Knowledge, Beliefs and Practices Regarding Gynaecological Problems Amongst Females – A Hypothesis

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Abstract

Background: Women's health issues have gained lot of importance in recent years. Lack of education, high illiteracy rate and increasing level of poverty are making health improvements for women in India extremely difficult. There are still certain gynaecological issues which are not addressed in India. In Maharashtra it has been shown that many women are not involved in their personal health care decisions. Urban women with higher educational status have been shown to involve in their health care decision. Addressing gynaecological health of women is a necessity in forthcoming century. On this background this study aims to know the extent of knowledge regarding gynaecological health issues among females in studied city. It also evaluates their attitude towards these problems and their help seeking behaviour towards it. It is hypothesized that level of education has highest impact on attitude and behaviour towards gynaecological problems amongst females. Also socio economic status have impact on the same whereas geographical and age wise variation may or may not have impact on attitude and behaviours amongst females. A cross-sectional questionnaire based study will be performed on 3500 females in age group of 18 to 80 years in Pune district in state of Maharashtra. All females with medical and paramedical background will be excluded from the study. Questionnaire with LIKERTS scale would be pre-validated by the experts in the field for its content validity. After establishing it's inter and intra rated reliability an interview would be performed. Descriptive analysis shall be done for the entire data with Chi squared test for significance. Comparison of the knowledge, attitude and practices between the groups based on geographical, educational, socio economical and age wise variations would be done by the Mann-Whitney U test.

Clinical importance: Knowing about the extent of knowledge, their attitude and their help seeking behaviours towards gynaecological issues would help to determine the target population group for health promotion and improve quality of life among Indian female population.

Keywords: Women's health, gynaecological issues, Pune, Maharastra.

THESIS SUMMARY

Introduction

This project comes exclusively under Women's health in Community Physiotherapy. It has been undertaken as a part of health promotion of women's health in the community. As for the health promotion, it is a part of broader of public health in community [1]. WHO defines health promotion as 'all organised measures (whether public or private) to prevent disease, promote health and prolong life among the population as a whole' [2]. In this study all the gynaecological issues faced by women are highlighted so that they can be prevented with proper knowledge at a very early stage thus promoting healthy

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lifestyle in women of our society. A woman plays a multifaceted role contributing to the progress of society balancing her personal as well as professional life. Women have responsibilities to effectively manage their domestic as well as professional life. In order to deal with these stresses of family as well as professional life, a Woman should have a healthy lifestyle. In all this, gynaecological health of a woman plays a very important role. Gynaecological disorders can have a considerable impact on women's reproductive status, mental and emotional status and quality of life [3]. Gynaecological disorders which are taken into account are pelvic floor dysfunction, menstrual issues and menopause. Thus this study aims to know the extent of knowledge regarding gynaecological health issues among females in this city. It also evaluates their attitude towards these problems and their help seeking behaviour towards it. This project is undertaken in a city which represents a blend of both traditional and modern Indian culture. It is well known for private sector institute of information technology that attracts many students and professional from all over the India representing highest educational status.

Hypothesis

It is hypothesized that level of education has highest impact on attitude and behaviour towards gynaecological problems amongst females. Also socio economic status have impact on the same whereas geographical and age wise variation may or may not have impact on attitude and behaviours amongst females.

After obtaining approval from ethical committee of institution a cross sectional questionnaire based study will be performed on 3500 females in age group of 18 to 80 years in Pune district in state of Maharashtra. All females with medical and paramedical background will be excluded from the study. Pune city is divided into 7 sections based on the electoral constituencies. The target population of 500 females per constituency would be selected by stratified random sampling wherein each constituency zone shall be considered as 1 stratum. The females shall be selected from those included in the voters list based on the population number of respective constituency wherein the population number (n) shall be divided by 500 and every kth female from the n population shall be included. E.g., if the population of zone A is 43,256, every 87th female shall be included. If not consented, the inclusion shall be of the 174th, 261st, 384th and so on. Only the females of the selected number shall be included per stratum. Questionnaire with LIKERTS scale would be pre-validated by the experts in the field by face validity. After establishing it's inter and intra rated reliability an interview would be performed. Descriptive analysis shall be done for the entire data with Chi squared test for significance. Comparison of the knowledge, attitude and practices between the groups based on geographical, educational, socio economical and age wise variations would be done by the Mann-Whitney U test.

