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MORBIDITY PATTERN OF ELDERLY IN RURAL FIELD PRACTICE AREA AT SHIVANAGI, BIJAPUR, KARNATAKA

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ABSTRACT

Background: Ageing is a fine of multiple illness of general disability. Most of the people enter old age in poor health condition, as a result of life long exposure to health risk, deprivation, lack of knowledge of resources to health promotion and poor access to health services. **Objectives:** To assess the Morbidity Pattern among Elderly of rural area, Shivanagi. **Materials and Methods:** It's a Cross Sectional study conducted at RHTC catered by Dept. of Community Medicine, BLDEA'S Shri B M.Patil Medical College Bijapur. Participants were the People aged more than 60 Years and sample size is 144. **Results:** Around 63% belong to 60-69 years of age group, 30% to 70-79 years of age group and 05% to >80 years of age. 89% of elderly were having hypertension, 87% diabetes, 83% asthma, 64% cataract and 63% osteoarthritis. **Conclusion:** The results of this study showed that the major proportion of the elderly were having more than one health problem. So early detection and diagnosis is very essential for the elderly.

Key words: Age, education, elderly morbidity, marital

INTRODUCTION

Ageing is not a disease but it's an irreversible process and the risk of developing disease is increased often dramatically as a function of age. No one knows when the old age begins. WHO defines old age as "the period of life when impairment of physical and mental functions become increasingly manifested by comparison in the previous period of life"¹. The recent global trend is such that the demographic structure is shifting towards higher proportion of the elderly. Globally there are 600 million persons above the age of 60 years and is expected to increase to 800 million i.e., 10% by 2025². The population of elderly in India is 76.6

million. By 2020 India will harbor about 158 million elderly second largest population of elderly worldwide after China (230 million)³.

The contribution of elderly proportion to demographic figure is increasing day by day. Medicare data suggest that 32% of the population, in the age group of 65-69 years suffer from three or more chronic conditions. In the age group of 80-84 years the prevalence of multimorbidity increased to 52%⁴. So the problems associated with the ageing are psycho-social problems and the absence of facilities for medical treatment and of providing economic support. Hence the information on morbidity profile of this population is essential for planning health care services or national programmes for the aged.

Objectives:

To assess the Morbidity Pattern among Elderly of rural area, Shivanagi.

MATERIALS AND METHODS

A cross-sectional study of morbidity status of geriatric population in the field practice area of Shivanagi, catered by department of community medicine BLDEA'S Shri B M.Patil Medical College Bijapur, located in North part of Karnataka, India. In the study those who were aged 60 years and above were considered as elderly and the study subjects included elderly men and women. House to house visits were made and information was collected on a pre-designed and pre-tested questionnaire which was developed by reviewing related studies. A total of 144 subjects were interviewed personally and clinical examination was done. Among 144 elderly 81 were males and 63 were females. The detailed history of socio-demography was taken along with present and past illness. The interview was carried out in the local language. The purpose of the study was explained to them and oral informed consent was obtained. Care was also taken to ensure privacy and confidentiality of the interview as part of the study. The data collected was tabulated and analyzed.

RESULTS

Out of 144 elderly majorities of them were in the age group of 65-70 years old. Very few of them were above the age of 75 years and more. Males were more in number compare to females. Majority of the elderly were illiterate (70.14%) and rest were literate. Among literate most of the females had the education till primary level (88.89%). Among the elderly only 17.28% were widower and 23.81% were widows and very few were divorce 3.7%.

When the general examination of the elderly was done, the blood pressure and temperature is

normal among all the elderly and 34.57% males were having over weight and 33.33% of females were of below weight.

All the elderly population was having one or the other health problems and the most common being B.P., diabetes and asthma. B.P, diabetes and cataract were found more in females and Osteoathrites was found more in males when compare to females.

