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A STUDY ON KNOWLEDGE ON THE IMPORTANCE OF THE PERIODIC HEALTH CHECK UPS AMONG ELDERLY PEOPLE IN BANGALORE CITY URBAN AREA

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Introduction

"Old age is the range of ages nearing and surpassing the life expectancy of human beings; it is the end of the human In the last three decades, the life cycle." drivers for progress have accelerated, though standards for safer and efficient practices in the health profession have been changing continuously for a long time. There is a special need for a continuous and authoritative assessment of standards for both preventive and therapeutic approaches. Although elderly people faces more problems in their day today life and continuous assessment is an essential component in their life due to various factors like life style changes, change in food habits, environmental factors etc. Periodic Health Check-up includes history-taking, physical examination, and laboratory testing, which is a standard primary care procedure offered by medical facilities to all individuals of various ages even for the non-complaining people. To manage chronic diseases, which take the lives of 9 million individuals under the age of 60 each year worldwide, it is essential to get periodic health checkups, Chronic diseases, such as cancers, chronic respiratory diseases, cardiovascular diseases, and diabetes mellitus etc., are long-lasting and typically proceed

slowly; The detection of a particular illness and the improvement of overall wellbeing are main objectives of the health checkups. People with higher levels of education are more likely to recognize the value of preventative care and regular health visits. It is unclear how useful periodic health checkups are in preventing disease. Even so, the regular health visits has developed into a well-established health service because both doctors and the general public believe in its advantages. Periodic health checks are useful and successful in finding new instances and avoiding serious problems from early management, but it could also be risky because all forms of health examination have the potential to be harmful for example a false-positive test can result in more intrusive diagnostic tests along with that false-negative results could give patients a false impression of their current health condition and put off necessary medical care.

Review of literature

Studies related to stress of Paramedical students:

The Randomized control study was conducted to evaluate the effectiveness of

meditation to decrease stress among Paramedical students of Bhavana College of Paramedical Telungana [2015]. The result shows that there is significant difference between the level of stress in both the groups [for experimental group-36.54%, control group-56.86%]. They also suggest that meditation based stress management practices reduces stress.

A cross sectional study was conducted to assess the stress experienced by 273 students in Tamole Paramedical training college at Ghana [2015]. The result indicates that severe stress [67.82%] is seen among Paramedical students and demographic variables that cause alterations in there stress level are gender and marital status.

A cross sectional study was conducted at Macho [2015] among 203 Paramedical students to assess the stress level in clinical learning environment. The result shows that clinical [3.44%], education [3.35%], finance and time [3.31%], confidence [3.21%] and personal problems [3.03%] are the most common factors of stress and the level of stress is very high than mean level.

A descriptive study was conducted at Baba Farid University of health science Punjab [2015] among 180 students to assess their stress and coping strategies. The result shows that 34% of Paramedical students found severe stress, 33% have moderate stress and the major coping strategies used to reduce stress are yoga and meditation.

Another descriptive, cross sectional study was conducted at Jordan University of science and technology on 597 Paramedical students, to find the sources of stress and coping behaviour in clinical practice [2014]. The result shows that 47.82% students have stress and the main sources of stress are from academic.

A cross sectional study was conducted at Haryana among 282 students to assess perceived stress and ability to cope stress [2013]. The result shows that 39.7% had more stress and could not cope with it. 23.7% fairly able to control irritations and feels mild range of stress. Only 28.4% felt confident about ability to handle their personal problems.

A descriptive study was conducted in Punjab [2011] on 200 Paramedical students to assess the factors associated with stress among them. Study result shows that environmental factors such as change in living environment, inadequate telephone facility, inadequate recreational 40% facilities lead of to stress; interpersonal factors such homesickness, sleeping pattern, etc., cause 30% of stress and academic factors lead to 19% of stress.

METHODOLOGY

The research methodology is a way to systematically solve the research problem. It may be understood as a science of studying how research is done It significantly. includes research approach, research design, setting, population, sampling technique, sample size, selection criteria, development and description of tool for data collection, data collection method and plan for data analysis.

This chapter explains the methodology used to assess the level of knowledge about periodic health visit among elderly in Bangalore. It includes researce approach, sample size, research design, selection criteria, development and description of tool for data collection, method and plan for data analysis.

Result and analysis

Organization of data

The findings based on descriptive and inferential statistical analysis are presented under the following headings:

Section A: Description of baseline characteristics

Section B: Distribution of knowledge on periodic health check up.

Section C: Distribution of knowledge on age related quieres.

Section D: Interest on doing periodic health checkups.

Presentation of Data tec

Section A: Description of baseline characteristics

The study comprised of 300 random people in Bangalore based on their specified inclusion criteria. The sample characteristics of random people were analyzed using descriptive statistics. The baseline characteristics are age, residential, family, education, type of sector where person is working.

