

# frequency

*by* Imran Gilani

---

FILE	16793-65489-1-SM.DOCX (55.44K)		
TIME SUBMITTED	09-DEC-2016 08:13AM	WORD COUNT	2080
SUBMISSION ID	750311491	CHARACTER COUNT	13424

# Frequency of risk factors and awareness regarding ischemic heart diseases among medical students of a private medical college

---

1. Dr. Syed Imran Gilani B.D.S, M.P.H  
23 Assist.Prof. Community & preventive Dentistry,  
Sardar Begum Dental College & Hospital  
Gandhara University Peshawar.  
Email: [imrangilani@hotmail.com](mailto:imrangilani@hotmail.com)

2. Dr Saira Afridi BDS, MPH (Corresponding Author)  
Assist. Prof. Department of Community and Preventive dentistry  
Sardar Begum Dental College & Hospital, Peshawar

## ABSTRACT

**Background:** The burden of disease for Ischemic heart disease is a great public health concern in Pakistan. Since <sup>4</sup> medical students experience highest degree of pressure from studies, thus becoming more vulnerable to <sup>6</sup> risk factors for Ischemic heart disease. This study aims to find out <sup>22</sup> the frequency of risk factors and awareness levels regarding Ischemic heart disease among medical students.

**Methods:** It was a cross-sectional study design. All the students from first and second year MBBS were invited, of which 143 participated. <sup>2</sup> Data was collected using an interview based questionnaire, which included questions regarding frequency of risk factors and awareness level of students regarding ischemic heart disease. Descriptive statistics were drawn using an <sup>13</sup> SPSS <sup>15.0</sup>.

**Results:** Mean age of the study population was <sup>4</sup> 19.8. Vast majority of the students (90.2 %) were well aware of the risk factors associated with Ischemic heart disease. Significant numbers of students were found to be vulnerable to risk factors associated with IHD such as lack of exercise (43%), family history of IHD (27.3%), presence of stress (66.3%) and use of junk food per week (39.1%). No association found between awareness levels of students with smoking habits, exercise, stress, use of oil or ghee and consumption of junk food.

**Conclusion:** Despite the fact that over <sup>4</sup> whelming majority of the students were well aware of the risk factors for IHD, they were significantly prone to common risk factors such as lack of exercise, use of junk food, family history of IHD and presence of stress. These factors may impose both short term as well as long term threats to the overall health of the medical students.

**Keywords:** Ischemic heart disease, awareness, risk factors, medical students, stress.

1

## INTRODUCTION

Ischemic heart disease is, undoubtedly, one of the most vexing and crucial medical problem that face the civilized world today. It does not respect class, race or locality. IHD is major cause of illness and disability and is the leading cause of death in modern world and that is why is considered as great epidemic menace of mid –twentieth century. It is the “Black Death” of our time. Nowadays average healthy adult has got one in five chance of attainment of myocardial infarction before the age of 60 year and has one in fifteen chance of dying from it. Population who live the “good life” are much more likely to have ischemic heart disease than their leaner brethren.<sup>1</sup>

Statistics reveal that in 1937, in USA the death rate due to IHD was 4.8 percent of all deaths, while it was 31 percent in 1967. The enormous increase in this problem over span of 30 years, justifies the term epidemic small wonder, then affluent societies. Incidence of the disease is different in different countries, Death rate due to IHD in 1967; in USA was 350, in Sweden, Italy and Switzerland it was 150. Only East Finland has rate higher than USA. For men between the ages of 35 to 64, death rate in Japan is 64 as compared to 40 in USA, Just as heart disease is the leading cause of death coronary heart disease is the chief from cardiac disease (80%).<sup>2</sup>

In Pakistan Ischemic heart disease (IHD) comprises 23 percent of all cardiac cases admitted in hospital. In a study, Ilyas reported that 28 percent of patients admitted in hospital for IHD are under the age of 45 years. IHD may manifest as angina pectoris, acute myocardial insufficiency or myocardial infarction. According to most careful estimates based on sound scientific studies nearly one hundred thousand individuals suffered an acute myocardial infarction in Pakistan in the calendar year 2010. This is against the back ground of only seven patients suffering heart

attack being admitted in during a five year period (1944-1948) to the Mayo Hospital Lahore, the only major medical facility providing health care to almost all the population of the region.<sup>3</sup>

