INCREASING AWARENESS IN COMMUNITY AGAINST MISCONCEPTION OF DIARRHEA

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ABSTRACT:

As per W.H.O and UNICEF every year we have about 2 billion case of diarrhea. Globally it has been seen that in children below 5 years of age, diarrhea is the second leading cause of death.

The world Diarrhea is derived from the Great word 'Diarrhea' which means 'flowing through'. According to WHO diarrhea is defend as having three or more loose or liquid stools per day, or having more stools than normal for any individual.

In the recent years some years some improvement is seen in the knowledge regarding diarrhea, since ages oral rehydration therapy (ORT) is the main management procedure. With increased fluids and continued feeding, diarrhea affected children should be given zinc supplementation at 20 mg for 10-14 days. For prevention of diarrhea some important strategies such as sanitation improvements, breast feeding among in Infants should be encouraged. Weaning education programs can reduce diarrhea mortality, hygienic food handling and storage practices can reduce the risk of contamination Vitamin 'A' intake should be encouraged.

Keywords: Dehydration, Electrolytes, Home remedies.

INTRODUCTION:

In India there are several diseases, but main cause of every disease is same, that is our unhygienic habits and dirty resources of drinking water and our immediate proximity where we live. There is no cleanness in such places and result is that thousands of children get effected with it. Half population of children dies due to these diseases. Diarrhea is an increase in the frequency of bowel movements or decrease in the form of stools (greater looseness of stools). Frequency of bowel movement and stool looseness vary from time to time. Diarrhea needs to be distinguished from four other conditions- these four conditions have different causes and different treatments than diarrhea.

THESE OTHER CONDITIONS ARE:

- 1) Incontinence of stools- which is the inability to control bowel movements until an appropriate time for example until one can get to
- 2) Rectal Urgency- which is a sudden urge to have bowel movements that is so strong that if a toilet is not immediately available there will be incontinence.
- 3) Incomplete Evacuation- Which is a sensation that another bowel movements is necessary soon after a bowel movements yet there is difficulty passing further stool the second time.
- 4) Bowel Movement- Which is immediately after eating a meal

TYPES OF DIARRHEA:

- 1:- Acute Diarrhea- This lasts from a few days up to a week.
- 2:- Chronic Diarrhea- It can be defined in several ways but almost always lasts more than three weeks.
- 3:- Traveler's Diarrhea- It can be defined that they can cause disease in the small intestine and colon. There are many strains of E.coll bacteria.

DIARRHEA AT A GLANCE:

- 1) Diarrhea is an increase in the frequency of bowel movements, and increase in the looseness of stools or both.
- 2) Diarrhea can be defined absolutely or relatively.
 - (a) Absolute Diarrhea is defined as more than five bowel movements a day or liquid stools.
 - (b) Relatively Diarrhea is defined as an increase in the number of bowel movements for per day or an increase in the looseness of stools compared with an individual's usual bowel habit.
- 3) Diarrhea is of 2 types depending on the duration. It can be Acute or chronic, the treatment and causes of these diarrhea are different from each other.
- 4) Diarrhea can lead to dehydration, electrolytes abnormalities and Anus irritation
- 5) Dehydration can be treated with oral rehydration solution and if necessary with intravenous fluids.
- 6) Tests that are useful in the evaluation of acute diarrhea include examination of stools for white blood cells and parasites, cultures of stools for bacteria, testing of stool for the toxin of difficult and blood tests for electrolyte abnormalities.

Complication and health problem out come by Diarrhea:

Complications are uncommon but first we check following symptoms:

- 1-Blood in child stools
- 2-Dehydration (little urine)
- 3-Dry mouth and tongue
- 4-Vomiting that continues for more than a day
- 5-Headache and loss of appetite
- 6-Cramping stomach pains and an urgent need to go the toilet
- 7-Dizziness from dehydration
- 8-Frequent loose, watery stools
- 9-Fever

These are main complications and symptoms of diarrhea.

OBJECTIVE:

- 1. To know the misconception prevailing in the society about diarrhea.
- 2. To know about problem area.
- 3. To know the cause of diarrhea.

The objective of this paper is to know the causes of the disease and its prevention and to give information to people that treat the disease properly and prevent it and eradicate the misconception among ill-literate women and try to change the misconception of people, thus the main purpose is to bring about a change in the knowledge, attitude and practices of the people.

Why this topic was chosen:

I did so because the subject is scouring the world's major disease causing many factor and children die every year because of this. I want to make every detail of the problem and want to help people so it could be stopped from spreading and help people and can explain it easily how to protect from diarrhea.

METHODOLOGY: A sample of people was selected in various localities. There was no specific age group of the person having diarrhea. The samples were selected randomly for information about this disease through a questionnaire. A questionnaire Is a design of tools which will help to take out the result and conclusion. In this tool we use the technique of asking questions to an individual about his problem, reasons of enhancing this problem and its complications.

Questionnaire was divided into two sections. First section dealt with general information such as age, occupation, social-eco status otc. Second section dealt with specific question regarding diarrhea.

