

Knowledge, Attitude And Practice of Native Gilanian Students of Shaheed Beheshti University of Medical Sciences, About Fascioliasis Disease

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Received: August, 2004

Accepted: March, 2005

Abstract

Background and purpose: Health care professionals work to solve health problems of the society. This is the duty of health system to identify the gaps in health professionals' competence and asks the medical school to fill the gap. We took one important health problem Fascioliasis and determined the amount of knowledge, attitude and practices of Gilani students studying at Medical University of Shaheed Beheshti, about Fascioliasis disease.

Methods: This study was carried on 135 male and female Gilani students studying at different degrees in the age range of 18 to 37. The data was gathered by questionnaire surveys and then validated through content validity and reliability by test-retest method. Data analysis was carried out by SPSS and Microsoft Excel soft wares. To examine the correlation between variables, the T-Test and variance analysis test was used.

Results: The research findings revealed that the community under study has an average practice. In all three parameters, however, the average scores of females are greater than males.

Conclusion: It is recommended to revise the educational programs for the students so that the students of every region become familiar with health problems of their regions

Keywords: KNOWLEDGE, ATTITUDE, PRACTICE, FASCIOLIASIS, THE STUDENTS OF MEDICINE

Journal of Medical Education Summer 2005; 7(2);73-76

Introduction

Health care professionals work to solve health problems of the society. This is the duty of health system to identify the gaps in health professionals' competence and asks the medical school to fill the gap. Moreover as people refer to medical students for medical advice they will be the primary source of health care. Therefore, measuring knowledge, attitude and practice of this group can provide valuable information about

training needs and deficiencies of them for authorities and decision makers. To investigate whether the current educational program is efficient for delivering needed education on important health care subjects for students of different region Fascioliasis was chosen for an audience of Gilani students.

Fascioliasis is caused by swallowing parasite in the larvae stage, which resides on the aquatic plants and raw vegetables. It rarely caused by drinking contaminated water. Human fascioliasis is no longer considered as a secondary zoonotic disease, but as an important human parasitic disease (1). In the case of human Fascioliasis, the greatest health problems are in the Latin America, North of Africa, Iran and the west

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of Europe. In 1988 and 1989, an outbreak, considered the biggest in the world occurred in the Gilan province and infected at least 10,000 people. Another outbreak occurred after ten years, in 1998 and 1999, again in the Gilan province(2). The prevalence of disease is mainly in the Gilan, Mazandran and Khozestan Provinces. The diagnosis is carried out by excretion and serology tests, and by investigating clinical symptoms. Patients are treated with triclabendazole as the first selected drug according to WHO protocol (3,4). Because of diagnostic difficulties, all efforts must be focused on the control and prevention of disease.

Methods

The research is a descriptive-analytical study, which carried out on 135 students studying at different levels form MSc to Ph. D., in 8 faculty of Shaheed Beheshti University of Medicine in the year 2002. Data was gathered by questionnaire surveys containing 31 questions (9 questions on demographic information, 9 on knowledge, 7 on attitude and 6 on practices). In order to determine the scientific validity of the questionnaire, the content analysis by expert was carried out and for reliability the test-retest method was used. In order to score the level of knowledge, one point was considered for each correct answer and no point for a wrong answer. The answers to attitude questions were scored in a similar way as Likert scale ranging from -2 to +2. For each correct answer to a practice question, one point and for each wrong answer no point was considered. Considering all the variables, for comparison of mean values the T-Test and for examining the correlation between the scores of knowledge, attitude and practices and variables such as educational profile, residence and etc. the analysis of variances were used. The data was analyzed by SPSS software.

Results

Of all subjects 94.5 percent were single and 66.66 % was female. Regarding the age of the

participants 13.33 % were under 20, 7.11 % were between 20 and 24 and the others were between 25 and 30 years old. The respondent educational levels were as follows: technical diploma 11.1 %, BSc 54.8%, MSc 3. 7% and PhD 30.4 %. Of all subjects 43 percent resided in Rasht and suburbs, 24% in east of Gilan, 13% in Lahijan, 10% in west of Gilan and the rest in south of Gilan.

