

# Assessment of Knowledge on Noncommunicable Diseases among the Adult Patients who are Attending the Noncommunicable Diseases Outpatient Department in Government Head Quarters Hospital at Cuddalore

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## ABSTRACT

**Background:** Noncommunicable diseases (NCDs) are a group of diseases that affect individuals over an extended period causing a socioeconomic burden to the nation. According to the World Health Organization 2022, NCDs kill 41 million people each year, equivalent to 74% of all deaths globally. The objectives of the study were to assess the level of knowledge on NCDs and associate the level of knowledge on NCDs with selected demographic variables among adults.

**Materials and methods:** A descriptive research design was used for this study. The study population comprising all adults with age-groups between 35 and 55 years, including males and females who are attending a noncommunicable disease outpatient department in Government Head Quarters Hospital at Cuddalore. A convenient sampling technique was used to select 60 samples. The demographic data were collected from the sample, and a self-structured questionnaire was used to assess the level of knowledge on NCDs.

**Results:** The result revealed that out of 60 samples, 10(16.6%) subjects had inadequate knowledge, 47(78.3%) subjects had moderately adequate knowledge, and 3 (5%) subjects had adequate knowledge.

**Keywords:** Adult, Knowledge, Noncommunicable diseases.

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## INTRODUCTION

Chronic noncommunicable diseases (NCDs) cannot be transmitted from one person to another. They progress slowly and have a long duration.<sup>1</sup> Noncommunicable diseases are not communicable since they do not result from an (acute) infectious mechanism. They have a protracted course and do not end on their own.<sup>2</sup> The four primary categories of NCDs include diabetes, cancer, chronic respiratory disorders (including chronic obstructive pulmonary disease and asthma), and cardiovascular diseases (such as heart attacks and stroke).<sup>3</sup> In India, NCDs are currently the main factor in death and disabilities that may have been avoided. Cardiovascular illnesses like heart attacks and stroke, diabetes, chronic respiratory diseases, chronic obstructive pulmonary disorder, asthma, and cancer are the four major NCDs that have been identified.<sup>4</sup> The surpass communicable diseases, maternal, prenatal, and nutritional problems as the primary cause of death, accounting for almost 60% of premature mortality (WHO, 2014). The main causes of NCDs are lifestyle-related variables such as poor diet, physical inactivity, alcohol, and cigarette use.<sup>5</sup> Sharp increases in the prevalence of NCDs are being caused by changes in lifestyle, behavioral patterns, demographic, sociocultural, and technological improvement.<sup>6</sup> Most diseases can be avoided by simply altering our habits or by making small modifications to how people live their lives.<sup>7</sup> Aging, unplanned growing urbanization, and globalization of unhealthy lifestyles are some of the reasons behind the disease. For instance, the globalization of unhealthy foods and lifestyles may manifest as obesity, high blood pressure, increased blood sugar, and high

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lipid levels. They are referred to as "intermediate risk factors that may lead to cardiovascular diseases."<sup>8</sup> Noncommunicable diseases account for 60% of all fatalities in India. Coronary heart disease, stroke, hypertension (45%), chronic respiratory disease (22%), cancer (12%), and diabetes are the four leading causes of NCD fatalities.<sup>4</sup> Noncommunicable diseases are most frequently caused by poor lifestyles and unfavorable physical and social surroundings, poverty, a poor diet consisting of foods high in fat, salt, and sugar, inactivity, cigarette use, excessive alcohol consumption, and stress are all well-known risk factors.<sup>9</sup>

## NEED FOR THE STUDY

Noncommunicable diseases account for 41 million annual deaths or 74% of all fatalities worldwide.<sup>10</sup> About 17 million people worldwide pass away from NCDs each year before age 70; 86% of these untimely deaths occur in low- and middle-income nations.<sup>11</sup> The majority of 17.9 million people per year are caused by cardiovascular illnesses, followed by malignancies (9.3 million), chronic respiratory diseases (4.1 million), and diabetes (2.0 million).<sup>12</sup> A descriptive study was conducted on the evaluation of elderly residents in a Bengaluru urban area's knowledge of NCDs. There were 245 study participants in all, including both genders. Data were gathered on sociopersonal traits and knowledge about NCDs using a pretested semistructured pro forma. In this study, 12 prevalent NCDs were taken into account, including breast cancer, oral cancer, cervical cancer, and prostate cancer as well as anemia, coronary artery disease, stroke, cataract, and osteoporosis. Of the 245 participants in the study, 64.9% were in the 60–69 age bracket, 69% were women, 53.5% were Hindus, 93.5% had only completed secondary school, and 72.7% did not have a job. The third-generation family made up 46.9% of the population. According to the study, 52.7% and 61.6% of participants knew what diabetes was. All individuals had little knowledge of other NCDs that were taken into account in the study.<sup>13</sup>

## OBJECTIVES

- To assess the level of knowledge on NCDs among adults.
- To associate the level of knowledge on NCDs with selected demographic variables.