STATISTICAL ANALYSIS

1. Distribution of data according to Life Style

Type of Workers	No of Person	Tally	Percentage
Sedentary Worker	10	##	40
Moderate Worker	6	#	24
Heavy Worker	9	 	36
Total	25		100

2. Distribution of data according to family members

Members in family	No of Person	Tally	Percentage
3 to 5	6	 	24
6 to 8	8	 	32
9 to 11	5	 	20
12 to 14	6	 	24
Total	25		100

3. Distribution of data according to Food

Type of Food	No of Person	Tally	Percentage
Type of Food	8	 	32
Simple food	11	 	44
Nutritious Food	6	 	24
Total	25		100

4. Distribution of data according to Drinking Water

Type of water	No of Person	Tally	Percentage
Tap water	12	 	48
Tube well	9	 	36
Any other Source	4		16
Total	25		100

5. Distribution of data according to place where you get drinking water

Place	No of Person	Tally	Percentage
Clean	15	 	60
Unclean	10		40
Total	25		100

6. Distribution of data according to Child Age

Age	No of Child	Tally	Percentage
6 months to 1 year	13	 	52
1 to 2 year	8	 	32
3 to 4 year	4		16
Total	25		100

7. Distribution of data according to knowledge of Diarrhea

Knowledge of Diarrhea	No of Child	Tally	Percentage
Yes	12	 	48
No	6	#	24
No knowledge	7	 	28
Total	25		100

8. Distribution of data according to knowledge about child's diarrhea

Symptoms	No of Child	Tally	Percentage
Frequent passage of stools	10		40
Cramping stomach pains	8	<u>=</u>	32
Loss of appetite	7	=	28
Total	25		100

9. Distribution of data according to domestic treatment given when child has diarrhea

Solution	No of Child	Tally	Percentage
Gave O.R.S. solution	10	##	40
Stopped feeding anything	9	 	36
Took baby to the Doctor	6	 	24
Total	25		100

10. Distribution of data according to treatment given to the child

Type of Treatments	No of Child	Tally	Percentage
Consult Doctor	5	 	20
Went to aganwadi worker	8	 	32
Home remedies	12	 	48
Total	25		100

11. Distribution of data according to food given to child

Type of food	No of Child	Tally	Percentage
Solid-food	4		16
Semi-solid	5	 	20
Liquid-diet	9	 	36
Semi-liquid	7	 	28
Total	25		100

12. Distribution of data according to child's health

Health of child	No of Child	Tally	Percentage
Completely cured	15	 	60
Little bit weak	10	 	40
Total	25		100

13. Distribution of data according to nutritious food included in child's diet

Nutritious food	No of Child	Tally	Percentage
Yes	6	 	24
No	14	 	56
No answer	5	 	20
Total	25		100

14. Distribution of data according to with drawl of mother's feed

Stop feeding	No of Person	Tally	Percentage
Yes	8	 	32
No	12	 	48
No answer	5	 	20
Total	25		100

15. Distribution of data according to knowledge that diarrhea is harmful or not

Knowledge	No of Person	Tally	Percentage
Yes	7	#	28
No	8	 	32
No answer	10	 	40
Total	25		100

16. Distribution of data according to duration of O.R.S. given

Time duration	No of Person	Tally	Percentage
2 to 3 times	7	#	28
4 to 5 times	8	==	32
6 to 7 times	10	##	40
Total	25		100

17. Distribution of data according to prevalence of diarrhea at the moment

	No of Person	Tally	Percentage
Yes	10	##	40
No	6	 	24
No answer	9	 	36
Total	25		100

18. Distribution of data according to recovery time

Recover time	No of Person	Tally	Percentage
2 to 3 days	4		16
1 week	10	## ##	40
2 week	11	 	44
Total	25		100

19. Distribution of data according to change in the attitude of family members

Change of attitude	No of Person	Tally	Percentage
Became more careful	10	 	40
Pay more attention	8	 	32
Pay more attention	7	 	28
Total	25		100

20. Distribution of data according to increase in awareness regarding hygiene & sanitation of the locality area

Cleaning your neighborhood	No of Person	Tally	Percentage
Yes	8	 	32
No	8	 	32
No answer	9	 	36
Total	25		100

21. Distribution of data according to step taken by family members for preventing reoccurrence

Step taken	No of Person	Tally	Percentage
Yes	10	 	40
No	6	 	24
No answer	9	 	36
Total	25		100

22. Distribution of data according to various steps taken for prevention of reoccurrence of diarrhea

Type of step	No of Person	Tally	Percentage
Cleaning your house	12	## ##	40
Clean hands	4		16
Drinking filters water	9	 	36
Total	25		100