Discussion

Many studies have been done evaluating knowledge, attitude and perception regarding gynaecological issues amongst women globally. Pelvic floor dysfunction is common and undermines the quality of life in at least one third of adult female population and is a growing component of health care needs. Davis K et al (2003)[3] concluded that Functional pelvic floor problems are perceived to have low priority compared with other health disorders, and treatment remains sub-optimal. Inaccurate knowledge, myths and misconceptions of the incidence, cause and treatment of pelvic floor dysfunction abound. Education needs to be given greater priority. Buumman MB et al (2013) [4] studied women perception of pelvic floor dysfunction and their help seeking behaviours towards it. They found that all women suffered from pelvic floor dysfunction such as urinary incontinence, pelvic floor pain, prolapse, haemorrhoids, anal fissure, constipation and dyspareunia. They hoped their problems would improve by themselves. The women, in their study, talked to close initiates (female relatives and friends who had had deliveries themselves), who confirmed that the problems were an inevitable consequence of vaginal delivery and that there were no real treatment options. The women indicated they needed professional information about their pelvic floor problems but were ashamed to talk about them outside their inner circle. Most common pelvic floor dysfunctions reported by the authors were urinary incontinence, faecal incontinence and pelvic organ prolapse. Physiotherapists have become involved in clinical management of urinary incontinence as the presumptive underlying impairments (i.e., decreased pelvic floor muscle strength and/or endurance, decreased awareness of bladder irritants) fall within the scope of physiotherapy practice according to the Guide to Physical Therapist Practice[5]. A systematic review performed by Havey M (2003)[6] concluded that Postpartum Pelvic floor exercises appear to be effective in decreasing postpartum urinary incontinence. Dumoulin et al (2010)[7] reviewed that widespread recommendation that Pelvic floor muscle training be included in first-line conservative management programmes for women with stress, urge, or mixed, urinary incontinence. Other gynaecological problems taken into consideration in this study are menopause and menstrual issues. Hamid S et al (2014)[8] studied women's knowledge, attitude and perception towards menopause and hormone replacement therapy. They concluded that there is poor knowledge about menopause and HRT among the participants. Level of knowledge was associated with the level of education. There was a positive attitude towards menopause, with women suffering the most from menopausal symptoms showing positive attitude towards HRT. Also Memon FR et al (2014)[9] studied knowledge, attitude and practices regarding menopause among highly educated Asian women in their midlife. They found that despite the fact that the majority of women felt well informed and exhibited a positive attitude towards menopause, a strong urge for more knowledge was expressed for which Health professionals are an important information resource. Of 60% of cases, only 5% of participants knew about hormone replacement therapy and none knew about available alternative therapies. A study performed by Kemmler W et al (2015)[10] concluded high anti-fracture efficiency of multipurpose exercise programs in post menopausal women. Another study by Basat H (2014)[11]concluded that mixed loading exercise programmes combining jogging with other low-impact loading activity and programmes mixing impact activity with high-magnitude exercise as resistance training appear effective in reducing postmenopausal bone loss at the hip and spine. It highlights the role of physiotherapy in improving quality of life in post menopausal women. Also physical therapy plays an important role in menstrual issues faced by young women. Polycystic ovarian syndrome (PCOS) is common disorder with prevalence ranging from 2.2 percent to 26 percent. Most reports have shown adult women in age group of 18 to 45 years[12]. Obesity increases some features of PCOS[13]. In a study performed by Li Y et al (2011)[14], PCOS has been shown to decrease quality of life among young females. A study performed by Steiner Victorin E et al (2013)[15] has shown that there is improvement in symptoms of PCOS and quality of life in young women with physical exercise. Thus a physical therapist plays

a prime role in women's health problems in terms of their prevention and health promotion. Not only exercises play a major role but exercises along with various other physical therapy modalities can also help in overcoming women's problems[15].

This study typically falls under the domain of Community Physiotherapy. On the basis of the results obtained from this study target population can be identified to carry out various prevention and health promotion programmes. It could act as an important factor in public health care system and improve quality of life in female population by screening and identifying the problem at its initial stage and avoiding its further progression.

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