TABLE 1:- Frequency and percentage distribution of demographic variables n=100

| Sl | Demographic | Fre | Percentage |
|-----|-------------|--------|------------|
| No. | variables | quency | |
| 1. | Age | | |
| | 30-40yrs | 80 | 26.67 |
| | 40-50yrs | 130 | 43.33 |
| | 50-60yrs | 90 | 30 |
| | - | | |
| 2. | Home | | |
| | location | | |
| | Urban | 180 | 60% |
| | Rural | 120 | 40% |
| | | | |
| 3. | Family | | |
| | Nuclear | 230 | 76.67% |
| | Joined | 70 | 23.33% |
| | | | |

| 4. | Education Under graduated Graduated | 245 55 | 81.67 18.33 |
|----|--|-----------|----------------|
| | 5. Job Sector Medical field Non medical field | 280 20 | 93.33 6.67 |

Table 2 : Age

| Sl No. | Age | No of Students | Percentage |
|-----------|-----------------------|-------------------|------------|
| 1. | 30-40 yrs 40-50yrs | 80 | 26.67% |
| | 40-50yrs | 130 | 43.33% |
| | 50-60 yrs | 90 | 30% |
| | | | |

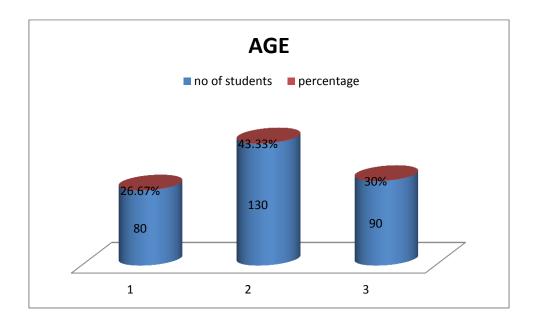


Figure 1:Age

Figure 1:-Percentage of distribution of subjects based on age

Figure 1 show, among 300 random personals in Bangalore Urban area belongs to 30-40 yrs, 40-50 yrs and 50-60 yrs.

Table 3: Residential

| home location | | | |
|---------------|-----|-----|--|
| Urban | 180 | 60% | |
| Rural | 120 | 40% | |

Figure 2: Residential

Figure 2:- Percentage distribution of subjects based on residence

Figure 2 shows among 300 random personals in Bangalore are residing at urban as well as rural areas.

Table 4: Type of family

| Family | | |
|---------|-----|--|
| Nuclear | 220 | |
| Joined | 80 | |

Figure 3: Type of family

Figure 4:- Percentage distribution of subjects according to type of family

Figure 4 shows, among 300 random personals in Bangalore Urban area belongs to nuclear family and belong to joint family.

Table 5 : Education

| Education | | |
|-----------|-----|--|
| Under | | |
| graduate | 200 | |
| Graduated | 100 | |

Figure 4:Percentage of people with graduation and not.

Figure 4:- Percentage distribution of education

Figure 4 shows, among 300 random personals in Bangalore Urban area underwent what kind of education, under graduation or graduation.

Table 6 : Job Sector

| Job Sector | | |
|------------|-----|--|
| Medical | | |
| profession | 230 | |
| Non meal | | |
| profession | 70 | |

Figure 5: Job sector

Figure 5:- Percentage distribution of subject on type of job involved

Figure 4 shows, among 300 random personals in Bangalore Urban area belongs to medical and non medical sector.

DISCUSSION, SUMMARY AND CONCLUSION

This chapter with deal the discussion, summary of the study, conclusion and their implications in our day today life and to enhance the standard of life by upholding the life expectancy. It also makes recommendations for further research in the field and acknowledges the limitations of the study.

Findings

The result obtained that 300 have the knowledge about elderly affecting

health diseases 250 are doing periodic health checks.

Discussion

Here the major findings of the study are discussed with reference to similar studies conducted by other researchers. The present study was intended to assess the knowledge on importance of periodic health check ups.

Objectives of the study

The objectives of the study are to:

• Identify the knowledge on importance of periodic health

- checks among random people in Bangalore urban.
- Find association between knowledge level on geriatric health and selected demographic variables.

Major findings of the study

Findings regarding distribution of knowledge on importance of health checkups.

In the present study the descriptive research design was used. The sample consisted of 300 random people in Bangalore urban and the data was collected by administering a checklist. The findings of the study showed that out of 300 random people 250 were having awareness periodic health checkups and they are doing that on regularly basis.

The study result was supported by a study conducted in an urban locality, on knowledge assessment about periodic health checkups among elderly people. 300 random members in an urban locality participated in this study. The knowledge level was assessed by a checklist. The result shows that out of 300 250 were having awareness among the importance of periodic health check up.

Comparing the present study with above study concluded that the knowledge among the people is increasing day by day.

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