



A STUDY TO ASSESS THE KNOWLEDGE OF WOMEN REGARDING ZIKA VIRUS AMONG WOMEN IN ANAGAPUTHUR, CHENNAI.

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ABSTRACT

Zika virus is an RNA virus which belongs to the Flaviviridae family. It is generally transmitted by mosquito bites. Symptomatic illness associated with zika virus infection is usually mild and self-limited. However, an ongoing outbreak in Brazil has been associated with reports of Guillain Barre syndrome and foetal microcephaly. The link of both of these conditions is not yet causally proven. In response, the WHO declared that the current outbreak constitutes a public health emergency and international concern (PHEIC) in February 2010. The zika virus was first detected in a monkey recovered from the zika forest in Uganda in 1947 and was later seen in specimen of aedes African mosquitoes from the same forest in 1948, the first case of zika infection of a human was recorded in Nigeria in 1952. A study finds evidence that people in trench polynexia affected by Guillain Barre syndrome exposed to zika virus. Researchers estimate that 1 in 4000 zika infectious could lead to the rare neurological syndrome. A new study tends support to one of the biggest fears about zika virus. It might increase the risk of the rare neurological syndrome Guillain Barre.

Key words: Knowledge, Zika virus

INTRODUCTION:

Researches in French Polynesia and Europe looked at those 42 cases of Guillain barre in the pacific island nation b/w October 2013 and April 2014. They asked whether there was an evidence these patients had been exposed to zika virus. The researchers found that 98% of the Guillain-Barre patients had antibodies to zika.

A member of the Brazilian armed forces looks for larvae of the aedes Egypt mosquito, which transmits dengue and chikungunya fever and zika virus at a school in Brasilia.

In a new study in the journal the lancet infectious disease moderates. Calculate the zika virus during the year 9.9 million travellers left 146 Brazilian airports near areas known to be conducive to zika virus transmission for destinations around the world. According to the researcher's calculation about 200 million Americans more than 60 % of the population reside in areas of the united states. The zika virus is a mosquito borne illness spread ignored or considered the flu.

In early 2015 brazil experienced a spike in zika virus cases and the virus quickly spread throughout other parts of the Americas. It would have been introduced in 2014 when brazil stede fifa world cup and an international canalling competition. The zika virus is now in 23 countries in the America.

DEFINITION:

Zika fever is an illness caused by the zika virus most cases have no symptoms, but when present are usually mild and can resemble dengue fever.

SINGS & SYMPTOMS

- ❖ Fever
- ❖ Skin rashes
- ❖ Conjunctivitis
- ❖ Muscle & joint pain
- ❖ Malaise
- ❖ Headache

These symptoms are usually mild last for 2-7 days.

DIAGNOSIS:

- ❖ Symptoms & Recent history
- ❖ Laboratory testing for the presence of Zika virus RNA in the blood.

TREATMENT:

- ❖ No vaccine available
- ❖ Treatment will be symptomatic.

PREVENTION:

- ❖ Mosquitoes and their breeding sites pose a significant risk factor for Zika virus infection prevention and control relies on reducing mosquitoes through source reduction and reducing contact between mosquitoes and people.

REDUCING CONTACT BETWEEN MOSQUITOES AND PEOPLE:

- ❖ Using insect repellent regularly
- ❖ Wearing clothes that cover as much of the body as possible
- ❖ Using physical barriers such as window screen
- ❖ Closed doors and windows & if needed
- ❖ Additional personal protection such as sleeping under mosquito nets during day
- ❖ It is extremely important to empty, clean or cover containers regularly that can store water such as buckets, drums, pots etc,

REDUCING MOSQUITOES THROUGH SOURCE REDUCTION:

- ❖ Mosquito breeding sites should be cleaned or removed including flower pots, used tyres and roof gutters.
- ❖ Communities must support the efforts of the local government to reduce the density of mosquitoes in their locality

METHODS:

This present study was conducted at anagaputhur Chennai. The sample for this study consists 30 women who resides at anagaputhur. **SAMPLING TECHNIQUE:** The sample was selected based on convenient sampling that fulfilling the criteria set by the investigator. **RESEARCH DESIGN:** Descriptive study was adopted

PART –I -DEMOGRAPHIC DATA OF WOMEN INCLUDE

1. Age 2. Educational status 3. Occupation 4. Total family income 5. Religion

PART-II

It includes 20 open ended question regarding zika virus.

DATA COLLECTION PROCEDURE: The women from anagauthur were questioned individually.

INCLUSION CRITERIA:

- Those who were willing to participate in the study.
- Those who understand Tamil and English.

EXCLUSION CRITERIA:

- Those who were not willing to participate in the study.

