



A Descriptive Study to Assess the Level of Knowledge Regarding Hypertension and its Management Among the Hypertensive Elderly in A Selected Rural Community, Kanchipuram District

KEYWORDS

Knowledge, Hypertension and its management, Hypertensive elderly.

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ABSTRACT

Hypertension is one of the most common diseases which are reported among the geriatric males and females. According to recent researches there were 24.5% deaths occurred due to hypertension in Tamilnadu. The prevalence of hypertension is high among elderly. This study aimed to assess the knowledge regarding hypertension and its management among the hypertensive elderly. The objectives of the study were to assess the knowledge regarding hypertension and its management among hypertensive elderly in the selected community area and to associate the knowledge level with selected demographic variables. The study was conducted in the Mahabalipuram village. A non- experimental descriptive research design was used. A total of 30 samples were selected by using non probability convenient sampling. The knowledge level of the samples was assessed using a structured questionnaire. The collected data were analyzed using the descriptive statistics and inferential statistics. The study results revealed that 67.7% of the hypertensive elderly were having moderately adequate knowledge regarding hypertension and its management, there is also a significant relationship between occupational status and their knowledge score. The study concludes that health awareness programs are to be conducted by the educational institutions and various health care agencies which will be an eye opener to the community to prevent the complications due to hypertension thereby reducing mortality and morbidity rates among elderly population.

INTRODUCTION:

Hypertension is one of the commonest diseases among the people above 60 yrs of age. It is mostly called as the "silent killer" as most of the clients does not know the symptoms of the onset. Hypertension puts an increased strain over the heart, thus leading to hypertensive heart disease and coronary artery disease. Hypertension also constitutes a risk factor stroke, aneurysm of the artery. About 90-95% of the cases are categorized as primary hypertension which means there is no obvious underlying cause. The remaining 5-10% of the cases is categorized as secondary hypertension which means it's a result of other conditions in endocrine system, kidney, etc. So it is important to prevent its occurrence at the earliest stages. World Health Organization has segregated the hypertension as one of cardiovascular problems. In favour of curbing the occurrence of hypertension WHO has declared the theme for the WORLD HEALTH DAY 2013 as "Controlling blood pressure". WHO released a book titled as global brief on hypertension, on the occasion of World Health Day. This document explains the measures for preventing the hypertension. Recently WHO released the statistics on the prevalence of hypertension in India. It showed the increased prevalence among the elderly people in the Indian community. This study is selected on the basis that the prevalence of hypertension is high among the elderly in Tamilnadu. As is termed as the silent killer, the people in the rural area should have knowledge about hypertension and its management. The need for this study is important because of the high prevalence rates recorded in India and Tamilnadu. It also constitutes a major portion in the non communicable disease records

Places	Gender		Total
	Males	Females	
World(WHO)	33%	26.2%	59.2%
India	36%	37.2%	73.2%
Tamilnadu	9%	10%	19%

Table 1: Prevalence rates of hypertension (WHO, 2009)

MATERIALS AND METHODS:

Research approach: quantitative descriptive research approach

Research design: non – experimental descriptive design

Settings of the study: Mahabalipuram village, Thirukazhukundam Block, Kancheepuram District

Population: hypertensive elderly.

Sample: hypertensive elderly who have met the inclusion criteria

Sample size: 30 hypertensive elderly who have met the inclusion criteria

Sampling Technique: non probability convenient sampling technique.

Criteria for Selection of Sample:

Inclusion criteria: The inclusion criteria for the present study were:

- Males and females who are above the age group of 60 years.
- Those who can speak either Tamil or English language.
- Those who are willing to participate in this study

Exclusion criteria: The exclusion criteria for the present study were:

- Those who are not available at the time of study.

Development and description of the tool: A structured interview schedule was developed based on the objectives of the study; through review of literature on related studies, journals, and books; opinion from the experts. The instrument used in this study consists of two sections which are as follows:

SECTION A: demographic data

SECTION B: It consisted of multiple choice questions which were prepared to assess the knowledge on hypertension and its management among hypertensive elderly.

Method of scoring and interpretation: Each correct answer carries "1" mark and wrong answer carries '0' mark. The maximum score is '30' and the minimum score is '0'. According to the scores obtained by the samples, it was categorized as follows by the investigators.

- >76% - Adequate knowledge
- 51-75% - Moderately adequate knowledge
- < 50% - Inadequate knowledge.

Method of data collection: the data was collected using structured interview schedule.

RESULTS AND DISCUSSION:

The collected data were entered in data sheet and analyzed using descriptive and inferential statistics. The distributions of the demographic data of the study participants are more than half the proportion (63.3%) of the hypertensive elderly were in the age group of 60-70 years. Both the genders held equal percentage of distribution among the hypertensive elderly. Higher proportions (93.3%) of the hypertensive elderly were married. More than half the proportion (60%) of the hypertensive elderly finished their primary schooling. Majority (56.6%) of the hypertensive elderly was involved in business as their occupation. Higher proportion (73.3%) of the hypertensive elderly had family income of Rs.5000-Rs.10000.

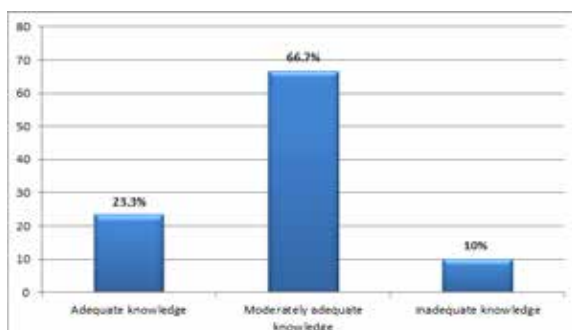


Figure 1: shows the knowledge level of hypertensive elderly regarding the hypertension and its management.

Regarding the association between the knowledge level and the variables there is a significant relationship between occupational status and their knowledge score. There was no significance with respect to other variables

CONCLUSION:

Health care professional (nurses, physicians, midwives, public health nurses, community nurses and so on) are known to be the leading source of information. This is positive as information retrieved can be considered as reliable. Health care workers must utilize this opportunity to the fullest. Educating the public on primary prevention of hypertension and its management must be a priority. Awareness of possible lifestyle changes can be proposed. This can intend empower the individual as care takers of their own health. A nationwide health promotion campaign on the reduction of salt intake should be prioritized. This is a cost effective public health approach that has a long term effect on the general health of the population as a whole. Educating of the population especially women will have a great impact on the health of the family, society and nation. This is due to the fact, Indian culture basically consider the woman as the leading role of the kitchen.

Understanding the etiology of Hypertension is as well important. The public's view of "tension" as one of the main causes of Hypertension must also be addressed by health care workers. Knowledge that risk lifestyle behaviors (excess alcohol, excess salt intake, sedentary lifestyle, smoking, unhealthy nutrition) are the main cause of HBP even though there are other hereditary factors. Lifestyle modification education must thus be one of the main focuses of education

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