

KNOWLEDGE REGARDING MANAGEMENT OF HYPERTENSION AMONG ADULTS

Dr. S. Mahalakshmi^{1*}

Abstract:

Hypertension is one of the leading causes of death in developed & developing countries. The increased prevalence rate is 20-40% in urban adults and 20-30 in rural adults.

Hence a study was conducted to find out the knowledge regarding hypertension Objectives To assess the level of existing knowledge regarding hypertension among adults to find out the association between knowledge with the selected demographic variables. Methods a descriptive approach was adopted and the study with 50 adults Non probability convenient sampling technique used self structured questionnaire was used as a tool and collected information. Results The data analysis was done by using descriptive and inferential statistics.13 samples had moderately adequate knowledge and 35 samples had inadequate knowledge and 2 samples had adequate knowledge Conclusion: After collected data module distributed to the samples. It consists of do' and don'ts for hypertension. After the study samples knowledge increased by distributed the module. Nurses need to educate the community to these type of guidance to improve their health.

Key words: knowledge, hypertension, adults.

^{1*}VP, Prof & HOD CHN Dept, Cheran College of Nursing, Coimbatore, Tamil Nādu Dr. M.G.R Medical University, Chennai, Tamil Nādu Dt.

*Correponding Author: Dr. S. Mahalakshmi

*VP, Prof & HOD CHN Dept, Cheran College of Nursing, Coimbatore, Tamil Nādu Dr. M.G.R Medical University, Chennai, Tamil Nādu Dt.

DOI: - 10.48047/ecb/2023.12.si10.00157

Introduction

Hypertension is a major chronic life style disease and an important public health problem.

It is a silent killer as patients are of tena symptomatic .Detection and treatment delays may occur which may result in the development of target organ damage and other debilitating complications World health organization (2012) estimated that 970 million people World wide have elevated blood pressure. In the developed world about 640 million in the developing world.

Hypertension is one of the most important causes of premature death World wide and the problem is growing. It is estimated that there will be 1.56 billion adults living with high blood pressure in 2025.

Statement of the problem

Astudy to assess the knowledge on hypertension among adults residing in Nattham village at Kancheepuram District, Chennai.

Objectives

To assess the level of knowledge regarding hypertension among adults residing in Nattam village at Chennai

To find out the association between knowledge with the selected demographic variables.

Hypothesis

There is a significant difference among adults knowledge about the hypertension after the study of major findings.

Materials and Methods

Research approach quantitative research used and research design Non experimental design was selected for this study to assess the knowledge level on hypertension. Independent variable knowledge on hypertension, (module), Dependent variable was clients with mild and moderate hypertension. The study was conducted in Nattam village, Chennai. The study population adults (male and females) the age group of 30-65 years were residing in Nattam village the study participants who fulfilled the inclusion criteria such as understand in Tamil and English, who are willing to participate in the research study after informed consent. Adults (male and female) who had any other disorder for eg. Kidney disease, DM, severe hypertension and below 30 years were excluded. The study samples 50 hypertensive clients were participated in the study.

Development and description of the tool

The tool for the data collection consisted of two parts. Part A- Data collection tool which had section A which deal with demographic variables of hypertensive clients such as age, gender, place of residence, education, occupation, monthly income, religion, type of family, marital status, dependence, personal habits, food habits, past history of illness, history of medication, duration of medication, family history of hypertension, height, weight,BMI. Section B: consisted of selfstructured questionnaires, it consists of 25 questions related to knowledge of hypertension. It includes general about hypertension, causes, pathophysiology, signs & symptoms, diagnostic methods, treatments, diet, prevention methods and complication of hypertension.

Procedure for data collection

The investigator obtained formal permission the Research guide, Principal, Vignesh College of Nursing and the President, Natham village, Chennai. The investigator met the samples in their own residence and brief explanation given regarding the purpose of the study and consent was obtained from them. Confidentiality of the information was reassured.

During the research study the demographic variables were collected by using a direct interview to each sample and followed by self structure questionnaire 25 numbers& administered to clients with hypertension and explained to them the right answers scored one mark and wrong answer scored 'o' mark it took 15 minutes the study period was ten days and after received all the information the (do's and don'ts) module distributed to the study samples. Descriptive and inferential statistics were used for data analysis.

