ORIGINAL RESEARCH PAPER

Sociology

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A STUDY ON THE KNOWLEDGE AND BELIEFS REGARDING PREVENTION OF LYMPHATIC FILARIASIS AMONG THE DISEASE AFFECTED PEOPLE IN SELECTED AREAS OF NELLORE DISTRICT OF ANDHRA PRADESH

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ABSTRACT

The term Filariasis came from the group of diseases occurs due to parasitic nematodes belonging to a super family called Filarioidea. Due to these parasites the adult worms' develops and they live in the lymphatic system and this is named as Lymphatic Filariasis (LF). LF is caused by mosquito species – Culexquinfasciatus and Mansonia annulifera/ M. Uniformis. The breed of these vector mosquitoes are identified in polluted water mainly in drains and ceptics and in the areas with inadequate drainage. The main objective of this study is to identify the knowledge and beliefs about the prevention of Lymphatic Filariasis among the disease affected people in selected areas of Nellore District, Andhra Pradesh. The present study concludes that the people with having good knowledge regarding preventive measures can be able to control lymphatic filariasis.

Introduction

The term Filariasis came from the group of diseases occurs due to parasitic nematodes belonging to a super family called Filarioidea. Due to these parasites the adult worms' develops and they live in the lymphatic system and this is named as Lymphatic Filariasis (LF). In humans the LF are caused due to these three parasites namely Wuchereria bancrofti, Brugia malayi and Brugia timori. Among these three parasites, Wuchereria bancrofti and Brugia malayi were found in India. Lymphatic Filariasis is caused by mosquito species – Culexquinfasciatus and Mansonia annulifera/ M. Uniformis. The breed of these vector mosquitoes are identified in polluted water mainly in drains and ceptics and in the areas with inadequate drainage.

In India, Wuchereria bancrofti is transmitted due to ubiquitous vector and Culexquinfasciatus is the most predominant infection caused due to mosquito species and it creates 99.4% of the problem in the country. This infection is predominant and more prevalent in both urban and rural areas. Though this disease is not fatal, it is more important to overcome because it causes personal trauma of the affected persons and it is associated to social stigma and causes financial burden to the affected family.

LF is an ancient disease and commonly known as elephantiasis which is a disfiguring and disabling disease acquired usually in childhood. In the early stages of this disease there will be no symptoms. In long run, there occur physical consequences which are more painful, swelling at legs, hands and limbs. The people suffering with this disease were unable to do their daily activities normally and they feel more difficult due to frequent infections.

Disease Burden in India

LF is an endemic disease occurred in all over 21 states in India (16 States and 5 UTs) across 256 districts. There are nearly 630 million people were at risk of this disease among the entire population in India.

As per the annual records received up to 2018, the total cases of LF in India were 12, 98,233 from 16 states and 5 UTs. In LF there occur two types of cases i.e., Lymphoedema and Hydrocele. Among 12, 98,233 cases 9, 03,835 cases were suffering with Lymphoedema and 3, 94,398 cases were suffering with Hydrocele respectively. Among the total case, 1,48,736 cases were suggested hydrocelectomy operation under morbidity management for the infected people in India.

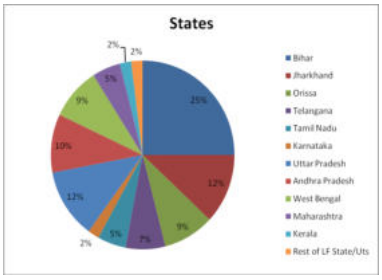


Fig 1: Lymphatic Filariasis: Lymphoedema cases in India (2018)

The above figure represents about the detail information in percentages regarding the cases suffering with Lymphoedema identified in India in the year 2018. Among these states, Bihar has the highest percent of cases (25%) and Kerala and Karnataka has least percent of cases (2%) when compared with other states in India which has Lympatic Filariasis cases.

Need for the study

Lyphatic Filariasis is a major problem along the globe. The social and economic courage are more in the tropics and subtropics of Africa, Asia, some parts of America and in Western Pacific. It affected over 120 million people in 80 countries. 304 million people are living in urban areas and 174 million people in rural areas. Hence, prevention of this type of disease has been a more challenging task. The main objective of this study is to identify the knowledge and beliefs about the prevention of Lymphatic Filariasis among the disease affected people in selected areas of Nellore District, Andhra Pradesh.

