2015

www.jmscr.igmpublication.org

Impact Factor 3.79 Index Copernicus Value: 5.88 ISSN (e)-2347-176x ISSN (p) 2455-0450 crossref DOI: http://dx.doi.org/10.18535/jmscr/v3i12.10



Journal Of Medical Science And Clinical Research An Official Publication Of IGM Publication

Socio-demographic Profile and Health Seeking Behaviour among Malaria Patients in Western Odisha

(Original Article)

Authors

Giri Mamata Rani¹, Sahoo Arun Kumar²

¹Asst.Professor, Community Medicine, VIMSAR, Burla, Sambalpur, Odisha India,

²Engineer, MBA-Finance

Corresponding Author

Dr Mamata Rani Giri

Assistant Professor, Department of Community Medicine, VMSAR, Burla, Sambalpur, Odish.India Address: Qtr. No-D/16, Doctor's Colony, Burla, Sambalpur, Pin-768017 Email: giri_mamata@yahoo.in, Mobile: 8895922328

Abstract

Background: The prevention and control of vector born disease is complex. Under NVBCDP some of the pronged strategy for prevention & control of malaria is early case detection and complete treatment, strengthening of referral services, supportive intervention including behavioral change communication.

Objectives: 1.To study the socio demographic profile of malaria patients. 2. To know the health seeking behavior of these patients.

Materials and Methods: It was a hospital based cross sectional study carried out from June to Sept.2014 in the medicine indoor of VSS medical college & Hospital. All the patients admitted to the medicine ward after diagnosed as malaria were included as study subjects. Data was collected in a predesigned pretested questionnaire and it was analyzed with MS Excel.

Result: Out of 140 malaria patients young adult & middle aged were more (75%) cases with a male pre dominance(78%). 59% of the cases were belonged to lower socio economic classes. The educated person (68%) were constitutes the more number of cases. Most patients (75%) had used the mosquito net. .39% cases were attributed to migration to endemic region.64. 5% of patients sought for medical attention after 3 days. 81% cases came to the hospital with their own motivation.65% of the study subject were as referred cases.

Conclusion: Malaria still continues to pose a major threat to the people of western Odisha even after implementation of various national programs. So IEC & BCC are required to increase the awareness regarding various aspects of malaria.

Keywords: Socio demographic, Malaria, Health seeking behavior

JMSCR Vol||3||Issue||12||Page 8507-8509||December

Introduction

Malaria is a leading cause of morbidity and mortality affecting 109 countries with an annual case fatality of 1-3 millions. Despite a detailed knowledge of malaria parasite and transmitting agent, it still continues to be a major cause of death. In Odisha due to lack of adequate prophylactic measures, development of drug resistance & insecticide resistance mosquitoes. Annually country wide 23.4 million blood smear are examined with total 0.8 million cases of malaria & 379 death^{.[1,2]}Malaria traditionally believed to be a rural disease shows a direct relationship with socio economic status, housing conditions, personal measures taken against mosquitoes bites & health seeking behavior. VSSMCH is a tertiary care hospital catering to the need of 25 lakh population with 70-80% belonging to rural areas & admits 1000-1500 cases of malaria annually. On this background the present study was carried out to know the socio demographic profile and the health seeking behavior of malaria patients attending the tertiary care hospital.

Materials and Methods

It was a hospital based cross sectional study carried out from June - Sept. 2014 in the medicine ward of VSS Medical College & Hospital. All the patients are admitted to medicine ward after diagnosed as malaria were included as study subjects. After explaining the objectives of the study informed consent was taken. Data was collected in a predesigned pre- tested questionnaires & it was analyzed with MS excel.

Result

Out of 140 malaria patients, young adult& middle age group were more i.e105 (75%) cases with male predominance 110(78%). Among the study subjects 104(74%) were married. 114(81.5%) were from rural area. Only 7.85% were illiterate & 64(45.74%) were having higher education. 82(59%) of the cases were belong to lower socio economic status. Most of the patients 110(78.6%) were using mosquito net. Out of these 54(49%) were using medicated net.

Among the study subject 6(4.3%) of cases were having history of sickling. 54(39%) of cases were attributed to migration to endemic area in the recent past.90(64. 5%) of patients sought for medical attention after 3 days. 114(81.43%) cases came to the hospital with their own motivation, 90(64.28%)of the study subject were as referred cases.

Discussion

In the present study young, adult & middle age group were more cases (75%) with male pre dominance (78%) due to greater outdoor activities. Similar type of findings were in the study carried out by Madhu M, P.S. Prakash.^[6] Majority of the study subjects (81.43%) belong to the rural area. 59% of cases were in the low socio economic status with a finding similar to Pankaj P Tavid et al.^[7,8] Contrary to popular believe, educated persons constituted the major cases (68%). Regarding personal prophylactic measure 78% were using the mosquito net. Out of this 49% were using the medicated one. In relation to the health seeking behavior of the patients, 64.58% cases waited for 3 days or more for consulting the doctor& the reason for it was home remedy treatment & negligence. This finding was similar to the findings of study conducted by Singh TG^[10].

Conclusion

Malaria still continues to pose a major threat to the people of western Odisha even after implementation of various national programs. So IEC & BCC are required to increase the awareness regarding various aspects of malariai.e. Regarding the regular use of mosquito net, early diagnosis of malaria with complete treatment by early consultation with doctors without any delay.

Conflicts of Interest: Nil

References

 Park K. Text book of Preventive and Social Medicine, 23rd Edn, Jabalpur, Banarsidas Bhanot; Page 255-56.

JMSCR Vol||3||Issue||12||Page 8507-8509||December

- 2. WHO (2014), factsheet on World Malaria Report, Dec.2014.
- Govt of India (2013), Annual Report 2012-13, Ministry of Health & Family Welfare, New Delhi.
- 4. Govt of India (2014), Malaria, Magnitude of the problem NVBDCP, DGHS, Ministry of Health & Family Welfare, New Delhi.
- Govt of India (2014), Strategic Action Plan for Malaria Control in India 2012-17 DGHS, Ministry of Health & Family Welfare, New Delhi.
- Madhu Muddaiah, PS Prakash. A study of clinical profile of malaria in a tertiary referral center in South Canara (Karnatak). J.V.B.Dis 2006; 43; 29-33.
- S. Matta, A Khokar, TR Sachdev. Assessment of knowledge about malaria among patients reported with fever: A hospital base study. J Vect Borne Dis 41,March - Jun 2004, Pg 27-31.
- Pankaj P Taviad, T B Javedkar, Bhavana A Selot, Vipul P Chaudhari. Socio Demographic and Clinical features of the malaria cases. National Journal of Community medicine, Volume 3, Issue 1, Jan-March 2012;94-96
- SK. Pradhan P, Padhi DM. Study on Socio economic factor & human behavior in a cross section of tribal communities in Sundargarh Dist.Orissa. Malaria research center ICMR, Rourkela.Indian Journal of Public Health 2001,45(3):93-98
- Singh TG, Singh RKN, Sigh EY. A study of knowledge about malaria and treatment seeking behavior in two tribal communities of Manipur. Indian J Pub Health 2003; 47 (2);61-65
- 11. Rasania SK, Bhanot A, Sachdev TR. Awareness and practices regarding malaria of catchment population of a primary health center in Delhi. J Com Dis 2002; 34(1):78-84.