

MEDICAL KNOWLEDGE AND ATTITUDE OF PATIENTS-A SURVEY

Pages with reference to book, From 146 To 148

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Abstract

Two hundred and five patients admitted to various general wards of Sir Ganga Ram Hospital were interviewed according to a questionnaire designed to provide information on patients. knowledge about their ill-ness, their desire to know more and their attitude towards hospitalization, investigations, treatment and blood transfusion.

One hundred and fifty of 205 (73 %) professed knowledge of their disease and 55 (27%) were ignorant. The knowledge of the 150 patient was limited to system/organ affected; they know little about the nature of the illness; yet 66 of 150 (44%) considered their knowledge to be sufficient; the rest asked for more information. Of the ignorant group 43 (78%) were not interested in getting more information, and gave a variety of reasons.

The attitude towards hospitalization, investigations and treatment was complimentary in 78%. Blood transfusion was approved by 46% disliked by 21% the remaining 33%) expressed indifference.

To improve the treatment and follow up compliance it is considered important that doctors should educate the patients about their medical problems. (JPMA 31:146, 1981).

Introduction

There is a general impression amongst clinicians that a significant number of patients are unaware of their health problems. As a result, they are poor historians and are inadequately involved in their management and follow up plans and this leads to a high default rate. To assess this problem medical students of Fatima Jinnah Medical College, Lahore conducted a small survey. Their observations are reported in this paper.

Material and Method

A total of 205 patients (including mothers of paediatric patients) were interviewed during a 4 weeks period by 11 final year medical students. The responses recorded were screened for completion once a week and difficulties discussed.

The questionnaire consisted of 3 parts :-

- (a) General data on the ward to which admitted, age, education, income, family size, smoking habits and self medication.
- (b) Knowledge of disease and desire for more information.
- (c) Attitude towards hospitalization, investigations, treatment and blood transfusion.

Results

Eighty five surgical, 73 medical, 26 obstetric and 21 paediatric patients (mothers of children were interviewed) were included in this study.

Table I: Age Distribution

25 years	..	..	..	..	79
40 years	..	..	..	..	40
41-50 years	..	..	..	..	36
51-60 years	..	..	..	..	34
61-70 years	..	..	..	..	11
Over 70 years	..	..	..	..	5
Total	..	..	..	..	205

Table I shows the age distributions of patients and mothers of paediatric patients. Most of the subjects were in the age group of 25-40 years.

Fifty three percent of 178 subjects interviewed were literates and or educated (Table II)

Table II: Education

<i>Groups</i>	<i>No.</i>	<i>Sex</i>	
		<i>M</i>	<i>F</i>
Illiterate (Could neither read nor write Urdu)	84	38	46
Literate (no normal schooling)	14	12	2
Upto Primary	49	32	17
Upto Matric	17	10	7
Upto College (F.A./B.A.)	11	4	7
Postgraduate	3	3	0
Not recorded	27	—	—
	205	99	79

and 56% of 169 patients came from low Socioeconomic group (Table III).

Table III: Income
(In Rupees/month)

<500	<1000	> 1000	Total
95 (56%)	47 (33%)	27 (11%)	169
Not recorded			36
		Total	205

Majority of the patients had large families (Table IV)

Table IV: Family Size

<6 member	> 6 member	Total
66	124	190
Not recorded in		15
		205

and 79% were satisfied with the medical care provided in the general wards of the hospital (Table V) and 46% did not object to blood transfusions.

Table V: Attitudes towards Hospital care

	<i>Satisfied</i>	<i>Dissatis- fied</i>	<i>Indiffer- ent</i>
Hospitalization	155	37	13
Investigations	156	26	23
Treatment	159	38	8
	77-79%	15-18%	3-11%
Blood Trans- fusion	94(46%) Approved	43(21%) Disliked	68(33%) Infifferent

Self Medication

Ninety three of 205 (45%) admitted self medication. The drugs most commonly used were aspirin, paracetamol., Dipyron, Cough Mixtures and Co-timaxazol. The list included Kaolin streptomycin suspension, Pentazocin, Diazepam, Ibuprofen, antacids, agarol and soda-mint.

Smoking habit of the 79 Male Patients, revealed that 45 or 57% were cigarette smokers. All females were non-smokers.

Knowledge about the disease and the desire to know about it was assessed according to response to

following questionnaire:-

1. Do you know what illness you have?
2. What do you know?
3. Do you feel the need for more informations ?
4. If yes, what do you want to find out?
5. If no, why ?

Two groups emerged according to the response to these questions.

1. One hundred and fifty of 205 (73%) knew about the illness. This knowledge was limited to organ/system involved, (for example; Swollen Liver' Kidney Trouble', blood deficiency' 'weak heart') and little about the nature of the illness. Yet 66 of 150 (44%) considered their knowledge to be sufficient and did not wish to seek more information.

Remaining 86 (55%) asked a variety of question e.g. why it happened? was it infective? is it due to dietary indiscretion? was it curable? will it recur? any risk to life?

2. Fifty five of 205 (27%) admitted ignorance about the illness of these only 12 were inclined to ask questions, the remaining 43 were not really interested and gave different reasons, e.g. Do not think I will understand, too much complicated, knowing will not make much difference; afraid it is something serious; the doctor knows best; just not bothered.

Discussion

A review data confirms the impression that in the general wards, predominance is of a low income group (56%) with a large family-size (65%).

Cigarette smoking was confined to males, of whom 57% smoked. Though literacy in this group was un-expectedly high (53%), formal education was received only by 45%.

Self-medication was practised by 45%. The inclusion in the list of drugs of Dipyron, Sose-gon, Co-Trimoxazole and Diazepam is alarming, indicating the magnitude of over-the-counter sale in this country.

One third of the patients were content to know a bare minimum about the disease and were not inclined to seek further information from their doctor. The attitude probably springs from the misconception that diseases get cured with treatment. Since there is no need for maintenance treatment and follow up it is not important to know about and illness.

About 1/5th were not prepared to find out as to what was wrong with them because they had a variety of psychological barriers, some of which may be the result of an over-protective family life and some probably due to the belief that health care is the responsibility of the medical profession only, which need not be actively shared by the sick.

Most of the patients (77-79%) were satisfied with hospitalization, investigations and treatment. This confirms the observation that opinion survey of hospitalized patients are generally complimentary. Those dissatisfied with all three activities were 15-18%. However, there was wide variation in attitude to these activities in the indifferent group (3-11%).

The maximum indifference was expressed towards investigations 23/44 (52%) and minimum to treatment 8/44(18%).

In the group surveyed, health education of the patients was neglected despite admission to a teaching hospital, where multiple sources of information exist. It appears that majority of patients tend to be satisfied with minimal information and do not, ask question from the treating doctors. Medical information should therefore be spontaneously offered to the patient in simple, non technical terms, if the goal of long-term treatment and follow up compliance is to be achieved.

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