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Awareness Regarding Haemorrhoids among Clients Attending At Chitwan Medical College Teaching Hospital

Sara Thapa[1], RubinaTamang[2]
Assistant professor, School of Nursing, Chitwan Medical College, Bharatpur, Chitwan, Nepal
Assistant Lecturer, Maulakalika Health Science College, Bharatpur, Chitwan, Nepal.
Corresponding Author: Sara Thapa

Abstract: *Haemorrhoids are swollen and inflamed veins around anus or in lower rectum. It is common problem in worldwide which increases with age. The aim of this study was to assess the awareness regarding haemorrhoids among client attending OPD at Chitwan Medical College Teaching Hospital. A descriptive, cross sectional study was conducted among 120 patients of age of ≥ 20 years attending Surgery OPD at CMCTH by using non- probability purposive sampling technique. The finding revealed that majority (57.5%) of clients had inadequate awareness while 42.5% had adequate awareness regarding haemorrhoids. There was no statistically significance between level of awareness regarding haemorrhoids and selected variables such as: age (p=0.513), sex (p=0.772), educational status (p=0.261), occupation (p=0.821), personal history of haemorrhoids (p=0.682) and family history of haemorrhoids (p=0.834). In conclusion, a planned health awareness programme is needed to improve the awareness of clients regarding haemorrhoids .*

Key words*: Haemorrhoids, Awareness*

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I. Introduction

Haemorrhoids are a very common ano-rectal condition defined as the symptomatic enlargement and distal displacement of the normal anal cushions [1]. Dilatation of the sub mucosal vascular tissue in the distal anal canal results in haemorrhoids. Different factors that increase intra abdominal pressure contribute to dilatation, engorgement and prolapsed of haemorrhoidal vascular tissue. Many patients treat the symptoms of haemorrhoids themselves without medical advice. They seek the treatment for the haemorrhoids only when the symptoms get worsen[2].

The actual cause of haemorrhoids is not known. Few of the proposed causes include constipation, chronic diarrhoea, poor bathroom habits, postponing bowel movements, a poor fiber diet, alcoholic cirrhosis, sedentary lifestyles and heredity [3]. Anal itching , anal pain, bright red blood on toilet , pain during bowel movement, hard tender perianal mass and sensation of tissue prolapsed are the symptoms of haemorrhoids[4].

Treatment of haemorrhoids aims to minimize straining, pain and constipation. To treat haemorrhoids, a high fiber diet, fluid intake combined with stool softeners, sitz bath and topical agents utilizing analgesics, steroids, astringents are provided. Those who have ongoing symptoms or active bleeding should be considered for surgical treatment. Another procedures include ligation, fixation, and excision, because most of the internal haemorrhoids symptoms are due to tissue prolapsed, ligation and fixation procedures effectively scar the mucosa to the underlying sphincter so tissue can no longer prolapsed which is also known as rubber band ligation. Infrared Photo coagulation and bipolar diathermy are also the treatments methods in which electric probe, a laser beam, or an infrared light burn painlessly and seals the end of the haemorrhoids causing it to close off and shrink. Haemorrhoidectomy a surgical procedure is useful to treat large prolapsed internal haemorrhoids or external haemorrhoids [5].

The prevalence of haemorrhoids has been estimated of 4.4% of U.S. adults with the highest prevalence in those between 45 and 65 years of age. In United States, It is found that that approximately 1 in 26 or 3.82 % or 10.4 million people suffer from haemorrhoids and prevalence of haemorrhoids increases with age [2]. According to the Haemorrhoid treatment Centre in North Carolina about half of Americans develop haemorrhoids by the time aged 50 and only small people proportion of those people seek therapy. Nearly 1 million new cases reported annually and 10 to 20 % those new cases require surgery. Haemorrhoids occur more often in Caucasians from rural areas and those with higher socio economic status [6].

In Nepal, haemorrhoids are common problems affected every year, thousands of people suffer from this disease almost every household especially in city areas. It is difficult to find out how common haemorrhoids because many people do not seek a healthcare service. However, symptomatic haemorrhoids are thought to affect at least 50 % of the population which are more common in people with higher socioeconomic status [7].

A cross sectional study conducted in Gandhi medical college India in which maximum cases were below the age of 40 years and males suffered more (73.3%). Haemorrhoids were seen commonly among urban dwellers (87.7%) than rural dwellers (12.3%) and 97.7% of cases complaint of bleeding in which majority (71.1%.) of patients reported to hospital within one-year history of bleeding [8]. Similarly, study which was conducted in Chitwan Medical College, Nepal showed that 52% of respondents had good knowledge while 48% had poor knowledge regarding haemorrhoids among clients attending OPD [9].

