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A survey of health problem and period of diagnosis of health problem related diseases in different age groups in Chhattisgarh

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Abstract
Aim: The main purpose of the study was to analyze the sedentary life style of different age groups and its related diseases in Raipur, Bilaspur, Bhilai, Durg and Raigarh. The study has focused on the linkage between status of health and sedentary life style of the people working in cities.
Method: Survey of the subjects was done in a phased manner through questionnaire, personal interview and telephonic interview depending upon the convenience of the subjects and availability of the time. First of all the subjects (1000) were handed over the questionnaire *to* get their feedback and within a fortnight 790 subject returned their filled questionnaire. Remaining subjects were persuaded to give the feedback in a week. The scholar received 80 more filled questionnaire from the subjects. Remaining 60 subjects expressed their inability to fill the questionnaire due to their hectic schedule or other reason. Later 28 subjects were interviewed telephonically and 32 subjects were interviewed personally at their offices/homes depending upon the appointments given by them.
Statistical Technique: The information obtained from the responses against the questionnaire was carefully and systematically compiled for data analysis. The percentage analysis of frequencies of each statement was calculated for sedentary people.
Results: The percentage analysis in the Age Group A (25 to 35) 3.09% subjects were diagnosed with hypertension, 6.07% from diabetic, 1.90% from cardiac complication, 43.08% from overweight, 8.76% were diagnosed with more than one disease, where as 37.10% were not diagnosed with any of the disease and age group B (36 to 45) 6.88% subjects were diagnosed with hypertension, 13.94% from diabetic, 9.91% from cardiac complication, 36.82% from overweight, 28.39% were diagnosed with more than one disease, where as 4.06% were not diagnosed with any of the disease. Age Group A (25 to 35) percentage analysis of that 82.08% subjects were facing the health problems for last few days 15.22% for last few month and 2.68% for last few years and Age group B(36 to 45) percentage analysis of that 77.81% subjects were facing the health problems for last few days 20.16% for last few month and 2.01% for last few years. Percentage analysis of that amongst Age Group A (25 to 35) 49.3% subjects were suffering from any one type of disease where as 50.7% subjects were having more than one type of disease and Percentage analysis of age group B (36 to 45) 31.76% subjects were suffering from any one type of disease where as 68.23% subjects were having more than one type of disease.

Keywords: Types of diseases, health problem, diagnosis

Introduction

Obesity, commonly caused due to abnormal fat deposition, is primarily measured by increased body mass index (BMI. This global pandemic has increased concern regardless of the economic condition of a country. In 2015, about 30% of the world's total population, including 107.7 million children and 603.7 million adults were found to have obesity worldwide. It can also be predicted that in 2030, the global population of overweight and obesity will increase to 2.16 billion and 1.12 billion, respectively. In India, the National Family Health Survey-4 (NFHS) reported18.9% of men as overweight, including 26.6% of urban and 14.3% of rural men, whereas 20.6% of all women were found to be overweight, accounting for 31.3% of urban and 15.0% rural women. Furthermore, a study also indicates that the rate of increase in obesity becomes highest in early adulthood.The obesity-associated health problems refer to complex metabolic diseases, also known as lifestyle diseases, including diabetes, cardiovascular diseases, arthritis, polycystic ovarian diseases, etc. that are intimately associated with obesity. It has become necessary to identify and estimate the factors associated with increasing co-morbidities leading to obesity to curb the exponential growth curve. Although fat accumulation mostly occurs in subcutaneous adipocytes, the deposition has also been found in ectopic sites such as the visceral area, liver, muscle, heart, and pancreas. Increasing age influences the distribution of adipose, shifting it from subcutaneous depots to intra-abdominal and ectopic fat deposition. BMI is considered to be the most common yardstick to measure obesity worldwide, yet as it is not capable of differentiating between body fat and muscle mass, it fails to be a reliable predictor of disease risk. Therefore, body composition monitoring can become crucial to identify the visceral fat percentage (VF%) which signifies central obesity. In Asian Indians, intra-abdominal VF accumulation causes central obesity rather than a generalized one.

Methodology

1. Objective of the Study

The main purpose of the study was to health problem and period of diagnosis of health problem related diseases in different age groups in chhattisgarh in Raipur, Bilaspur, Bhilai, Durg and Raigarh.