RESULT

- (1) Table no.1 indicates that 40% of sample belongs to sedentary worker, 24% are moderate and 36% are heavy worker.
- (2) Table no.2 indicates that 24% person belong to three to five family members, 32% people belong to six to eight family members, 20% belong to nine to eleven and 24% people belong to twelve to fourteen family members.
- (3) Table no.3 indicates that 32% people are eating oily and fatty food, 44% are eating simple food and 24% are eating nutritious food.
- (4) Table no. 4 indicates that 48% people are drinking tap water, 36% people are drinking tube-well water and 16% people are using any other source of water.
- (5) Table no. 5 indicates that 60% people are taking water from clean place and 40% people are taking from unclean place.
- (6) Table no.6 indicates that that 52% samples are of 6 months, 32% are of 2 year and 16% are of 4 years.
- (7) Table no.7 indicates that 48% persons know about diarrhea, 24% do not know anything regarding diarrhea and 28% do not show any interest regarding diarrhea.
- (8) Table no.8 indicates that 40% children have frequent passage of stools, 32% have cramping stomach pains and 28% have loss of appetite problem.
- (9) Table no.9 indicates that 40% children are taking O.R.S. solution, 36% stopped feeding anything and 24% are consulting doctor.
- (10) Table no.10 indicates that 20% children are going to doctor, 32% are going to aganwadi worker and 48% use home remedies.
- (11) Table no.11 indicates that 16% children are consuming solid food, 20% semi-solid, 36% liquid-diet and 28% are consuming semi liquid food.
- (12) Table no.12 indicates that 60% children were healthy before onset of diarrhea and 40% were little bit weak before this disease.
- (13) Table no.13 indicates that 24% children are taking nutritious food, 56% are not taking and 20% show no interest.
- (14) Table no.14 indicates that 32% mothers stopped feeding during diarrhea, 48% mothers still feeding their child and 20% gave no answer about this.
- (15) Table no.15 indicates that 28% people have know that disease is harmful, 32% people were not aware of its seriousness and 40% do not give any answer.
- (16) Table no.16 indicates that 28% people are giving O.R.S. 3 times in a day, 32% 5 times in a day and 40% 7 times in a day.
- (17) Table no.17 indicates that 40% children had still diarrhea even treatment was going on, 24% had not and 36% do not know about this.
- (18) Table no.18 indicates that 16% children take 3 days to recover 40% take 1 week and 44% take 2 week to recover.
- (19) Table no.19 indicates that 40% people have changed their attitude, 32% people pay more attention and 28% people's attitude has not changed.
- (20) Table no.20 indicates that 32% people are aware regarding hygiene, 32% are not aware and 36% are not interested in this.
- (21) Table no.21 indicates that 40% families have taken step to stop occurrence of diarrhea, 24% families have not taken any step and 36% are did not gave appropriate answer.
- (22) Table no.22 indicates that 48% people are aware of cleaning house, 16% people are aware of clean hands and 36% people are drinking filtered water.

SUGGESTIONS

Diarrhea may be described as soft loose or semi-liquid stools passed several times a day. There is usually a sense of urgency and some feeling of malaise.

What is eaten can make a big difference. Consultation with a dietitian will ensure that nutrient needs are being met while managing these side effects. While conducting this project I got to know that an individual can get so many complications and health problem through diarrhea which can effect his daily life. According to me they can prevent diarrhea by following steps:

- Eat small, frequent meals served at room temperature.
- Eat more foods such as oatmeal, applesauce, grated apples, pears, potatoes (no skin), white rice, bananas, canned fruit (rinse off the syrup), yams, squash, and taro root. Limit raw salads, bran, seeds, grain husks, and popcorn.
- Eat high potassium foods to replace electrolyte losses bananas, apricot and peach nectars, winter squash and potatoes.
- If diarrhea is caused by dairy products avoid all milk, cheese, yogurt, butter, and ice cream.
- Avoid greasy, high-fat foods. Avoid foods high in sugar.
- Drink plenty of non-caffeinated beverages, water, sports drinks, non-caffeinated sodas and broths.
- Avoid clear apple juice. Sometimes citrus juices can also cause problems.
- If cramping and gas is a problem, avoid carbonated drinks, beans, cabbage, broccoli, cauliflower, highly spiced foods, sweets, and orbital-sweetened chewing gum.
- Avoid caffeine, alcohol, and nicotine due to their effect of stimulating the intestinal tract.
- Use clean and safe water for drinking and cooking purpose and follow hygiene.

CONCLUSION

Effective Implementation of preventive strategies requires the involvement of a range of sectors is health, water supply and sanitation. Some diarrhea which accrue, due to medical conditions cannot be avoided by infectious diarrhea can be prevented.

The best way to avoid it is to avoid the contact with the infectious agents. For all cases, Rehydration is the most important thing. Use of probiotics can act by mechanisms like colonization resistance, production of antimicrobial substances. Changing the diet can help to reduce diarrhea to some extent. Instead of greasy, fatty or fried food, go for the BRAT diet:

B-Bananas

R-Rice

A-Applesauce

T-Toast (while bread)

One should not consume drinks that have caffeine and can induce laxative effect. Sometimes diarrhea can make one lactose intolerant. One should be encouraged to avoid infections with good hygiene habits.

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