

Knowledge on common geriatric health problems among the rural people of Modhukhali

Afroz S¹, Catherine S², Zaman F³, Biswas K⁴

Abstract

The growing number of older people is an emerging challenge for Bangladesh because of experiencing age structural transition. Older people are vulnerable to various health problems as various geriatric health problems come naturally with old age. Until now a very little attention has been paid on this issue in Bangladesh. The objective of this study is to assess the self reported knowledge status of the people at Modhukhali. For this purpose a cross sectional study was conducted. With the aid of a preformed interview schedule data was collected from a purposively selected sample of 342 respondents. It was revealed from the study that most of the respondents, about 85.38% were Muslims. Literacy rate of rural people of Modhukhali was poor. The result indicates that about 39.76% people were illiterate, but most of the respondents were aware of the major geriatric health problems.

The study revealed that about 92.98% people knows about cataract, 94.44% people knows about hearing defect with their aging. About 91.52% people know about hypertension & cardiovascular system related diseases. Majority of people 72.80% has knowledge about developing cancer after 40 years . Most of the people, about 76% has knowledge about Diabetes mellitus & it's consequences .Though the majority of the people are illiterate, they have a good knowledge about the common health problems occurring in old age. It may be the result of attending health education program already running in this area. Data shows that about 73.09% people attended the health education program.

The Geriatric health services of the country has been improved by some years but yet there are some lack in rural areas. The health education program about geriatric health should be run in rural areas. The young & middle aged people, who might be the sufferer of these health related problems should be aware before they get the disease. The number of health workers should be increased. Govt. should allocate budget and organize skillful training facility to these entire health service providers. On this purpose there is also need for strong supervision and monitoring of the geriatric health care services throughout the country.

Key Words : Common geriatric health problems, Aging, Prevention, Life style,

Introduction

Ageing is a natural process. In the Words of Seneca; "old age is an incurable disease", but more recently, Sir James Sterling Ross commented, "You do not heal old age. You protect it; you promote it; you extend it".¹ The word "geriatrics" was coined by Ignatz L Nascher in 1909. Gerontology is the science of ageing while geriatrics refers specifically to the problems associated with ageing.⁴ Old age should be regarded as a normal inevitable biological phenomenon. No one knows when old age beings. It varies from person to person. It can be said that old age occurs incase of women 45-

55 years & in case of men 55-75 years.² In the year 2002, there were an estimated 605 million old persons in the world of which 400 million are living in low income countries. Italy & Japan have the highest proportion of older person. By 2025, the number of elderly people is expected to rise more than 1.2 billion with about 840 million of these in low income countries. In India, although the percentage of aged person to the total population is low in comparison to the developed countries, nevertheless the absolute size of aged population is considerable. For the year 2003 the Sample Registration System (SRS) estimate are 7.2% of total population were above the age of 60 years.¹

In the 21st century ageing population and their health has become a growing health and social care concern all over the world. This is because of an increase in the absolute and relative numbers of older people in both developed and developing countries. In recent studies, there were 600 million people aged 60 years and above in the world in 2000. By 2025, this figure would double to about 1.2 billion people and by 2050 there will be projected 2 billion aged population with 80% of them living in developing countries. The fast growing numbers and proportion of elder people is alarming as greater percentage of people will enter a period of life where the risk of developing certain chronic and debilitating illness will be considerably higher. Age related illness affect the majority of the elderly and seriously impair

1. Dr. Shahana Afroz, Assistant Professor, Department of Community Medicine, Diabetic Association Medical College, Faridpur.
2. Dr. Shukti Catherine Baroi, Lecturer, Department of Community Medicine, Diabetic Association Medical College, Faridpur.
3. Dr. Fouzia Zaman, Lecturer, Department of Community Medicine, Diabetic Association Medical College, Faridpur.
4. Dr. Kowmudi Biswas, Lecturer, Department of Community Medicine, Diabetic Association Medical College, Faridpur.