## MATERIALS AND METHODS

The study employed a quantitative research strategy and descriptive design. A population made up of all persons, both sexes, who go to the headquarters hospital's NCD outpatient department. About 60 adult patients who met the inclusion criteria were chosen using a convenient sampling technique. Adults 35–55 years old, both males and females, who agreed to participate in the study and speak Tamil and English, as well as adult patients without NCDs, were required to meet the inclusion criteria. Participants in the study give their formal consent after being given all the information. All of the samples were given an explanation of the goals. The interview technique was used to get the demographic information from the samples. A self-structured questionnaire was used to evaluate knowledge, and descriptive and inferential statistics were used to analyze the collected data.

## RESULT

Out of 60 samples, 27(45.5%) are in the age-group between 35 and 40 years, 54 (90%) are female, 15 (25%) are educated up to secondary education, 27 (45%) are doing daily work, 21 (35%) are earning Rs. 5,000, 42 (70%) are Hindu by religion, 44 (70%) are married, 41 (68%) are living in a rural area, 44 (73%) of them are not having a history of smoking habits, 54 (90%) are also not having a history of alcohol, 35 (58%) are a moderate worker, 27 (45%) never do the exercise, 50 (83%) are nonvegetarian, 24 (40%) are taking nonveg diet weekly once, 24 (40%) of the samples are consuming fruit and vegetables weekly twice, and 35(58%) are taking tinned food item.

Figure 1 shows the level of knowledge on NCDs among adult patients who were attending the communicable disease outpatient department in the Head Quarters hospital. Out of 60 samples, 16.6% of samples had inadequate knowledge, 78.3% of samples

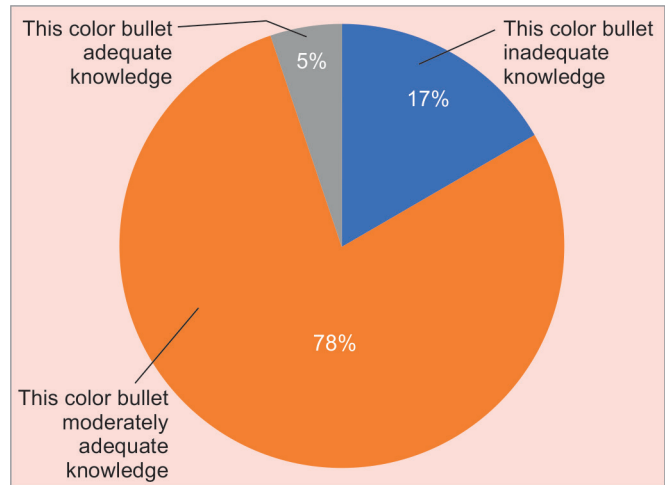


Fig. 1: Level of knowledge on NCD among adult patients who were attending the noncommunicable disease outpatient department

had moderately adequate knowledge, and 5% of samples had adequate knowledge.

Regarding associations, there is a strong link between the length of time a person has consumed nonvegetarian foods and their level of knowledge of NCDs. There is no significant association with other demographic variables.

## DISCUSSION

Noncommunicable diseases, which include chronic respiratory diseases, cancer, diabetes, and cardiovascular diseases, are the world's leading cause of death, accounting for just over 70% of all fatalities.<sup>14</sup> These NCDs share significant behavioral risk factors that can be modified, such as tobacco use, poor diet, inactivity, and harmful alcohol use, which result in overweight and obesity, elevated blood pressure and cholesterol levels, and ultimately diseases.<sup>9</sup> They continue to be an important public health challenge in all countries, including low- and middle-income countries where more than three-quarters of NCD deaths occur. To effectively combat NCDs and their primary risk factors, it is essential to have a thorough understanding of the situation and development within each individual country. There are feasible and affordable interventions that can be used to lessen the burden and effects of NCDs today and in the future. Global benchmarking of progress against NCDs is made possible by tracking the implementation of a crucial set of tracer activities connected to these interventions. It also serves to highlight issues and regions that require more attention.<sup>15</sup>

This study report reveals the level of knowledge on NCDs among adult patients who were attending noncommunicable disease outpatient department in the headquarters hospital. Out of 60 samples, 16.6% of samples had inadequate knowledge, 78.3% of samples had moderately adequate knowledge, and 5% of samples had adequate knowledge. There is a significant association between the level of knowledge on NCD and the duration of nonveg intake. There is no significant association with other demographic variables.

## LIMITATIONS

The study was limited to assessing the level of knowledge of adults. The study was limited to 60 samples.

- The study was limited to adults in the age-group of 35–55 years.

## RECOMMENDATIONS

- A similar study can be conducted as a survey method to find the prevalence of the NCD.
- A similar study can be conducted as an experimental design with proper nursing intervention with the control group.

## CONCLUSION

Overall knowledge regarding NCDs is moderately adequate among the adults attending noncommunicable disease outpatient department. As a result, disadvantaged groups like low-income individuals and those who do not obtain information from medical professionals need to be targeted through a complete health promotion plan and specific initiatives.

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