II. Materials And Methods

A cross-sectional study was carried out to explore awareness regarding haemorrhoids among client attending OPD at Chitwan Medical College Teaching Hospital. Total 120 patients, age of ≥20 were selected by using non-probability purposive sampling technique. Ten participants were interviewed each day and the data were collected by Face to face interview schedule by the researchers herself during June 21st 2018 to July 6th 2018. Prior to data collection, ethical approval was taken from Chitwan Medical College-Institutional Review Committee (CMC-IRC). All collected data were checked daily for its completeness, consistency and accuracy. The Statistical Package for Social Sciences (SPSS) for windows version 20.0 was used for data entry and analysis. Data was analyzed by using descriptive and inferential statistics like frequency, percentage, median, standard deviation & chi-square..

III. Result

Table1: Respondents' Socio-demographic Characteristics

n=120

Variables	Frequency	Percentage
Age		
20-33 years	64	53.3
>33	56	46.7
Median=33, ,IQR(Q_3.Q_1)=43-25,Max=68,Min=20		
Sex		
Male	37	30.8
Female	83	69.2
Religion		
Hindu	98	81.7
Buddhism	15	12 .5
Christian	7	5.8
Education status		
Illiterate	3	2.5
Literate	117	97.5
Education level (n=117)		
General literate (can read & write)	11	9.2
Basic literate (1-8 class)	34	28.3
Secondary level (9-12 class)	48	40.0
Bachelor level & above	24	20.0
Occupation		
Agriculture	13	10.8
Business	22	18.3
Service	14	11.7
Student	14	11.7
Housewife	54	45.0
Others	3	2.5

The result showed, majority (53.3%) respondents were from the age group between 20-33yrs, 69.2% were female & most of the respondents (81.7%) were Hindu. Regarding educational status, 97.5% respondents were Literate and among them 40% had secondary level of education. Concerning occupational status most of the respondents (45 %) were housewife.

Table 2: Disease related Characteristics of Respondents

Variables	Frequency	Percentage
Personal History of Haemorrhoids (n=120)		
Yes	17	14.2
No	103	85.8
Duration of haemorrhoids (n=17)		
<1 year	6	35.29
1-3year	5	29.41

3-5year	3	17.64
>6 year	3	17.64
Treatment of haemorrhoids (n=17)		
Home based treatment	2	11.76
Surgery	3	17.64
Self medicine	7	41.17
Others	5	29.41
Family history of haemorrhoids (n=120)		
Yes	3	2.5
No	117	97.5
Relationship with family member (n=3)		
Father	2	66.67
Mother	1	33.33
Sources of Information(n=120)		
Family or friends	88	73.3
Health personnel	34	28.3
Television	71	59.2
Radio	71	59.2
Newspaper	23	19.2
Leaflets	8	6.7

The result showed that majority (85.8%) of the respondents did not have personal history of haemorrhoids while 14.2% had history of haemorrhoids, among them 35.29% had <1 year duration of being suffered from haemorrhoids. Among 14.2% respondents, only 41.17% used self-medicine for haemorrhoids. Regarding family history, 2.5% had history of haemorrhoids in the family , majority of the family members (66.7%) were father & 73.3% respondents received information from family or friends.

Table 3: Respondents' Level of Awareness regarding Haemorrhoids

Awareness level	**Frequency**	**Percentage**
Adequate (mean (>7.17)	51	42.5
Inadequate (mean (<7.17)	69	57.5
Total	120	100.0

Mean value=7.17, SD= 2.104, minimum=3, maximum=12, Possible Scoring = 0-12.

The result showed that more than half (57.5%) respondents had inadequate awareness and less than half 42.5% had adequate awareness regarding haemorrhoids as shown (table 3).

Table4: Association between Respondents' Level of Awareness regarding Haemorrhoids and Selected Variables

n=120

Variable	**Level of awareness**		**Chi- square (χ^2)**	**P-value**
	Adequate	**Inadequate**		
Age				
20-33 years	30(46.9%)	34(53.1%)	1.074	0.300
>33 years	21(37.5%)	35(62.5%)		
Sex				
Female	36(43.4%)	47(56.6%)	0.084	0.772
Male	15(40.5%)	22(59.5%)		
Occupation				
Unemployed	35(43.2%)	46(56.8%)	0.051	0.821
Employed	16(41%)	23(59%)		
Personal history				
Yes	8(47.1%)	9(52.9%)	0.168	0.682
No	43(41.7%)	60(58.3%)		
Family history				
Yes	2(66.7%)	1(33.3%)	-	0.574*
No	49(41.9%)	68(58.1%)		

Significance level at < 0.05,* Fisher's exact test

This result showed that there were no significant association between level of awareness regarding haemorrhoids and selected variables as shown (table 4).