Address of correspondence:

Dr. Shahana Afroz; MBBS, MPH
Assistant Professor, Department of Community Medicine
Diabetic Association Medical College, Faridpur.
Email: ds_afroz@yahoo.com, Cell: +8801753944555

the quality of life.³ The "biological age" of a person is not identical with his "Chronological age". It is said that nobody grows old by living a certain number of years. Our knowledge about the ageing process is incomplete. We do not know much about the disabilities incident of the ageing process. However the following are some of the disabilities occurring around the world are-senile cataract, glaucoma, nerve deafness, osteoporosis, emphysema, failure of special senses, changes in mental outlook, degenerative disease of heart and blood vessels, cancer, disease of locomotor system, chronic bronchitis, enlargement of prostate, frequent and urgency of micturition, hearing loss, genitourinary disorders, psychiatric problems, diabetes, hypercholesterolemia, kidney disease, skin disease and liver disease.³

The common geriatric health problems among the people of Asia and South-East Asia are coronary artery disease, peptic ulcer disease, hypertension, stroke, diabetes mellitus, malignancies, chronic renal failure and chronic obstructive pulmonary disease.⁵

Currently older people account for about 7% of the country's total population, amounting to roughly 10 million people. By 2020, the 60+ population will account for 20% of the total population.⁶

The common geriatric health problems in Bangladesh are- ischemic heart disease (56.5%), diabetes mellitus (41%), hypertension (39%), rheumatoid arthritis (13%), GIT problems (12%), kidney disease (11%), skin disease (9%), liver disease (8%), asthma (7%), joint pain (7%), muscle pain (4%), tremor (4%).³

Health problem of the aged

1. Problem due to the ageing process: senile cataract, glaucoma, nerve deafness, osteoporosis affecting mobility, change in mental outlook.
2. Problem associated with long term illness:
 - (a) degenerative disease of heart & blood vessels, cancer, accident, diabetes
 - (b) disease of locomotor system such as fibrositis, neuritis, myositis, gout, rheumatoid arthritis etc.
 - (c) respiratory illness such as asthma, pneumonia, COPD.
 - (d) genitourinary system: enlargement of the prostate, nocturia, dysuria, frequency & urgency of micturition.
3. Psychological problems: mental change such as impaired memory, rigidity of outlook, sexual maladjustment, emotional disorders, etc.
4. Others: delirium, impaired vision, depression, feeling of loneliness and sleep disorders.

Factors related to geriatrics

1. Diet & nutrition : High intake of saturated fat & trans-fatty acid have been linked to raised cholesterol level in

the blood that leads to development of cardiovascular disease. To prevent such problem one should intake calcium rich food, high fibre, fruits, vegetable, intake of high fat diet, salt and sugar should be reduced.

2. Exercise: It helps in maintaining a good health, lowers blood sugar level, lowers blood pressure, relieves stress, sleep disorders, improve emotional well being and improve bone density.
3. Weight: obesity is a major risk factor of development of heart disease, diabetes & stroke.
4. Smoking: 20% of men, 18% of women aged 65-74 years in developed countries are smoker. Cessation of smoking at the age of 50 years reduces the risk of dying within the of smoking next 15 years by 50%.
5. Alcohol: linked to liver disease, gastric ulcer, gout, depression, heart disease, diabetes and hypertension.

Methods

It was a descriptive type of cross sectional study with the objective to assess the knowledge on common geriatric health problems among the rural people of Modhukhali.

The survey was carried out in different villages in Modhukhali Upazilla, Faridpur. People of Modhukhali Union of Modhukhali Upazilla were purposively chosen to constitute the study population for the present study the sample size was 342. A non-random purposive sampling technique was adopted to select the respondents from the study population to collect information. A resident person of a village community was chosen as respondent for the present study. Respondents were chosen purposively and convenience of the data collector was given priority during survey.

Data were collected from the respondents by face to face formal interview.

A pre-formed interview schedule (Questionnaire) was used as the instrument of data collection for the proposed study.