DISCUSSION

Age group 60-69 years constituted the major fraction(63.88%) of population followed by 70-79 years (30.55%),and 80 and above years of age (05.55%) in comparison to 47%, 37% and 15% respectively at rural area of Meerut ³. In 65-70 years age group the proportion of males and females was found to be more or less similar but in the age group of 80 years and above the proportion of females was found to be higher than males and is similar to the study conducted at old age homes ⁶. Our study showed that 70% of the elderly were illiterate and 27.78% were educated up to primary level. Elango S. ⁷, reported that 78% were illiterate. According to the NSS 52nd round ⁸, 63% of the elderly were illiterate in India. Among 27% of primary level educated, 3.47% were females and 24.31% males, this disparity may be attributed to the area being rural. An over- all prevalence of 88% hypertension in our study was higher as compared to 48% by Prakash R ⁵. According to WHO (1989) ⁹ it has been stated in both young and older adults, blood pressure increases with age, but the decrease in mean blood pressure in males with 76+ age may be because of less mental tension and overall responsibilities of the house. A study by Ajay. et.al.,⁶ conducted in old age homes showed that an overall prevalence of 37.56%of hypertension and it is higher in female. The study conducted at out patients clinics of Ibaden, Nigeria ¹⁰ revealed that hypertension was registered in two-fifths of the

respondents and it's a primary health care problem with an increasing elderly population globally. Diabetes mellitus was found in 86% of elderly and is very high when comparing to the study shown among the rural community of Udupi ¹¹. Bronchial asthma among the elderly was 82% and is similar to the study conducted at old age homes ⁶.

Our study showed 63% of the elderly population in which 62.96% and 66.67% males and females respectively were found having cataract which is the leading problem in developing countries. In a study by Prakash R., et., al. ⁵ reported that 70% of the elderly were suffering from one or other ophthalmic problems and among them 44% were of cataract. Whereas, Adebuseye L A. et.,al. ¹⁰ reported that eye problems were the most common one and the high prevalence of cataract(39.4%) amongst the respondents. 34.72% elderly were found to have osteoarthritis problems among them males were more (67.90%) when compared to females(35.56%) and is vice-versa to the study at rural area of Udupi ¹¹.

CONCLUSION

The results of this study showed that the major proportion of the elderly were having more than one health problem. Morbidity pattern showed that 89% of the elderly population were suffering from blood pressure, 87% from diabetes, 83% from bronchial- asthma, 64% from cataract and 63% from osteoarthritis in hierarchical order. So the morbidity pattern in this rural area is very much high when compare to other rural areas may be because of their life-style pattern. To over-come this, the community must assist the elderly to fight the triple evils of poverty, loneliness and ill health.

RECOMMENDATIONS

*Regular screening programmes for detecting chronic diseases at the earliest.

* IEC activities to increase the awareness for more utilization of geriatric services.

*In order to ensure healthy ageing, health promoting behavior should be started early for "elderly for tomorrow."

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**Table 1: Socio-demographic profile of Elderly
(N=144)**

AGE(years)	MALE (%)	FEMALE(%)	TOTAL (%) (n=144)
60-65	27(33.33)	18(28.57)	45(31.25)
65-70	26(32.09)	21(33.33)	47(32.64)
70-75	23(28.39)	16(25.39)	39(27.08)
75-80	04(04.94)	01(01.59)	05(03.47)
>80	01(01.23)	07(11.11)	08(05.55)
EDUCATION			
Illiterate	45(55.56)	56(88.89)	101(70.14)
Primary	35(43.21)	05(07.94)	40(27.78)
Secondary	01(01.23)	01(01.58)	02(01.39)
Intermediate	-----	-----	-----
Graduate	-----	01(01.58)	01(00.69)

MARITAL STATUS			
Married	67(82.71)	46(73.02)	113(78.47)
Widow/ Widower	14(17.28)	15(23.81)	29(20.14)
Divorce	-----	02(03.17)	02(01.39)

Table 2: Morbidity Pattern of Elderly

DISEASES	MALE(%)	FEMALE(%)	TOTAL(%)
B.P.	71(87.65)	57(90.48)	128(88.88)
Diabetes	71(87.65)	54(85.71)	125(86.80)
Bronchial asthma	68(83.95)	51(80.95)	119(82.63)
Cataract	51(62.96)	42(66.67)	93(63.58)
Osteoarthritis	55(67.90)	35(55.56)	90(62.50)

Table 3: General Examination of Elderly

	Height/Weight			Temprature			Blood Pressure		
	Male (%)	Female (%)	Total (%)	Male (%)	Female (%)	Total (%)	Male (%)	Female (%)	Total (%)
Normal	25 (30.86)	26 (41.26)	51 (35.41)	81 (56.25)	63 (43.75)	144 (100)	81 (56.25)	63 (43.75)	144 (100)
Over/high	28 (34.57)	16 (25.39)	44 (30.55)						
Below/ Low	28 (34.57)	21 (33.33)	49 (34.02)						
Total	81 (56.25)	63 (43.75)	144 (100)						