INTRODUCTION:

"Being defected is often a temporary condition giving up is what makes is permanent!"

Elderly being is the senior citizen and with the increasing life expectancy those of age 60 years and above would continue to increase. An importance to promote research on geriatric issue and facilitate the establishment of appropriate geriatric health care facilities in order to improve the health status of the elderly to make them socio economically productive and happy has been discussed in this issue. It has also stated that Osteoporosis is one of the major public health problems of the aged.

Osteoporosis is a disease in which the density and quality of bone are reduced leading to weakness of the skeleton and increased risk of fracture, particularly of the spine; wrist and hip osteoporosis and associated fractures are an important cause of mortality and morbidity. Osteoporosis is often known as “the silent thief” because bone loss occurs without symptoms and the progressive loss and thinning of bone tissue happens over many years. This disease affects millions of people throughout the world are four times more likely than men to develop the disease.

According to WHO Osteoporosis is second only to cardiovascular disease a Global Health Care problem and medical studies show a 50 year old women has a similar lifetime risk of dying from hip fracture; wrist and hip osteoporosis and associated fractures are an important cause of mortality and morbidity. Osteoporosis is often known as “the silent thief” because bone loss occurs without symptoms and the progressive loss and thinning of bone tissue happens over many years. This disease affects millions of people throughout the world are four times more likely than men to develop the disease.

Osteoporosis is a disease characterized by low bone mass and structural deterioration of bone tissue, with a consequent increase in bone fragility and susceptibility to fracture. Old age consists of ages nearing or surpassing the average life span of human beings. Elderly people have limited regenerative abilities and are more prone to disease, syndromes, and sickness than other adults. Currently, more than half of the world's women aged 60 years and over are living in developing regions, 198 million compared with 135 million in the developed regions.

OBJECTIVES

1. To assess the knowledge among elderly women regarding preventive measures on osteoporosis.
2. To evaluate the effectiveness of video assisted teaching module regarding knowledge on preventive measures on osteoporosis among elderly women.
3. To find the association between post test knowledge scores with the selected scores of elderly women in a selected demographic variables.

MATERIALS AND METHODS

Research design is one group pretest and post test design will be used in this study. Data was collected from 50 elderly women in Vijayawada Krishna district. Purposive sampling was used for selected the sample in investigator developed structured questionnaire on osteoporosis prepared used for data collection.

KEYWORDS

Assess, Effectiveness, Video Assisted teaching module, Knowledge.

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KEYWORDS

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Dependent variables
Knowledge of elderly women regarding osteoporosis

Sampling technique
Purposive sampling

Inclusion criteria:-
1. The Elderly women who will be in the age group 60-80 years.
2. The Elderly women who will be residing in selected Home for the Aged.
3. Elderly women who will be able to understand Telugu or English.
4. Elderly women who will be willing to participate in the study.
5. Elderly women who will be present during data collection period.

Exclusion criteria:-
1. Elderly men
2. Women below 60 years.
3. Elderly women those who cannot understand Telugu.
4. Elderly women those who are above eighty years.

Tools and Technique
Part-I
Demographic variables consist of age, sex, education, religion, educational status of the father, type of family, area at residence, method of drainage system, past experience regarding knowledge of osteoporosis, exposure to knowledge regarding osteoporosis.

Part – II
Structured questionnaire was used to assess the knowledge on osteoporosis. Thirty multiple choice questions were used to assess the knowledge on osteoporosis among elderly women. The tool was prepared by reviewing the literature and by consulting experts.

Data collection procedure:
The researcher initially established rapport with the elderly women and the purpose of the study was explained. The informed consent was obtained from the participants. The investigator selected 50 samples who met the inclusion criteria by purposive sampling technique after the brief self-introduction; demographic data was collected for 15 samples for each batch by using structured multiple choice questionnaires for assessing the knowledge on osteoporosis among elderly women.

Data analysis plan
Descriptive statistics like frequency, mean, SD, mean percentage was used for description of demographic characteristics and assessment of knowledge. Inferential statistics like paired t test was used to evaluate the effectiveness of planned teaching programme and chi-square test was used to find out the association between Knowledge with Demographic Variables.

CONCLUSION
The study findings that the structured questionnaire on osteoporosis were effective among elderly women. The investigator conducted the study with a great satisfaction in teaching of osteoporosis to the elderly women.

REFERENCES