2. Subjects

Prospective subjects were identified in the offices of Raipur, Bilaspur, Bhilai, Durg and Raigarh. The subjects were employees of Central Govt., State Govt., Local Governing bodies, BPO's, Real Estate offices, Financial Consultant etc as they had greater chances of leading the sedentary life style. To systematize the study, subjects were grouped in two age categories as under:

a. 25 to 35 years
b. 36 to 45 years

3. Administration of Tests

Survey of the subjects was done in a phased manner through questionnaire, personal interview and telephonic interview depending upon the convenience of the subjects and availability of the time. First of all the subjects (1000) were handed over the questionnaire *to* get their feedback and within a fortnight 790 subject returned their filled questionnaire. Remaining subjects were persuaded to give the feedback in a week. The scholar received 80 more filled questionnaire from the subjects. Remaining 60 subjects expressed their inability to fill the questionnaire due to their hectic schedule or other reason. Later 28 subjects were interviewed telephonically and 32 subjects were interviewed personally at their offices/homes depending upon the appointments given by them.

4. Statistical Analysis

The information obtained from the responses against the questionnaire was carefully and systematically compiled for data analysis. The percentage analysis of frequencies of each statement was calculated for sedentary people.

Result

The percentage analysis of frequencies of each Table was calculated for sedentary people.

Table 1: Percentage description of responses age group a (25 to 35) pertaining to information about health problem and diseases

Age Group A (25 to 35) (335 SUBJECTS)						
	Hypertension	**Diabetic**	**Cardiac Complication**	**Overweight**	**More than One**	**None**
No.	10	20	6	144	29	126
%	3.09	6.07	1.9	43.08	8.76	37.1

The percentage analysis of Table No.1 reveals that in Age Group A (25 to 35) 3.09% subjects were diagnosed with hypertension, 6.07% from diabetic, 1.90% from cardiac complication, 43.08% from overweight, 8.76% were diagnosed with more than one disease, where as 37.10% were not diagnosed with any of the disease.

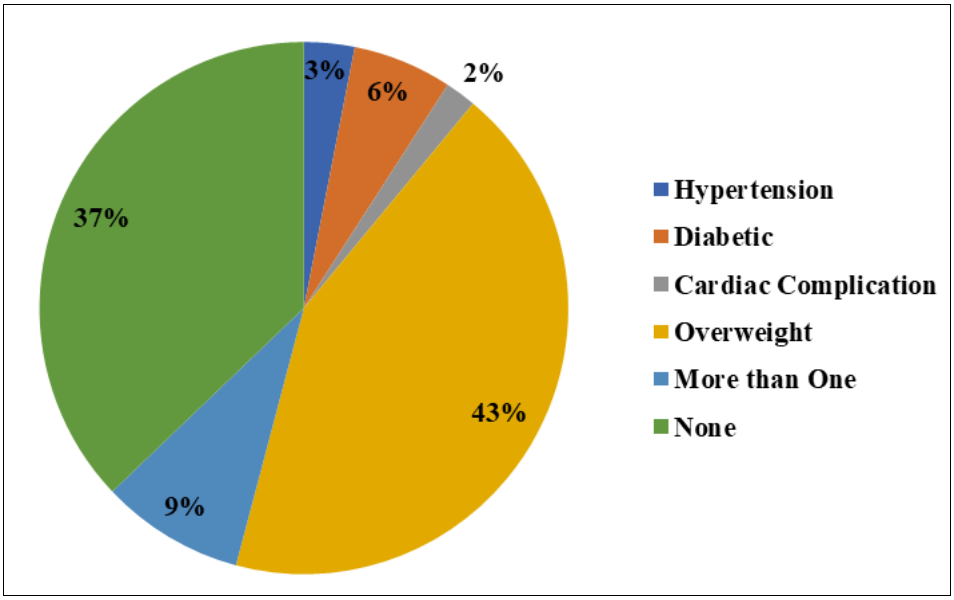

Fig 1: Percentage description of responsesage group a (25 to 35) pertaining to information about health problem and diseases

Table 2: Percentage description of responses age group b (36 to 45) pertaining to information about health problem and diseases

Age Group B (36 to 45) (595 SUBJECTS)						
	Hypertension	**Diabetic**	**Cardiac Complication**	**Overweight**	**More than One**	**None**
No.	41	83	59	219	169	24
%	6.88	13.94	9.91	36.82	28.39	4.06

- The percentage analysis of Table No.2 reveals that in age group B (36 to 45) 6.88% subjects were diagnosed with hypertension, 13.94% from diabetic, 9.91% from cardiac complication, 36.82% from overweight, 28.39% were diagnosed with more than one disease, where as 4.06% were not diagnosed with any of the disease.