<sup>21</sup> Coronary artery disease (CAD) is a major health issue in Pakistan, placing a significant burden in <sup>18</sup> terms of morbidity and mortality on the population and the terms of cost on the individual and the public health system.<sup>4</sup> Major risk factors for IHD are divided into non modifiable and modifiable. <sup>9</sup> Non modifiable are age, sex, and family history of IHD in a parent or a sibling. Modifiable include Dyslipidemia, smoking, Hypertension, obesity, Diabetes mellitus, physical inactivity and stress.<sup>5</sup>

<sup>4</sup> Studies indicate the medical students experience highest degree of pressure from studies <sup>6</sup> leading to severe depression. Inam SNB reported (60%) anxiety and depression in medical <sup>7</sup> students,<sup>7</sup> while another study in Karachi reported 70% anxiety and depression among medical <sup>27</sup> students.<sup>8</sup> <sup>5</sup> Several lines of evidence suggest that clinical depression may be a risk factor for coronary artery disease (CAD).<sup>9,10</sup>

<sup>15</sup> Keeping in view the burden of ischemic heart disease, this study is being conducted to find out the frequency of risk factors and awareness among medical students so that better planning and treatment strategies be adopted right from the beginning and disease be prevented in the way to help the community as well as economy of country.

12

## MATERIALS AND METHODS

It was a cross sectional study conducted at Rehman medical college Peshawar. All the students from 1<sup>st</sup> and 2<sup>nd</sup> year MBBS were invited, however 143 participated with a 71% response rate. There were 84 (58.7%) males and 59 (42.3%) female medical students.

An interview based questionnaire was used, divided into two sections. Section A dealt with the awareness levels of the students regarding risk factors for Ischemic heart disease, while section B had questions to determine the frequency of risk factors for ischemic heart disease. The questionnaire contained both open ended and close ended questions. Awareness levels of students were graded by a grid given in table 1.

Table 1. Awareness level Grid

≤5 score (≤34%)	Less aware
6 to 10 score (35% - 66%)	Moderately aware
≥11 score (≥67%)	Well aware

17

An SPSS version 15 was used for data analysis. Frequencies were determined in terms of percentages and presented in the form of bar charts/ pie charts. Chi square test was used to compare categorical data to determine any association.

20

14

## RESULTS

A total number of 143 students participated in the study with 83 students from 1<sup>st</sup> year MBBS and 60 from second year MBBS. Mean age of the study population was 19.8. Out of total, 58.7% (n=84) students were male while 48.3% (n=59) were females. Vast majority of the students were well aware of the risk factors associated with Ischemic heart disease i.e. 90.2%. Only 8.4% of students were moderately aware with 1.4% less aware.

Table 2. Awareness level of Medical Studnets

Awareness Level	Frequency	Percent
Less aware	2	1.4
Moderately aware	12	8.4
Well aware	129	90.2
Total	143	100.0

On comparison no statistical difference was found between awareness levels of first year and second year MBBS students ( $P=0.382$ ). Cross tabulation of awareness levels between male and female students also came out to be statistically insignificant ( $P=0.47$ ). There was no association found between awareness levels of students with smoking habits, exercise, stress or use of oil or ghee.

