A Descriptive Study to Assess the Factors Contributing to Anemia among Adult Anemic Patient's visiting to Selected Hospital

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Abstract: _Introduction_: _Anemia is the reduction in the concentration of hemoglobin percentage level in blood. Because hemoglobin (found inside rbcs) normally carries oxygen from the lungs to the tissues, anemia leads to hypoxia (lack of oxygen) in organs. Because all human cells depend on oxygen for survival, varying degrees of anemia can have a wide range of clinical consequences. Anemia is the commonest problem in our country (India)._Objective:1_) The study objective was to assess and to determine the contributing factors for anemia among adult anemic patient's visiting to selected hospital. 2) To find out the association between causes and selected demographic variable among patient visiting to the selected district hospital. _Methods_: The research design selected for this study was descriptive design. The population of the present study comprised of 100 adult anemic patient's visiting to selected hospital. Purposive sampling technique was used. _Conclusion_: Assessment of the contributing factors of anemia among adult anemic patient was the main focus of the study. The finding of the research reveals that poor socio economic status contributes to occurrence of anemia. Also there is significant association between low standard of living and occurrence of anemia._

Keywords: Assess, factors, Contributing, Anemia

1. Introduction

Anemia is the reduction in the concentration of hemoglobin percentage level in blood. Because hemoglobin (found inside rbcs) normally carries oxygen from the lungs to the tissues, anemia leads to hypoxia (lack of oxygen) in organs. Because all human cells depend on oxygen for survival, varying degrees of anemia can have a wide range of clinical consequences. Anemia can result in the person feeling tired, weak, dizzy, and short of breath. GlobalData's epidemiological analysis of anemia found that the disease burden varies significantly by country and is quite common even in developed countries.[1]Anemia is the most common disorder of the blood and is the commonest problem in our country (India).

2. Background of the study

GlobalData epidemiologists analyzed the literature to determine the total prevalence of anemia in the 16 major pharmaceutical markets (16MM: US, France, Germany, Italy, Spain, UK, Japan, Australia, Brazil, Canada, China, India, Mexico, Russia, South Africa, and South Korea). Total prevalence is defined as including both diagnosed and undiagnosed cases. GlobalData epidemiologists obtained data from studies that collected blood samples from the general populations and tested them for hemoglobin levels. Anemia is defined as having a hemoglobin levels below the thresholds set for specific age groups by the World Health Organization (WHO). The figure below presents the total prevalence of anemia in the 16MM. India has the highest total prevalence of anemia at 39.86%, while Canada has the lowest at 3%. The US and 5EU (France, Germany, Italy, Spain, and the UK) have total prevalence levels ranging between 5.6–10.74%, making the disease a common occurrence in these markets.

3. Need for the Study

India has the highest prevalence of anemia among the 16MM. The prevalence is even higher among Indian women, with around 50% of women having low hemoglobin levels. Numerous studies conducted in India found that poor eating habits (not eating enough fruits, vitamin C, and legumes such as and beans and peas) and lack of access to healthcare are the main causes for such a high prevalence of anemia among women. Iron supplementation programs have not been successful in decreasing anemia in India.

4. Literature Survey

Antelman G,et.al.(2000) The objective of this cross-sectional study was to identify risk factors for anemia among human immunodeficiency virus (HIV)-positive pregnant women in Dar es Salaam, Tanzania. Baseline data from 1064 women enrolled in a clinical trial on the effect of vitamin supplementation in HIV infection were examined to identify potential determinants of anemia. The mean hemoglobin (Hb) level was 94 g/L, and the prevalence of severe anemia (Hb < 85 g/L) was 28%; 83% of the women had Hb < 110 g/L. Iron deficiency and infectious disease appeared to be the predominant causes of anemia. The most significant risk factors associated with severe anemia in this population are preventable. Public health recommendations include increasing the effectiveness of iron supplementation and malaria management during pregnancy, and providing health education messages that increase awareness of the potentially adverse nutritional consequences of eating soil during pregnancy[2]

Price RN,et.al (2001) The factors contributing to anemia in falciparum malaria were characterized in 4,007 prospectively studied patients on the western border of

Thailand. Of these, 727 patients (18%) presented with anemia (haematocrit < 30%), and 1% (55 of 5,253) required blood transfusion. The following were found to be independent risk factors for anemia at admission: age < 5 years, a palpable spleen, a palpable liver, recrudescent infections, being female, a prolonged history of illness (> 2 days) before admission, and pure Plasmodium falciparum infections rather than mixed P. falciparum and Plasmodium vivax infections. Patients coinfected with P. vivax (16% of the total) were 1.8 (95% CI, 1.2-2.6) times less likely to become anemic and recovered 1.3 (95% CI, 1.0-1.5) times faster than those with P. falciparum only. Anemia is related to drug resistance and treatment failure in uncomplicated malaria. Children aged < 5 years of age were more likely than older children or adults to become anemic. Coinfection with P. vivax attenuates the anemia of falciparum malaria, presumably by modifying the severity of the infection.[3]

5. Objective

1) The study objective was to assess and to determine the contributing factors for anemia among adult anemic patient's visiting to selected hospital.
2) To find out the association between causes and selected demographic variable among patient visiting to the selected district hospital.

6. Methods

This chapter deals with the research methodology adopted for the study. It include the step of approach research approach research design variable, schematic representation, setting, sampling procedure, sample & sample size, description of tools & validity of tools, pilot study, data collection procedure & plan for data analysis.

1) **Research Design**
   The research design selected was descriptive design.
2) **Population**
   The population of the present study comprised of adult anemic patient's visiting to selected hospital
3) **Sample Size**
   Sample size of the study comprised of 100 adult anemic patient's visiting to selected hospital
4) **Sampling Technique**
   Purposive sampling
5) **Inclusion Criteria**
   Adults diagnosed with anemia
6) **Exclusion criteria**
   Adults who are not willing to participate

7. Results and Discussion

Section I: Description of anemic patient'swith regards to age
Among total sample population 34% (34) of the samples were from age group of 18-25 yr of age group, 53% (53) of the sample's were from 26-30 yr of age group , 9% (9) of the sample's were from 31-35 yr of age group and 4% (4)of the sample's were from the age group of the 36-40 yr.

Section II: Description of anemic patient'swith regards

to area of living
Among total sample population 67% (67) of the samples were from the rural area and 33% (33) of the sample's were from the urban area.

Section III: Description of anemic patient'swith regards to socio economic status.
Among total sample population 68% (68) of the samples were having monthly family income less than 8 thousand rupees, 26% (26) of the samples were having monthly family income ranging 8-12 thousand rupees, and 6% (6) of the samples were having monthly family income more than 12 thousand rupees.

Section III: Description of anemic patient'swith regards to primary suffering
Among total sample population 57% (57) of the samples were suffering from medical illness and 32% (32) of the sample's were from the gynac and 11% (11) sample's were suffering from the surgical illness.

8. Conclusion

Assessment of the contributing factors of anemia among adult anemic patient was the main focus of the study. The finding of the research reveals that poor socio economic status contributes to occurence of anemia. Also there is significant association between low standard of living and occurrence of anemia.

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