IV. Discussion

This study found among 120 respondents 14.2 % suffered from hemorrhoids among which 35.29% had <1 year duration , 29.41% had 1-3years, 17.64% had 3-5 years and 17.64% of respondents had >6 years of positive history of haemorrhoids. Contradictory result showed by the study conducted in patients attending

Surgery (Jarahat) OPD at NIUM Hospital Bengaluru (2015) among 911 diagnosed patients of hemorrhoids in which 18.33 % patients were having symptoms for less than one year, 33.69% patients were suffering from this problem for 1 to 2 years and 32.27% patients were suffering for 2 to 4 years [10]. In the current study more than half (69.2%) respondents were female and 30.8% were male were participated. The finding of the study is consistent with the study done in south west Nigeria in which 28.3% were males and 71.7% were females [11]. This study revealed that more than half (57.5%) respondents had inadequate awareness and less than half (42.5%) had adequate awareness regarding haemorrhoids. Inconsistent results were found in a study conducted in surgical OPD of CMCTH (2013) which found less than half (48%) respondents had inadequate level of knowledge and more than half (52%) respondents had adequate knowledge regarding haemorrhoids [9]. This contradictory finding was may be related to less sample size (50). Similar contradictory result was found on a study performed by Sedlackova (2014) also showed that only 17. 27% respondents had insufficient awareness regarding haemorrhoids [12].

v. Conclusion

Based on the findings of the study, the conclusions had been drawn that more than half of the respondents had inadequate awareness. Eventhough hemorrhoids are quiet common surgical problem which can be preventing through healthy life style modifications and timely check up.

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References

[1]. Lohsiriwat, V.(2012). Haemorrhoids : From Basic Pathophysiology to Clinical Management. World Journal of Gastroenrerology. 18(17), 2009-2017. Doi: 10.3748/wjg.v18.i17.2009.
[2]. American Academic Family Physician. (2011). Haemorrhoids. Retrieved from http://www.aafp.org/afp
[3]. Gami, B. (2011). Haemorrhoids-a common Ailment among Adults,Causes& Treatment.International Journal of Pharmacy & Pharmaceutical Sciences. 3(5), 5-12.
[4]. Sun,Z., & Migaly, J. (2016). Review of Haemorrhoid Disease: Presentation &Management . Clinic Colon Rectal Surgery. 29(1), 22-29.doi: http://dx.doi.org/10.1055/s-0035-1568144..
[5]. Sanchecz, C., & Chin, B.T. (2011). Haemorrhoids. Clinics in Colon & Rectal Surgery, RobertwoodJohonson Medical School. 24(1), 1-9. Doi: http://dx.doi.org/10.1055/s-0031-1272818
[6]. Robertson,S.(2017). Epidemiology of Haemorrhoids. Available from https://www.google.com.np/amp/s/www.news-medical.net/amp/health/Epidemiology-of haemorrhoids.aspx
[7]. Nepal, S (2016). Dealing with Pile. The Himalayan Times.
[8]. Pande,P.K., & Dhruv,Y.(2017). A study of Surgical Profile of Patients Undergoing Haemorrhoidectomy. International Surgery Journal.4(9), 2947-2951.doi : http://dx.doi.org.10.18203/2349-2902.isj20173613
[9]. Poudel, K.(2013). Knowledge Regarding Haemorrhoids Among the Clients Attending OPD of CMCTH .Unpublished bachelor Research Study, Chitwan Medical College ,Bharatpur-5 , Chitwan.
[10]. Najar F. A., Faisal M. ,KhesalA.and Ansari T. A. PREVALENCE OF HEMORRHOID AMONG THE PATIENTS VISITING SURGERY OPD AT NIUM HOSPITAL. European Journal of Biomedical AND Pharmaceutical sciences.ISSN 2349-8870 Volume: 5 Issue: 1 435-437 Year: 2018
[11]. Omole .M.K. and AdegboyeOyebukola ., O (2012). A ten year study of the management of haemorrhoids at a secondary nursing home in south west Nigeria**.**International Journal of Pharmaceutical Sciences Review and Research 15(1):1-4 License CC BY-NC-ND 4.0
[12]. Sedlackova, A.(2014). Public Awareness on theissue of Haemorrhoids. Published bachelor thesis. Charles University ,Prague

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