roughage" or fiber in your diet or a disruption of your routine or diet. Constipation leads you to pressure during a bowel movement. It may cause small, hard stools and, occasionally, anal problems such as fissures and hemorrhoids. You can treat constipation by increasing the amount of fiber and water in your diet, exercising regularly, and increasing the intensity of your workouts as tolerated. Laxatives are taken in the case of severe conditions. Always follow precautions while taking laxative medicine and consult the doctor before using the medicine. Irritable bowel syndrome is a functional condition where your colon muscle contracts extra or less frequently than usual. Certain foods, medicines, and emotional stress are some aspects that can cause IBS. Symptoms of IBS include abdominal pain and cramps, additional gas, bloating, and changes in bowel habits such as harder, looser, or more urgent stools than normal. Treatment includes avoiding excessive caffeine, increasing fiber in your diet, reducing stress or learning different ways to manage stress, taking medicines as recommended by your healthcare provider, avoiding dehydration, and hydrating well throughout the day, getting high-quality rest/sleep. Hemorrhoids are dilated veins in the anal canal, a structural disease. They're swollen blood vessels that line your anal opening. They are affected by chronic excess pressure from straining during a bowel movement, persistent diarrhea, or pregnancy. There are two kinds of hemorrhoids: internal and external. Internal hemorrhoids are blood vessels inside of your anal opening. Eventually, internal haemorrhoids are responsible for prolapsing out of the anus. Treatment includes improving bowel habits, your healthcare provider using ligating bands to eliminate vessels, or your healthcare provider removing them surgically. Surgery is needed only for a small number of people with very large, painful, and persistent hemorrhoids. External hemorrhoids are veins that lie just under the skin on the outside of the anus. Sometimes, after straining, external hemorrhoid veins burst and blood clots form under the skin. This severe condition is called a pile. Treatment includes removing a clot and vein below local anesthesia and/or removing hemorrhoid itself.

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