Table 3. Frequency of Common Risk Factors

Variable		Frequency (n=143)	Percentage%
Do you exercise	Yes	81	56%
	No	62	44%
Do you smoke	Yes	6	4.2%
	No	137	94.8%
Family history of IHD	Yes	39	27.3%
	No	104	72.7%
Medium of cooking	Oil	123	86%
	Ghee	20	14%
Use of Steroids	Yes	9	6.3%
	No	134	93.7%



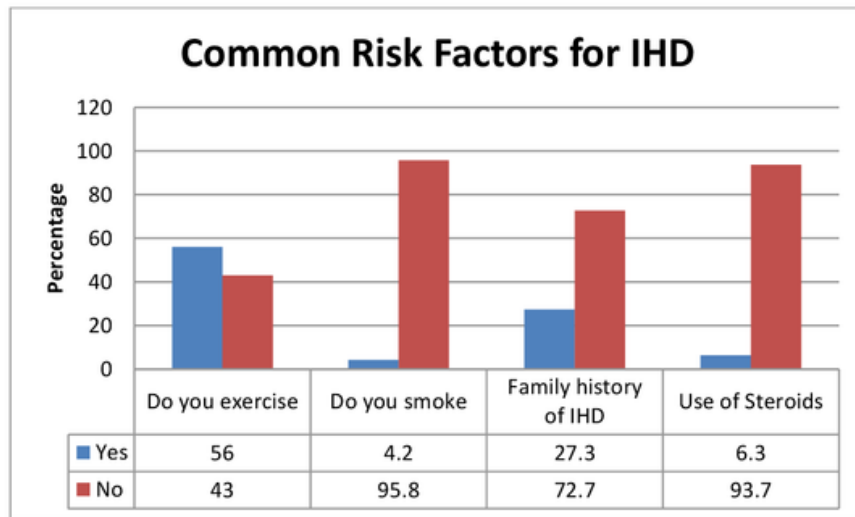


Figure 1. Use of Junk Food in Male & Female students

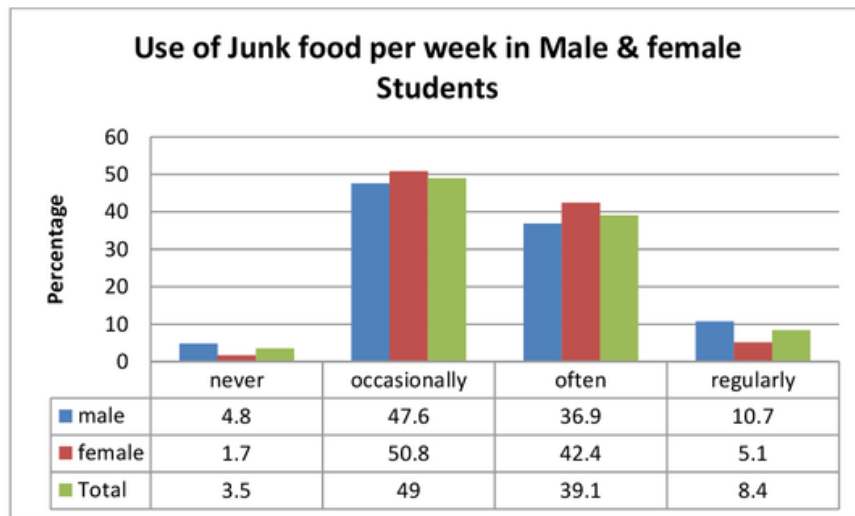
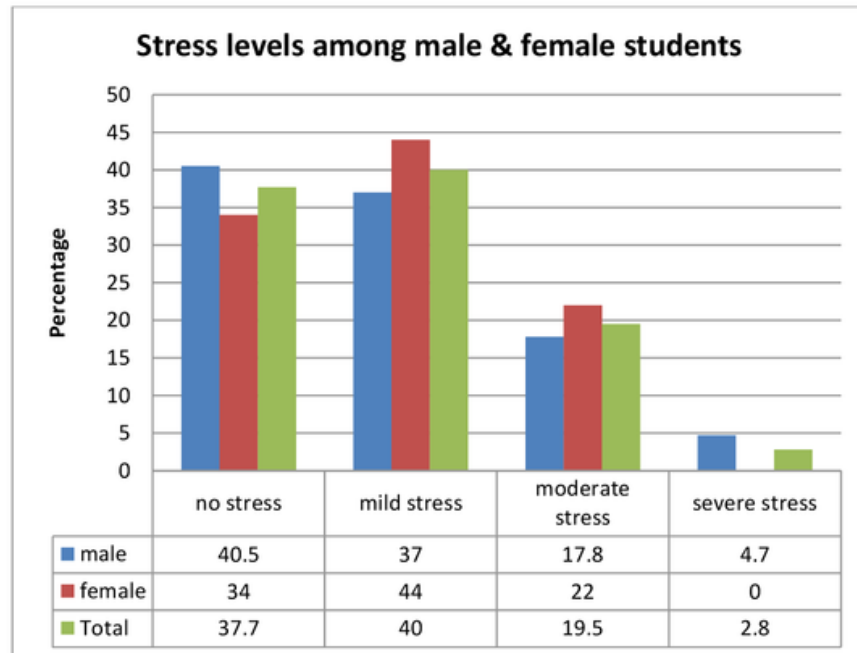


