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Knowledge assessment of respondents regarding chronic renal failure disease a hospital based study

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Abstract

Nutrition is very essential part in our daily life and it is directly correlated with diet, health and diseases. Having knowledge of any disease and their causes, dietary precautions, as well as treatment is a very important aspect to fight against diseases. 209 chronic renal failure patients were selected for the study, out of which 105 patients were nutritionally counselled and 104 were not nutritionally counselled. To collect the data questionnaire cum schedule method were used. It was found that out of total 52.2% respondents had sufficient knowledge regarding symptoms of disease while 69.4% respondents had sufficient knowledge regarding special nutrients required in chronic renal failure. Out of total 51.2% were having sufficient knowledge regarding restricted food items in chronic renal failure, 43.1% knew about balanced diet and 65.6% had knowledge about low sodium and protein diet. Knowledge of 57.9%, 55%, 67%, 78.9% respondents having low potassium diet in chronic renal failure, water balance, health education and green leafy vegetarian respectively. The finding is that among those patients most have not the complete knowledge about the chronic renal failure disease.

Keywords: Respondents regarding chronic renal failure disease a hospital based study

Introduction

For centuries man has known that there are direct casual relationships between nutrition and diseases. Nutrition is very essential part in our daily life and it is directly correlated with diet, health and diseases. The nutritional situation of any community is based on certain socio-economic conditions such as occupation, education, background and their eating habits. Having knowledge of any disease and their causes, dietary precautions, as well as treatment is a very important aspect to fight against diseases. Nutrition involves to identifying how certain diseases, conditions or problems may be caused by dietary factors, such as poor diet (malnutrition), food allergies, metabolic diseases etc. and also focuses on how diseases, conditions and be prevented with a healthy diet.

Nutrition mainly deals with food and how body uses it to keep our body cells running properly; they must be supplied with correct amount of the right chemicals in food. In our body system one of the most important organ is kidney which manages numerous biological homeostatic balances of bodily fluids by filtering and secreting metabolites such as urea and minerals from the blood and excreting them, along with water and urine. Chronic renal failure (CRF) is a complex disease which develops as a result of chronic, progressive and irreversible glazing of the renal glomeruli and fibrosis of the renal interstitial. The disease process results in a gradual decrease in the number of functioning nephrons, which leads to increasing homeostatic, endocrine and excretory disturbances of kidney functions.

Material and Methods

The study was conducted at nephrology unit, Institute of Medical sciences, Banaras Hindu University Varanasi. 209 chronic renal failure patients were selected for the study, out of which 105 patients were nutritionally counselled and 104 were not nutritionally counselled. To collect the data questionnaire cum schedule method were used.

The main aim of this study is to describe and discuss the various material and methods which were used to obtain valuable data. It also describes the research procedure, techniques and tools for collection of accurate data which were directly related to aims and objectives of the study and is given under the following headings:

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Selection of the study

- Period of the study
- Procedure of sampling
- Variables of the study
- Tools and techniques of data collection
- Validity and reliability,
- Statistical

This study was based on nutritional evaluation of dietary pattern and knowledge assessment in patients suffering from chronic renal failure. The evaluation approach to research is influenced by much greater control over the research the research environment and in this case some variables are

adjusted to observe their effect on other variables.

Tools and procedure of data collection

- Interview cum schedule methods was used
- Assessment method of chronic renal failure was used
- Observation method was used

Methods used for statistical analysis

- Frequency
- Percentage

Result and Discussion**Table 1:** Distribution of Respondents According To Their Knowledge Level Regarding Chronic Renal Failure Disease

Variables	N=209					
	Counselled (n=105)		Non-Counselled (n=105)		Total	
	N	%	N	%	N	%
Symptoms of disease	52	49.5	57	54.8	109	52.2
Special nutrients required in CRF	67	63.8	78	75	145	69.4
Restricted food items	53	50.5	54	51.9	107	51.2
Balanced diet	41	39.0	59	47.1	90	43.1
Low protein diet	37	35.2	38	36.5	75	35.9
Low sodium diet	65	61.9	72	69.2	137	65.6
Low potassium diet	58	55.2	63	60.6	121	57.9
Water balance	52	49.5	63	60.6	115	55
Health education	71	67.6	69	66.3	140	67
Green leafy vegetables	87	82.9	78	75	165	78.9

It was found from above table that out of total 52.2% respondents had sufficient knowledge regarding symptoms of disease while 69.4% respondents had sufficient knowledge regarding special nutrients required in CRF. Out of total 51.2% were having sufficient knowledge regarding restricted food items in CRF, 43.1% knew about balanced diet and 65.6% had knowledge about low sodium and potassium diet. Knowledge of 57.9%, 55.0%, 67.0%, 78.9%, respondents having low potassium diet in CRF, water balance, health education and green leafy vegetarian respectively. From the above table it is clear that most of that patients have not complete knowledge about chronic renal failure disease.

Summary and Conclusion

It was observed that 51.2% and 43.1% of study subjects had knowledge that which food items should be prohibited and taken during the illness which as 35.9%, 65.6% and 57.9% of patients had knowledge regarding intake of low protein, sodium and potassium diet in their meal respectively. The proportion of counselled patients were lower than the non-counselled patients but statistically, these differences are not significant. Awareness regarding nutrition after confirmation of disease, balanced diet and utilization of green leafy vegetables were good whereas majority 67.0% of respondents were of the views that health education regarding nutritional awareness should be provided to the patients.

Recommendations

Develop dietary guidelines for pre and post knowledge regarding chronic renal failure and distribute among general public.

Medical persons take initiative to aware them about their pre symptoms of the disease.

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