Ethical Considerations.

Ethical consideration maintained by research guide and the investigator, consent was obtained from the study participants and confidentiality of the clients were maintained throughout the study.

Results

The study findings shows that 13(26%) samples had moderately adequate knowledge and 35(70%) samples had inadequate knowledge & 2 (4%) samples had adequate knowledge of hypertension. The overall mean value of the level of knowledge was 9.24 & the SD 4.29 The calculated t value 11.048 at the p<0.001 which shows the significant difference after the study.

The table 1 show the level of knowledge on hypertension among adults residing in Nattam village and Fig 1 show the percentage and frequency distribution on knowledge on hypertension

The table 2 shows the overall mean, SD and the level of significance.

The study was found that there was statistical significant association of demographic variables such as age, education, occupation and source of information were significant the other variables

religion, monthly income, height, weight, BMI, habitant, type of family and food habits showed nonsignificant with their knowledge on hypertension.

Table- 1 Percentage and frequency distribution on level of knowledge on hypertension

	KNOWLEDGE ON	INADEQUATE		MODERATELY		ADEQUATE	
S.NO	HYPERTENSION	KNOWLEDGE		ADEQUATE KNOWLEDGE		KNOWLEDGE NO %	
		NO	%	NO NO	EDGE %	NO '	% 0
1	50	35	70	13	26	2	4

Figure -1 Percentage distribution of level on knowledge of hypertension N=50

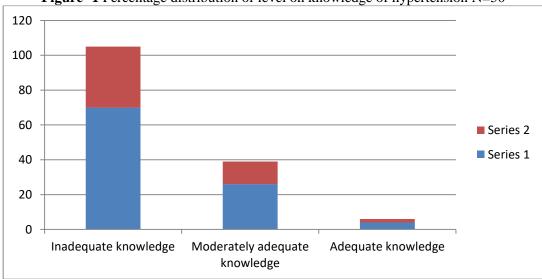


Table – 2 The overall mean value of the level of knowledge and SD and t value

ľ	knowledge and 3D and t value							
	MEAN	SD	'T' Value					
	9.24	4.29	11.048 p<0.001					

Discussion

The study results revealed that 70% had inadequate knowledge, 26% had moderately adequate knowledge 4% had adequate knowledge on hypertension. This study finding related to the following study conducted by Huang s et al., (2010) and Humayum et al (2009). Result of those studies showed the purposes to increase knowledge related risk factor & management of hypertension among community people these type of studies is useful to reduce the level of morbidity and mortality due to hypertension.

Limitations

The investigator had difficulty to collected data and controlling the group during monitor their blood pressure.

Conclusion.

The present study conducted by the investigator, mainly focused on the assessment of the knowledge on hypertension to reduce the risk, complication and reduce the mortality among *Eur. Chem. Bull.* 2023, 12(Special Issue 10), 1318 – 1321

clients with hypertension. The study revealedthat the community based assessment of knowledge was essential and it improving the health status of the hypertensive clients.

Sources of Support: NIL Conflict of interest: NIL

References

- 1. Joyce M, Black (1999), "Text book of Medical Surgical Nursing"6th education, Ihart court publication page no 184, 137 & 1398.
- 2. Phipps (1999) Medical Surgical Nursing 6th edition, Mosby publication page no 760-770.
- 3. Brunnor & Suddarth's "Medical Surgical nursing", 12thedn, volume 1 Lippincott Williams & Williams publication page no 684-689.
- K.Park (2011),"Textbook of Preventive and Social Medicine,21stedn, Banarsidas Bhanot Publication page no 344-348
- 5. B.K. Mahajan (1997) methods in biostatistics (6th edition) new delhi, jaypee brothers.
- 6. Mastering, "Text book of medical surgical nursing for disorders and treatment nursing tips and guidelines, patient teaching and outcomes(1998)" spring house publishers" mathers 7 cahil-page no 98-103.

- 7. G.M. Dhaar, I Robban-"foundation of community medicine", (2006, 1st edition), Elsevier publications- page no-772-777.
- 8. World health statistics 2012, page no 12
- 9. Nightingale Nursing times- volume 8,no .3, June 2012
- 10.www. Pub med.com
- 11.www.hypotensio journals'or/external teef
- 12.www.care.htjournals.