At first the interview schedules were rechecked to reduce the errors if any. Secondly necessary corrections were made. Thirdly the responses were coded adequately. Fourthly a master sheet was prepared based on variables used in the study. Finally necessary tabulations were prepared from the master sheet.

Results

The study was intended to find out the knowledge on Geriatric Health Problems of the rural people of Modhukhali. the study revealed that about 92.98% people knows about cataract, 94.44% people knows about hearing defect with their aging. About 96.49% people know about disturbed mobility. About 91.52% people know about hypertension & cardiovascular system related diseases. Majority of people 72.80% has knowledge about developing cancer after 40 year. Most of the people, about 76% has knowledge about Diabetes mellitus & its consequences. The study also shows

that 94.44% people know about respiratory diseases. Major people 61.69% has knowledge about disease related to urinary system but a few 27.48% people knows about prostate cancer. About 97.66% people know about impaired memory with growing age & 77.48% people know about suffering depression with aging.

The study also reveals that about 90.93% people knows that good diet can reduce the chance of developing cancer & about 95.90% people is aware of the importance of exercise. About 72.22% knows about the demerits of smoking & 68.12% people knows about the demerits of drinking alcohol, 79.53% thinks that involving in social activities help to maintain health in old people. This indicates that majority have a knowledge about the steps prior to prevention of disease. Though majority of people 39.76% are not educated, which was discussed above, they have knowledge about diseases of old people as well as the preventive measures.

This indicates that the health education program run by the health worker became successful enough in this area, because about 73.09% people attend the health education program.

Table 1: Knowledge about hypertension in old age. (n=342)
Table shows that, majorities 91.52% have knowledge about

Hypertension	Number	%
Known	313	91.52
Not known	29	8.48
Total	342	100

hypertension & 8.48% have no knowledge about hypertension in old age.

Table 2: Knowledge of vulnerability to accident at home. (n=342)

Vulnerability to accident	Number	%
Known	310	90.64
Not known	32	9.36
Total	342	100

Table shows that, majorities 90.64% have knowledge about the vulnerability of accident at home & 9.36% have no knowledge in this regard.

Table 3: Knowledge about occurring 75% of diabetes over 50 years of age.(n=342)

Knowledge about occurring 75% of diabetes over 50 years of age	Number	%
Known	264	76.30
Not known	78	23.70
Total	342	100

Table shows that, 76.30% of study population knows that 75% cases of diabetes mellitus occur over 50 years of age. 23.70% have no knowledge about it.

Chart 1: Knowledge about respiratory diseases occurring in old age. (n=342)

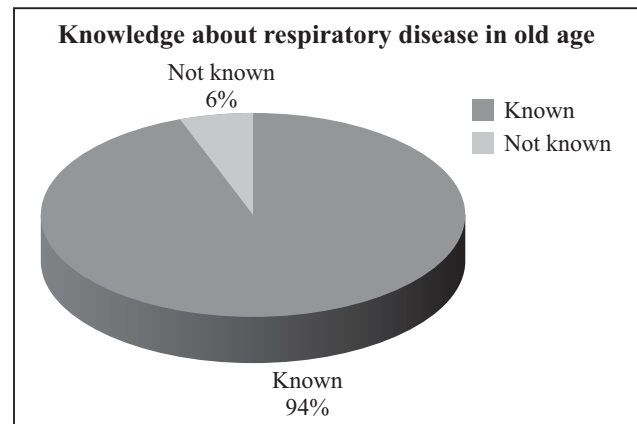


Chart shows that, 94.44% have knowledge & 5.56% have no knowledge about respiratory diseases occurring in old age.

