

KNOWLEDGE ABOUT HEPATITIS B AND C AMONG WOMEN ATTENDING OBSTETRICS AND GYNAECOLOGY CLINIC AT TERTIARY CARE HOSPITAL

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ABSTRACT

OBJECTIVE: To assess the level of knowledge and awareness regarding hepatitis B and C among women attending obstetrics and gynaecology clinic at Baqai University hospital Nazimabad.

STUDY DESIGN: Descriptive cross sectional study.

PLACE AND DURATION: Obstetrics and Gynaecology Clinic at Baqai University Hospital Nazimabad Karachi from 10th March to 9th June 2011.

METHODOLOGY: A total 151 women of 15–50 years of age who visited the out patient Department were selected for the study. Women who were Hepatitis B and C positive were excluded from study. Informations was collected on pre-designed questionnaire containing question regarding basic knowledge of disease, high risk group, modes of transmission and its prevention.

RESULTS: Out of total 151 women 75 (49.6%) knew that Hepatitis B and C are the viral infection of liver. 82 (54.3%) knew about transmission via sexual intercourse and 122 (80.7%) knew about infected blood transfusion. Regarding high risk group 99 (65.5%) knew about multiple sexual partners. Only 83 (54.9%) women mentioned about vaccine against Hepatitis B and 78 (51.6%) knew about the available treatment.

CONCLUSION: The knowledge about Hepatitis B and C among women was inadequate and still needs improvement in order to prevent its spread rapidly.

KEYWORDS: Hepatitis B and C, Awareness, Knowledge, Women

INTRODUCTION

Hepatitis B and C viruses are the known cause of acute and chronic liver diseases.¹ Every twelfth person in the world is living with either Hepatitis B or Hepatitis C.² The global burden of disease due to acute Hepatitis B and C, cancer and cirrhosis of liver is high. About 2000 millions people have been infected with Hepatitis B virus (HBV) worldwide, of whom more than 350 million are chronically infected. Some 130–170 million people are chronically infected with Hepatitis C virus (HCV).³ Cirrhosis caused by HCV infection appears to cause 25% of Hepatocellular carcinoma (HCC) cases worldwide.⁴ Many Asians are at risk for acquiring HCV infection through unsterilized medical practices during childhood or contaminated blood transfusions.⁵ The HBV is 50 to 100 times more infectious than human immunodeficiency virus (HIV).⁶ According to a recent study, prevalence of hepatitis B in Pakistan is 2.5% and hepatitis C is about 5%.⁷ Screening recommendations for HBV and HCV advocate early detections so that patients can start effective antiviral therapies and reduce the risk of HCC.^{8,9,10,11} In Pakistan the victims of hepatitis B and C exceeds 12 million.¹² However awareness level about these diseases

remains low. The objective of this study was to assess the level of knowledge and awareness regarding hepatitis B and C virus among women attending obstetrical and gynaecological clinic at a tertiary care hospital. On the basis of available data policies can be designed to build up knowledge and awareness in public for prevention of this condition.

METHODOLOGY

From 10th March to 9th June 2011 this descriptive cross-sectional study was conducted on women attended obstetrics and Gynaecology out-patient Department of Baqai University Hospital Nazimabad Karachi. A total of 151 women between 15 to 50 years of age were selected for the study. Ordinal data was collected on the basis of convenience sampling method. All women attending gynaecological and obstetrical clinic during above time period were recruited for the study. Women who were hepatitis B and C positive were excluded from study. Informed consent was taken and information was collected on pre-designed questionnaire containing questions regarding basic knowledge about Hepatitis B and C, high risk group, modes of transmission and its prevention. 200 women attended the OPD per month. AS those women who suffered from hepatitis B or C were excluded from study. That is why sample size was small. 95% confidence level and confidence interval of 4 were selected for sample size calculation. There were few limitations of this study like convenient sampling method and exclusion of those women who suffered from Hepatitis B and C.

RESULTS

Total 151 women were interviewed in our study. 7 (4.6%) women belonged to age group of 15–20 years, 86 (56.9%) were

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of 21–30 years, 42(27.8 %) were of 31–40 years and 16(10.5 %) were of more than 40 years. Regarding educational status 27(17.8%) women were uneducated, 62(41.0 %) were metric, 29(19.2%) were intermediate, 22(14.5 %) were graduate ,11(7.2%) were postgraduate. (Table - I)

Table-II shows knowledge about hepatitis B and C. 75(49.6 %) women knew that hepatitis B and C are the viral infection of liver. 69(45.6 %) women knew that the patient can present with acute illness like jaundice, fatigue, nausea, vomiting and abdominal pain but some of infected persons can be incidentally diagnosed during screening. 68(45.0 %) realizes that infected persons need no isolation.