Description of the Tool

A questionnaire was framed to determine the transmission of Lymphatic Filariasis. The demographical variables of Age, gender, religion, educational and social status, occupation, and place of residence and source of information were considered.

Research Methodology

The research design is descriptive in nature. The study is

conducted in selected urban areas of Nellore District. A sample of 255 respondents has been selected using convenience sampling method.

Description of the Tool

This study has carried to identify the knowledge and beliefs about the prevention of Lymphatic Filariasis. A study questionnaire was formulated with the help of journals and text books and related articles. It consists of demographical characteristics and questions related to knowledge and beliefs in prevention of Lymphatic Filariasis were provided in that questionnaire.

Table 1: Preventive Measures taken by the respondents to control Lymphatic Filariasis

Preventive Measures to control Lymphatic Filariasis	Gender		Total
	Male	Female	
Avoids persons with disease	0	1	1
	0%	100%	0.39%
Clear breeding places of mosquitoes	61	136	197
	30.97%	69.04%	77.25%
Use personal protection	1	4	5
	20%	80%	1.96%
Blood test and prevention treatment	8	8	16
	50%	50%	6.27%
Both Avoids persons with disease and Clear breeding places of mosquitoes	1	1	2
	50%	50%	0.78%
Both Clear breeding places of mosquitoes and Blood test and prevention treatment	0	2	2
	0%	100%	0.78%
All the above	10	16	26
	38.46%	61.54%	10.20%
Don't know	4	2	6
	66.67%	33.33%	2.35%
Total	85	170	255
	33.33%	66.67%	100%

Fig 2: Preventive measures taken to control Lymphatic Filariasis

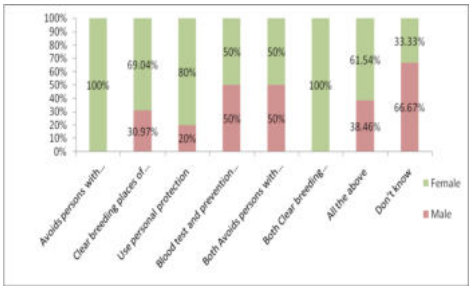
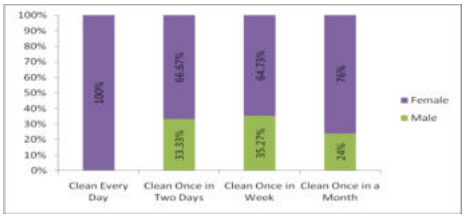


Table 2: Maintenance of Drainage System in the Living area

Maintenance of Drainage system in the Living area	Gender		Total
	Male	Female	
Clean Every Day	0	5	5
	0%	100%	1.96%
Clean Once in Two Days	6	12	18
	33.33%	66.67%	7.06%
Clean Once in Week	73	134	207
	35.27%	64.73%	81.18%
Clean Once in a Month	6	19	25
	24%	76%	9.80%
Total	85	170	255
	33.33%	66.67%	100%

Fig 3: Maintenance of Drainage system in the Living Area



Findings

- 77.25% (Table 1) of respondents taken the preventive measure to control lymphatic filariasis by Clear breeding places of mosquitoes.
- 50% (Table 1) of the male and female respondents agreed that blood test is the only preventive measure to control lymphatic filariasis.
- 80% (Fig 2) of female respondents agreed that they follow personal protection measures to prevent this disease.
- 81.18% (Table 2) of respondents agreed that the maintenance of drainage system was not proper and they clean only once in a weak.
- 76% (Fig 3) of female respondents agreed that the maintenance of drainage system was done only once in a month.

Conclusion

The control of lymphatic filariasis is done only with the proper preventive measures taken by the people. If proper awareness and preventive measures like clear breeding of mosquitoes and maintenance of drainage system is done properly, lymphatic filariasis can be controlled. The present study concludes that the people with having good knowledge regarding preventive measures can be able to control lymphatic filariasis.

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