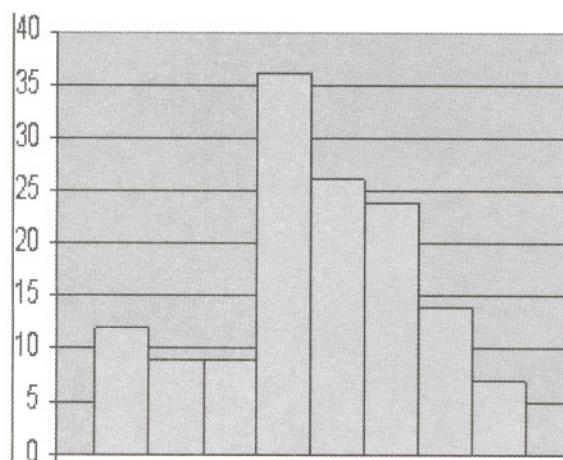
Of all students under study, 83.7% were familiar with Fascioliasis disease. The information resources of 30.4% were university courses, 90% found information in media, 3.0% self-studied. In General, after calculating the scores of knowledge the mean score was 4.2 that was considered an average grade (3.6 to 5.4) (fig. 1). As shown in Table 1, the most appropriate situation of attitude in accumulated questionnaires was related to question No.6 about the effect of health training on the control of epidemic. Generally a mean score of 5.3 for attitude is regarded as an acceptable level of attitude about the disease. After calculating scores of practices, the maximum and minimum of scores were between 0 and 6 with a mean value of 2.6. Therefore, the overall practices of the community under study are evaluated to have an average level.

Table 1. Frequency Distribution of the students under study verse answers to the attitude questions

Attitude Questions	Completely agree and agree		Completely disagree and disagree		Neutral	
	No.	Percent	No.	Percent	No.	Percent
1- consumption of fried vegetables for prevention of disease	79	56.3	30	22.2	29	21.5
2- The possibility of infection by swimming in the regional rivers	35	25.9	33	24.5	67	46.6
3- Transmission from infected person to uninfected.	64	47.4	30	22.2	41	30.4
4- Consulting with your doctor after consumption of suspicious vegetables.	95	70.4	6	4.4	34	25.2
5- Avoiding consumption of raw vegetables for prevention of disease	83	61.5	29	21.5	23	17.0
6- The effectiveness of health training on the control of epidemic.	120	88.9	5	3.7	10	7.4
7- Washing vegetables with disinfectant materials.	120	88.9	9	6.7	6	4.4

Table 2. Frequency distribution of the community under study versus practices regarding action for prevention of disease

Practices Questions	Avoiding consumption of suspicious raw vegetables		Avoiding consumption of raw vegetables		Boiling water for drinking		Observing individual health		Careful disinfection of vegetables		A combination of actions		I don't know		Total No. of questionnaire	
	No.	Percent	No.	Percent	No.	Percent	No.	Percent	No.	Percent	No.	Percent	No.	Percent	No.	Percent
Action for prevention	43	32.8	5	3.7	2	1.5	5	3.7	47	35.9	4	3.1	45	34.3	31	100.0

Fig 1. Histogram of awareness of the community under study

Discussion

Of all students 94.8% are in the age group of youth (18-29) and this makes planning easy for the young population of the country. The marital status (5.5 percent are married) is in correspondence with the situation of the students of the whole country. The greatest number of students was resident of Gilan, as 48% are resident of Rasht and suburbs. Regarding the population of these regions to the total population of province and the situation of literacy in the province, this seems to be correct. The amount of awareness of the community under study about Fascioliasis disease is evaluated at an average level. It was expected that considering educational field of students and the occurrences

of outbreaks in the residential regions, the level of awareness will be greater, but in some areas that was not true. Therefore training is recommended for improving the level of awareness. Specially, training is necessary for basic actions to control disease in human, the most prevalent symptoms of disease, the correct method of diagnostics and the most effective existing drug for treatment. In overall ranking of scores, the rank of attitude is good. Some attitudes of students such as role of training in the control of epidemic and emphasis on disinfection of vegetables prior to usage for prevention of disease have a very high rank and provide a good basis for training and practices of this group.

The practices of the community under study regarding Fascioliasis disease are at an average level. The community under study had good practices in some areas such as acting for treatment of themselves and their families if the condition is contracted. Poor practices, however, was observed in some areas such as the method of washing and cleaning raw vegetables, consumption of native raw vegetables and action for prevention of disease, such that about 88% of the community under study consumes raw native vegetables and 62% of them did not wash raw vegetables appropriately. In general, women have a better awareness, attitude and practices in comparison with men. Considering the role of women in the family and training of children, this regarded as a positive point.

It is recommended to revise the educational

programs for the students so that the students of every region become familiar with health problems of their regions. It is also recommended to revise the educational programs to prepare the students for appropriate health care services.

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