Research Paper

Biomedical



To assess the knowledge and attitude of ill effects of Tobacco usage among group D workers working in Chhatrapati Shivaji Subharti Hospital, Meerut

*Shabana Khatun** Dr Suraj Kumar*** Dr Alok Kumar

* Assistant Lecturer, Nursing, UPRIMS&R, Saifai

** Lecturer, Physiotherapy, UPRIMS& R, Saifai

*** Additional Professor, Forensic Medicine & Toxicology.UPRIMS & R, Saifai

ABSTRACT

Background: Tobacco is the single most preventable cause of death in the world today. This year, tobacco will kill more than five million people -- more than Tuberculosis, HIV/AIDS and Malaria combined.

Aims: This study was undertaken to assess the knowledge and attitude of ill effects of Tobacco usage among group D workers and to provide planned teaching programme.

Settings and Design: The descriptive survey with "co – relational design" was conducted in Chhatrapati Shivaji Subharti Hospital, Meerut.

Material and Methods: It was based on descriptive survey with "co- relational design" conducted on 60 group D workers. Semi – structured interview schedule technique was used. It includes knowledge and attitude items.

Results: Results were statistically analyzed the Mean knowledge score was 4.86 with a standard deviation of 1.67 and 53 (88.5%) had inadequate knowledge and 7 (11.5%) had adequate knowledge regarding ill effects tobacco. Unfavourable attitude was found.

Conclusion: It was found that inadequate knowledge among group D workers was higher than the adequate knowledge and had unfavourable attitude regarding ill effects of tobacco usage.

Keywords : knowledge, attitude, ill effects, tobacco, usage, group D worker

Introduction

Tobacco use kills 5.4 million people a year worldwide - an average of one person every six seconds - and accounts for one in 10 adult deaths worldwide. It kills up to half of all users. Most of tobacco's damage to health does not become evident until years or even decades after the onset of use.

In India have shown that tobacco chewing in its various forms is directly responsible for cancers of the oral cavity, oesophagus, pharynx, cervix and penis. Global data show that cancers in certain other anatomical sites such as the kidney, liver and pancreas and myeloid leukaemia have also been associated with the use of tobacco.

Various studies have revealed that tobacco use is common throughout the world due to low prices, aggressive and widespread marketing, lack of awareness about its dangers, and inconsistent public policies restricting its use. Tobacco use is raising globally, the epidemic of tobacco-related disease and death has yet to reach its peak. Therefore, there is a need to give consideration to assess knowledge and attitude of tobacco user about usage and ill effects of tobacco and to plan teaching programme for reducing the incidence.

Material and Methods

It was based on descriptive survey with "co- relational design" conducted on 60 group D workers and study setting was Chhatrapati Shivaji Subharti Hospital. Simple random sampling method was used. Semi - structured interview schedule conducted for assessing the knowledge and attitude regarding ill effects of tobacco usage among Group D workers.

The tool consists three sections: first section regarding the demographic data it consists 9 items, second section regard-

ing the knowledge it consist 10 items and third section regarding attitude it consists of 10 items . 5 points likert scale was used to assess the attitude of the patients regarding ill effects of tobacco.

Results

In demographic data it was found that the majority of sample subjects 44 were in the age group of 19 -30 yrs, the most of sample subjects 56 were male and 4 were female, the majority of respondent were Hindus 56 , 2 were Muslim, 2 were Christian, education status shows that 20 were primary school educated, the most of the sample subjects 20 were getting Rs. 2501 –Rs 3000, the most of the sample subjects 41 were consuming tobacco products, the most of sample subjects 38 were start consuming tobacco products in the impact of friends, the most of the sample subjects 24 were got information about the information regarding ill effects of tobacco by mass media.

It was found that the Mean knowledge score was 4.86 with a standard deviation of 1.67. 53 (88.5%) had inadequate knowledge and 7 (11.5%) had adequate knowledge.

The likert scale assessed, it was found that 10 patients strongly agreed that tobacco usage will improve personality, 16 patients strongly agreed that it will make the mood pleasant, 13 patients strongly agreed that children of smokers are more likely to smoke, 7 patients strongly agreed that it will reduce tension and give energy, 7 patients strongly agreed that it will increase blood circulation and relieve constipation, 11 patients strongly agreed that reason for taking tobacco is because of less expensive, 9 patients strongly agreed that the immediate effect of stoppage of tobacco is improvement in taste and smell, 16 patients strongly agreed that it will change the colour of lips and teeth, 23 patients strongly agreed that it leads to disorders like heart diseases, breathing difficulty, lung cancer, oral cancer etc, 13 patients strongly agreed that it leads to bad breath from the mouth.

Discussion

Tobacco smoking and chewing continue to be regarded as a relatively harmless social habit. And since tobacco sales in developed countries have dropped drastically, tobacco companies have also shifted their focus towards developing counties like India & China.

Many studies in India have shown that tobacco chewing in its various forms is directly responsible for cancers of the oral cavity, oespohagus, pharynx, cervix and penis. Beedi and cigarette smoking cause oral, pharyngeal, oesophageal, laryngeal, lung, stomach, gallbladder, urinary bladder and penile cancers. Global data show that cancers in certain other anatomical sites such as the kidney, liver and pancreas and myeloid leukaemia have also been associated with the use of tobacco.

The government made various policies which includes the health warnings can effectively reverse usage habits and the spread of the global tobacco epidemic. The purpose of this policy brief is to inform policy makers about the issues and concerns of tobacco related health hazards, and also to assist them in instigating and enacting effective legislations in the fight for tobacco control.

Mason T & Briggs V conducted case study on Anti tobacco programs for Aboriginal and Torres Strait Islander people .The Smoke check program was established it involves use of a culturally appropriate, evidence-based training package (including DVD, desktop tool and brochures) to train health professionals—including Aboriginal Health workers, nurses, doctors and other community workers—in the delivery of a brief intervention to assist smokers to quit.

So many studies conducted to assess the ill effects of tobacco, its prevention and made many strategies to prevent the tobacco related deaths.

Conclusion:

In our opinion, tobacco related deaths can be prevented by awareness among the tobacco user regarding the ill effects. Various planned teaching form and mass education can improve knowledge and change their attitude regarding consumption of tobacco.

REFERENCES

• Thun MJ et al. Prevalence of and Expenditure on Tobacco Products in Selected Parts of Maharashtra. American Journal of Public Health (2000); 85: 1223-30. | • Gajalakshmi V. R. Peto, T Kanaka, P Jha(2004). Smoking and mortality from tuberculosis and other diseases in India : retrospective study of 43000 adult male deaths and 35000 controls. The Lancet, 362(9383): 507- 515. | • Jha Prabhat, et.al. A Nationally Representative Case-Control Study of Smoking and Death in India. The New England Journal of Medicine 2008;358:1137-47. | • U. M. Bhojani and S. J. Chander, Tobacco use and related factors among pre-university students in a college in Bangalore, India. The national medical journal of india 2009; 22(6):500-501. | • Mirza Rustum Baig, Manoj Rajan. Effects of smoking on the outcome of implant treatment. Medicine. Chennai 2007;18(4): 190-195. | • Polit DF, Hungler BP, Nursing Research Principles & Method; 3rd edition. J.B. Lippincott Company 1999. | • Preber H, Kant T, Bergstrum J. Cigarette smoking, oral hygiene and periodontal health in Swedish army conscripts. J Clin Perio 1980; 7:106-113. | • Kowolik MJ, Nisbet T. Smoking and acute ulcerative gingivitis: a study of 100 patients. Brit Dent J 1983; 154:241-242