Figure 2. Stress levels among Male & Female students



## DISCUSSION

The results of this study indicate that that majority of the students at RMC were well aware of the risk factors associated with the ischemic heart disease. In comparison a study conducted by Ayesha Almas et al,<sup>11</sup> conducted in University students in Karachi (2008) found that the knowledge of the students regarding coronary artery disease was around 50%. Since the current study was performed on medical students, thus the awareness level was better.

Regular exercise provides considerable benefits in reducing morbidity and mortality from several chronic diseases in adults, especially from CHD and its risk factors.<sup>12</sup> Current study revealed that 44% of the students did not exercise on regular basis, hence being at risk of developing ischemic heart disease. Al Refaee and Al-Hazza in (2001) Riyadh, KSA had also reported that over 53% of Saudi students were totally physically inactive.<sup>13</sup>

2

A high proportion of medical students in the present study were consuming fast foods which contain a high amount of calories and saturated fats. Almost 90% of the students reported that they consume junk food often or occasionally in a week. More than 10% of the male students reported to consume junk food regularly as compared to the female students (5%). Similar results were also reported by Amr a Sabra et al, who reported high consumption of junk food in KSA University students.<sup>14</sup>

The present study also showed presence of stress of various intensity among the medical students. The results show that more than 60% of the students reported to have some degree of stress. Female students reported to have more stress as compared to male students. This is in agreement with another study carried out in Saudi Arabia, which reported the presence of stress in medical students to be around 57%.<sup>15</sup> A similar study conducted by Babar T Shaikh and et al in medical students of Karachi reported the presence of stress to be 90%. The same study reported the presence of stress to be more in males, which is in contrast to the results of our findings.<sup>16</sup>

8

Family history of ischemic heart disease is also an important risk factor. Our study revealed that more than 27% of the students, reported to have a family history of ischemic heart disease. In comparison a hospital based study conducted in Karachi revealed that 42% of the subjects had family history of ischemic heart disease.

26

Smoking is another common risk factor for ischemic heart disease. The current study showed only 4.2% of students smoke. Another study carried out on medical students in Ziauddin medical college reported the prevalence of smoking around 14.5%, which is far more than the current study.<sup>17</sup> Another study conducted in Peshawar on medical students reported smoking rate of 31.8%, which again is much more than the smoking rate in the current study.<sup>18</sup>

25

## 6 CONCLUSION

24

This study concluded that vast majority of the students were aware of the risk factors for ischemic heart disease. Despite that nearly half of the students reported not to exercise on regular basis. Many students reported often use of junk food on weekly basis. Use of junk food was found to be more common in female students comparatively. Majority students reported mild to moderate stress levels, which is also a risk factor for ischemic heart disease.