Chart 2: Knowledge about reducing the chance of developing disease by exercise. (n=342)

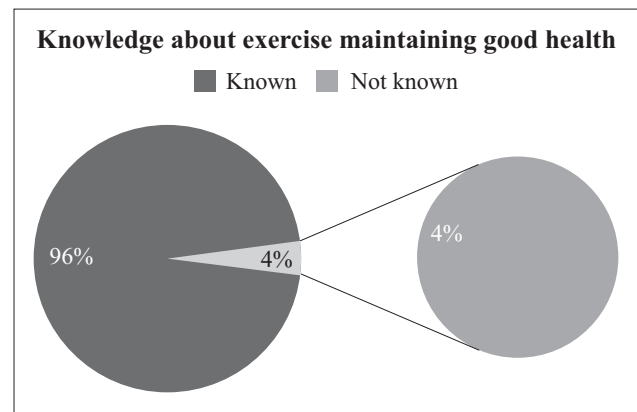


Chart shows that, 95.90% have knowledge about exercise maintaining good health & 4.10% have no knowledge about it.

Discussion

The result showed that about 44.15% people belonged to 41-50 years of age group. About 32.16% respondents were in the age group of 51-60 years & about 15% respondents were in the age group of 61-70 years. The study showed that most of the respondents (about 85.38%) were Muslim (similar to total population of Bangladesh, where 90.4% are Muslim)⁷. Literacy rate of rural people of Modhukhali was poor. The result indicates that about 39.76% people has no education & about 38.88% people were at least primary level passed. In rural areas, (at national level 45.21% did not pass class I and 21.84% have education of primary level)⁸

parents became aware of the need for education but poverty is the main obstacle. The result showed that majority 55.55% families had monthly income taka 0-10000 & only few families had good income. (average monthly income per household at current price was estimated at taka 11,479)⁸. So, the findings suggests that majority of the people in modhukhali live under mid socio- economics condition. (The per capita income of people of Bangladesh is 1314 \$)¹⁰. The finding regarding economical status of the study area is comparatively similar to other rural areas of Bangladesh.

Majority of people 39.47% lives in tin made houses. (41.89% of household live in katcha durable housing structure with the wall and roof made of tin)⁹ The people have pure tube well water supply about 99.12% (at national level 85.37% use tube-well water).⁹

According to National Survey, the study revealed that about 92.98% people knows about cataract, 94.44% people knows about hearing defect with their aging. About 96.49% people know about disturbed mobility. About 91.52% people know about hypertension & cardiovascular system related diseases. Majority of people 72.80% has knowledge about developing cancer after 40 year . Most of the people, about 76% has knowledge about Diabetes mellitus & its consequences. The study also shows that 94.44% people know about respiratory diseases. Majority people 61.69% has knowledge about disease related to urinary system but a few 27.48% people knows about prostate cancer. About 97.66% people know about impaired memory with growing age & 77.48% people know about suffering depression with aging.

The finding is too encouraging & indicates that the rural old people are aware about the geriatric health problems. About 85.08% people think that arranging health education program about geriatric health program is necessary.

Conclusions

Normally it is seen that the rural people have some limitations in getting the health related knowledge. But

according to this study, the majority of people of village Modhukhali have knowledge about the health related problems at old age. The rest of people, who know a little about geriatric health problem, it is important to have the appropriate knowledge for the sake of their improvement.

Elderly people are a major portion of our nation. We all know that healthy people form healthy nation. To bring this we hope that govt. will give emphasis on the spread of information on health issues to every corner of the community focusing the rural people to improve the geriatric health in near future. Increased knowledge may increase their desire to be healthy as much as possible.

References

1. Park's Textbook of Preventive & Social Medicine, 21st edition, K.Park
2. Wendy, Wikipedia, organisations/wiki/Geriatrics
3. International Journal of Pharmaceutical Science Review & Research; website WWW.globalresearchonline.net
4. MC Gupta & BK Mahajan
5. World Health Organization, Regional Office for South East Asia, New Delhi.
6. Bangladesh Health Scenario: The elderly in Bangladesh Tuesday, 10th April 2012.
7. Population Census 2011.
8. Report of the household income and expenditure survey 2010, Bangladesh Bureau of Statistics.
9. BBSC (Bangladesh Bureau of Statistics Recent)
10. Prothom-alo, Dated: 16th May 2015.