Table-III shows knowledge about modes of transmission. 82(54.3%) knew about transmission through sexual intercourse. 90(59.6%) women knew about transmission of this condition during birth from mother to baby. 113(74.8%) women gave correct answer regarding use of infected needles.122(80.7 %) knew about transmission via infected blood transfusion. 66(43.7%) women gave correct answer regarding sharing of domestic items like plates etc. 71(47%) women gave correct

TABLE - I: AGE AND EDUCATIONAL LEVEL OF WOMEN (n=151)

Age Group	
15 - 20 years	07 (4.635%)
21 - 30 years	86 (56.953%)
31 -40 years	42 (27.814%)
>40 years	16 (10.596%)
Education level	
Uneducated	27 (17.880%)
Matriculation	62 (41.059%)
Intermediate	29 (19.205%)
Graduate	22 (14.569%)
Postgraduate	11 (7.284%)

TABLE – III: KNOWLEDGE REGARDING MODES OF TRANSMISSION OF HEPATITIS B AND C (n=151)

Questions	Correct Answer		Incorrect Answer	
	n	%	n	%
Sexual intercourse.	82	54.304	69	45.695
Mother to baby during birth.	90	59.602	61	40.397
Reuse of infected needles.	113	74.834	38	25.165
Infected blood.	122	80.794	29	19.205
Sharing water / plates.	66	43.708	85	56.291
Working with infected person.	71	47.019	80	52.980
Breast feeding.	102	67.549	49	32.450
Reuse of razors by barbers	63	41.721	88	58.278
Unsterilized instruments.	70	46.357	81	53.642

answer for non transmission of this condition by working with infected persons.102(67.5%) women knew that breast feeding contributes very little in transmission. 63(41%) women gave correct answer regarding reuse of razors in transmission of infection. knowledge about use of unsterized instruments was not sufficient. only 70(46.3%) could give write answer.

Table IV: Regarding knowledge about high risk group 73(48.3%) knew that doctors and hospital staff are at higher risk of acquiring infection than the general population. 99(65.5 %) knew about multiple sexual partners.110(72.8%) knew about transmission by sharing needles by addict persons.

Table-V: shows knowledge regarding prevention and treatment. 102(67.5 %) women knew that it is preventable and only 83(54.9 %) knew about vaccine against hepatitis B. 78(51.6 %) knew that treatment is now available. 95(62.9 %) knew that infection can be prevented by safe sex practices.84(55.6%) women knew about using condoms.109 (72.1%) women had knowledge that disease can be prevented by avoiding reuse of needles.110(72.8%) women had knowledge that screened blood is safer.

TABLE - II: KNOWLEDGE OF WOMEN ABOUT HEPATITIS B AND C (n=151)

Questions	Correct Answer		Incorrect Answer	
	n	%	n	%
What is viral hepatitis?	75	49.668	76	50.331
How can patient present?	69	45.695	82	54.304
Does patient need isolation?	68	45.033	83	54.966

TABLE-IV: KNOWLEDGE OF WOMEN REGARDING HIGH RISK GROUPS FOR ACQUIRING HEPATITIS B AND C (n=151)

High Risk Group	Correct Answer		Incorrect Answer	
	n	%	n	%
Person with multiple sexual partners	99	65.562	52	34.437
Doctors and Hospital staffs	73	48.344	78	51.655
Drug addicts sharing needles	110	72.847	41	27.152

TABLE-V: KNOWLEDGE OF WOMEN REGARDING PREVENTION AND TREATMENT OF HEPATITIS B AND C (n=151)

Questions	Correct Answer		Incorrect Answer	
	n	%	n	%
Are they preventable?	102	67.549	49	32.450
By vaccination?	83	54.966	68	45.033
Treatment by medicine	78	51.655	73	48.344
Avoiding abnormal sex ractices.	95	62.913	56	37.086
Using condoms.	84	55.629	67	44.370
Avoiding reuse of needles.	109	72.185	42	27.814
Transfusion of screened blood.	110	72.847	41	27.152

DISCUSSION

Hepatitis B and C are global health problems affecting every 12th individual on our planet.¹³ In Pakistan contaminated needles, treatment of common ailments by injections and drips, unsterilized dental and surgical equipment, drug abuse, unsafe blood and blood products and reuse of razors by barbers are the major casual factors.^{14,15} Pakistan has high prevalence of risk factors for the disease.^{16,17} In our study less than 50% women knew about hepatitis B and C. In another study 67.7% women correctly responded that viral infection is a cause of hepatitis.¹⁸

Other surveys conducted in different part of the world regarding hepatitis B and C showed poor knowledge regarding the disease.¹⁹⁻²¹ Knowledge regarding mode of transmission was inadequate in our study. Another study also suggested that the public needs to be better informed about hepatitis B and C virus transmission.²²

In our study knowledge about the high risk group was not satisfactory. This is in contrast to another study showing females know more about risk factors.²³ Knowledge regarding preventive measures plays an important role in control of the disease. Our study found that satisfactory number of women knew about vaccine for prevention of hepatitis B, they also mentioned about safe sexual practice, use of disposable syringes and transfusion of screened blood. A study conducted in Egypt about knowledge, attitude and practice of health care staff regarding protective measures for prevention of hepatitis B and C, such as hand washing and recapping the used syringes and needles, the knowledge was found unsatisfactory.²⁴ In a similar study Regarding mode of transmission of HBV 41 (33.88%) mentioned infected blood transfusion, 49 (40.49%) contaminated needles, 46 (38.0%) unsterilised instruments, 21 (17.35%) from mother to child and only 23 (19.0%) mentioned sexual intercourse. Only 51 (42.14%) women knew that vaccine is available for prevention.¹⁸

CONCLUSION

The knowledge about Hepatitis B and C among women was inadequate and still needs improvement in order to prevent its spread rapidly.

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