## REFERENCES

1. IA Khan, M Farid, SM Qureshi, M Ashraf Chaudhry, M Ishaq, Pakistan J. Med. Res.Vol. 44, No. 4, 2005.
2. Dawber TR. The Framingham study: The Epidemiology of Atherosclerotic Disease. Cambridge MA: Havard University Press; 1980: 172-179.
3. Afzal M, Ziaur-Rehman, HussainF, Siddiqui RH. A survey of blood groups. J Pak Med Assoc 1977; 27: 426-29.
4. Prof Abdus SamadM.D . PJC Vol 14, No.2 April – June 2003 Page 59-60.
5. Ilyas M. Community medicine and public health. 7th ed. Karachi: Time Publishers, Urdu Bazar; 2006: 599-601
6. Králíková E, Rames J. Life style of medical students and risk factors for ischemic heart disease. Cas Lek Cesk. 1993 Sep 27;132(18):560-3.
7. Inam S N B, Saqib A, Alam E. Prevalence of anxiety and depression among medical students of private university. J Pak Med Assoc Feb 2003;53(2):44-7.
8. Muhammad S Khan, Sajid Mahmood, Areef Badshah, Syed U Ali, Yasir Jamal. Prevalence of Depression, Anxiety and their associated factors among medical students in Karachi, Pakistan J Pak Med Assoc Dec 2006; 56(12):583-6.
9. Daniel E. Ford, MD, MPH; Lucy A. Mead, SCM. Depression Is a Risk Factor for Coronary Artery Disease in Men; The Precursors Study. Arch Intern Med. 1998; 158(13):1422-1426.
10. Perlmutter JB, Frishman WH, Feinstein RE. Major depression as a risk factor for cardiovascular disease: therapeutic implications. Heart Dis. 2000; 2:75–82.

- 
11. Aysha Almas, Aamir Hameed, Fateh Ali Tipoo Sultan. Knowledge of Coronary Artery Disease (CAD) risk factors and Coronary Intervention among University Students. JPMA. Oct. 2008
  12. Haapanen N, Miilunpalo S, Vuori I, Oja P, Pasanen M. Association of leisure time physical activity with the risk of heart disease, hypertension and diabetes in middle-aged men and women. *Int J Epidemiol* 1997;26:739-47.
  13. Taha AZ. Self-reported knowledge and pattern of physical activity among male school students and their teachers in Al Khobar, Saudi Arabia. *J Family Community Med* 2005; 12(1):19-25.
  14. Amr A. Sabra, Attia Z. Taha, Abdulaziz M. Al-Sebiany, Coronary Heart Disease Risk Factors: Prevalence And Behavior Among Male University Students In Dammam City, Saudi Arabia. *J Egypt Public Health Assoc* Vol. 82 No. 1 & 2, 2007
  15. Hamza M. Stress and depression among medical students: A cross sectional study at a medical college in Saudi Arabia. *Pak J Med Sci* Jan - Mar 2008; 24(1):12-7.
  16. Babar T , Arsalan K, Muhammad K, Stress management in medical students. *J Coll Physicians Surg Pak* May 2004; 14(5):306.
  17. Syed Muhammed Mubeen, Martha Morrow, Simon Barraclough. Smoking among future doctors in a "No-Smoking" university campus in Karachi, Pakistan: issues of tobacco control *J Pak Med Assoc* May 2008;58(5):248-53.
  18. Mohammad Yousaf Khan. Smoking trends in Medical Students: Are they influenced by difference in gender and financial status? *Pak J Chest Med* Oct - Dec 2002;8(4):3-8. Department of Pulmonology Lady Reading Hospital Peshawar.

---

## **AUTHOR'S DECLARATION**

We, the undersigned authors of the article "Frequency of risk factors and awareness regarding ischemic heart diseases among medical students of a private medical college " Submitted for publication in KHYBER MEDICAL UNIVERSITY JOURNAL (KMUJ), have contributed significantly to and share in the responsibility for above. • The undersigned stipulate that the material submitted to KMUJ is new, original and has not been submitted to another publication for concurrent consideration. • Upon acceptance by KMUJ, all copyright ownership for the article is transferred to KMUJ. • It is attested that all human and/or animal studies undertaken as a part of the research are in compliance with regulation of our institution(s) and with generally accepted guidelines governing such work. • It is hereby submitted that the manuscript has been seen and approved by all authors.