CRITERIA FOR SCORING:

- Mark given for wrong answer: 0
- Mark given for correct answer: 1

LEVEL OF KNOWLEDGE	PERCENTAGE
Adequate knowledge	More than 70%
Moderate knowledge	50 – 70%
Inadequate knowledge	Less than 50%

RESULT:

The study findings revealed that

- The majority 20(67%) of them were 26-30, 6(20%) of them were 20-25 years, 2(6.5%) of them were 31-35 year and 2(6.5%) of them were 36-40 years.
- The majority 17(56.7%) of them had studied up to 10th standard, 9 (30%) of them were up to 12th standard 4(13.3%) were graduates and no one were literature.
- The majority 24 (80%) of the women in Hindu, 5 (16.7%) of the women in Christian and 1(3.3%) of women in Muslim
- The majority 13(43.3%) of their family income was Rs 21,000 -25,000, 9 (30%) of their family income was Rs 16,000-20,000, 5 (16.7%) of their family income was 11,000- 15 ,000 and 3(10%) of their family income was 5,000- 10,000.
- The majority 15(50%) of the women had inadequate knowledge 12 (40%) of the women had moderate knowledge and 3 (10%) of the women had adequate knowledge.

DISTRIBUTION OF WOMEN ACCORDING TO THE LEVEL OF KNOWLEDGE

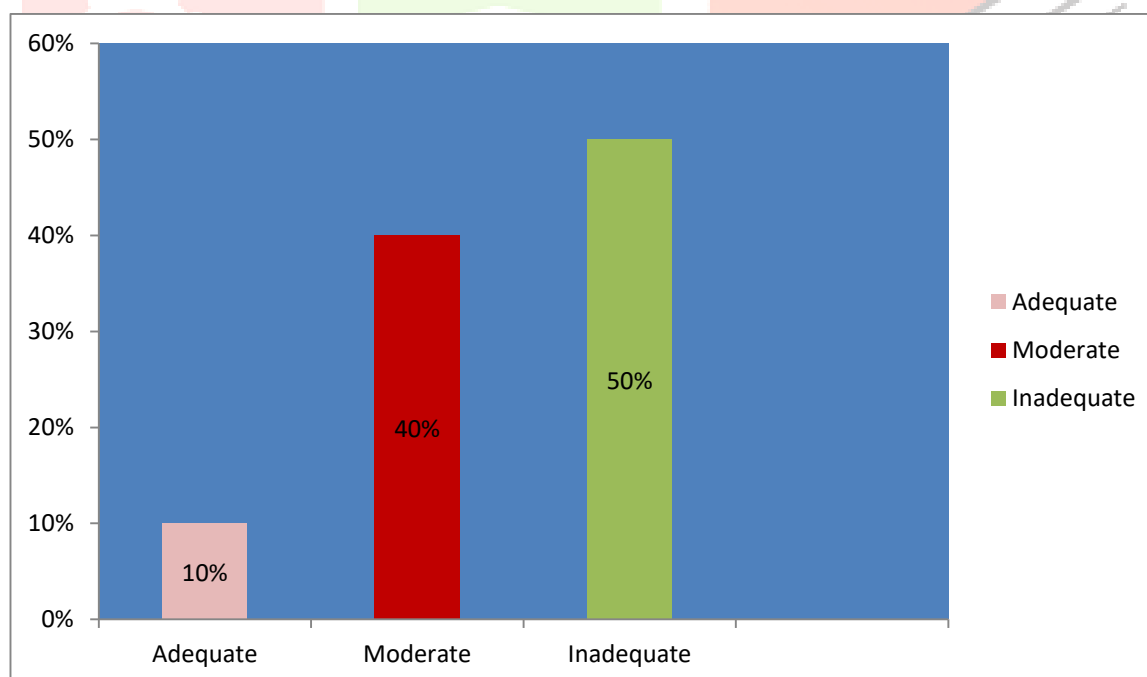


Figure – 4 Shows that 10% of the women had adequate knowledge 40% of women had moderate knowledge and 50% of women had inadequate knowledge about zika virus

CONCLUSION:

The study was on” **ASSESS THE KNOWLEDGE OF WOMEN REGARDING ZIKA VIRUS AMONG WOMEN IN ANAGAPUTHUR CHENNAI.** The area selected for the study as Thiruvika street in Anagaputhur urban community 30 samples were personally explained about the procedure and the purpose of study. The questionnaire was prepared and interviewed to individuals after obtaining the consent and then it was analysed.

RECOMMENDATIONS

- Similar study can be done for large number of samples.
- Same study can be conducted in a rural community.
- A comparative study between rural and community can also be conducted.
- Frequent awareness programme is vital in the community area.

BIBLIOGRAPHY

INTERNET REFERENCES

- www.inectcontrol.com
 - www.emedicine.medscape.com
 - www.medicinet.com
 - www.entomology.org
 - www.pubmed.com
 - www.ncbi.nlm.nih.gov/sites/entrez
 - www.google.com
 - www.cnhal.com
 - www.en.wikipedia.org
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