### **Authors:**

#### **1. Dr. Syed Imran Gilani**

Assist. Prof. Department of Community and Preventive dentistry

Sardar Begum Dental College & Hospital, Peshawar

#### **2. Dr Saira Afridi (Corresponding Author)**

Assist. Prof. Department of Community and Preventive dentistry

Sardar Begum Dental College & Hospital, Peshawar

# frequency

## ORIGINALITY REPORT

26%

SIMILARITY INDEX

22%

INTERNET SOURCES

8%

PUBLICATIONS

%

STUDENT PAPERS

## PRIMARY SOURCES

1	<a href="http://www.pmrc.org.pk">www.pmrc.org.pk</a> Internet Source	4%
2	<a href="http://www.epha.eg.net">www.epha.eg.net</a> Internet Source	4%
3	<a href="http://pakmedinet.com">pakmedinet.com</a> Internet Source	3%
4	<a href="http://jpma.org.pk">jpma.org.pk</a> Internet Source	2%
5	<a href="http://archinte.ama-assn.org">archinte.ama-assn.org</a> Internet Source	1%
6	<a href="http://www.acnut.com">www.acnut.com</a> Internet Source	1%
7	<a href="http://www.pkjns.com">www.pkjns.com</a> Internet Source	1%
8	"Studies from Kumamoto University Hospital Describe New Findings in Atherosclerosis (Acetylcholine-Pr", Heart Disease Weekly, Sept 27 2015 Issue Publication	1%



9	Saleem, Sameer, Adnan Khan, and Ihtesham Shafiq`. "Post thrombolytic resolution of ST elevation in STEMI patients admitted to cardiology unit of a tertiary care hospital", Pakistan Journal of Medical Sciences, 1969. Publication	1%
10	"ABSTRACTS OF THE 2ND NORTH AMERICAN CONGRESS OF EPIDEMIOLOGY June 21-24, 2006", American Journal of Epidemiology, 06/01/2006 Publication	1%
11	backintheusa.us Internet Source	1%
12	journal.rsw.edu.pl Internet Source	1%
13	www.panafrican-med-journal.com Internet Source	1%
14	www.netjournals.org Internet Source	<1%
15	www.ncbi.nlm.nih.gov Internet Source	<1%
16	Hernandez, Marlow B., Cyril Blavo, Patrick C. Hardigan, Alina M. Perez, and Kathleen Hage. "Differences in Perceived Stress, Depression, and Medical Symptoms among Medical,	<1%

Nursing, and Physician Assistant Students: A Latent Class Analysis", Annals of Behavioral Science and Medical Education, 2010.

Publication

17

[www.researchgate.net](http://www.researchgate.net)

Internet Source

<1 %

18

[rivm.openrepository.com](http://rivm.openrepository.com)

Internet Source

<1 %

19

[globalresearchonline.net](http://globalresearchonline.net)

Internet Source

<1 %

20

[dare.ubvu.vu.nl](http://dare.ubvu.vu.nl)

Internet Source

<1 %

21

[www.sciepub.com](http://www.sciepub.com)

Internet Source

<1 %

22

[nutritionj.biomedcentral.com](http://nutritionj.biomedcentral.com)

Internet Source

<1 %

23

[www.dentalnewspk.com](http://www.dentalnewspk.com)

Internet Source

<1 %

24

Lamarche, Benoît, and Annie C. St-Pierre. "Features of the metabolic syndrome and the risk of cardiovascular disease", Biomarkers, 2005.

Publication

<1 %

25

Jarwan, Bander. "Depression among medical students of Faculty of Medicine, Umm Al-Qura

<1 %

University in Makkah, Saudi Arabia",  
International Journal of Medical Science and  
Public Health, 2015.

Publication

---

26

Smith, G. C. S., A. M. Wood, I. R. White, J. P. Pell, and J. Hattie. "Birth Weight and the Risk of Cardiovascular Disease in the Maternal Grandparents", American Journal of Epidemiology, 2010.

Publication

---

<1%

27

El-Hadidy, Mohamed A.. "Anxiety and depressive symptoms in medical school students before and after the Egyptian revolution :", Middle East Current Psychiatry, 2012.

Publication

---

<1%

---

EXCLUDE QUOTES    ON

EXCLUDE MATCHES    OFF

EXCLUDE  
BIBLIOGRAPHY    ON