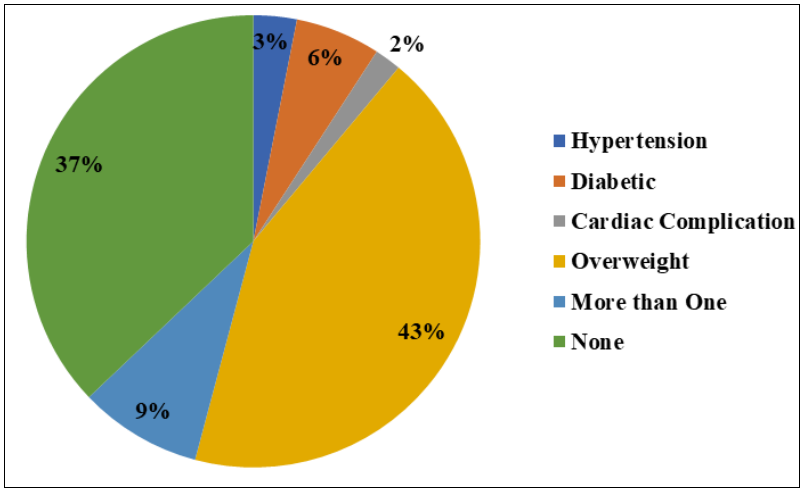

Fig 2: Percentage description of responses age group b (36 to 45) pertaining to information about health problem and diseases

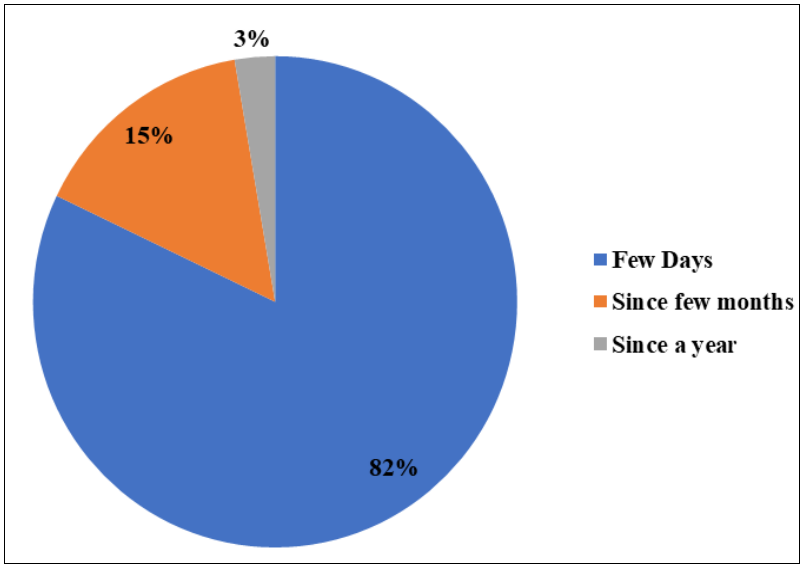

Fig 3: Percentage description of responsesage group a (25 to 35) pertaining to duration of health problem

Table 3: How long have you been ailing with the health problems age group a (25 to 35) analysis period of diagnosis of health problem

Age Group A (25 to 35) (335 SUBJECTS)			
	Few Days	**Since Few Months**	**Since a Year**
No.	275	51	9
%	82.08	15.22	2.68

Age Group A (25 to 35) percentage analysis of Table no. 3 reveals that 82.08% subjects were facing the health problems for last few days 15.22% for last few month and 2.68% for last few years.

Table 4: How long have you been ailing with the health problems age group b (36 to 45) analysis period of diagnosis of health problem

Age Group B (36 to 45) (595 SUBJECTS)			
	Few Days	**Since Few Months**	**Since a Year**
No.	463	120	12
%	77.81	20.16	2.01

- Age group B (36 to 45) percentage analysis of Table no. 4 reveals that 77.81% subjects were facing the health problems for last few days 20.16% for last few month and 2.01% for last few years.

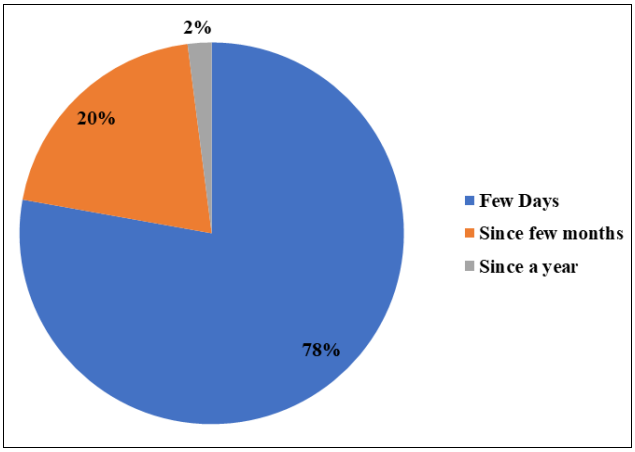

Fig 4: Percentage description of responsesage group b (36 to 45) pertaining to duration of health problem

Discussion

The main purpose of the study was health problem and period of diagnosis of health problem related diseases in different age groups i.e. i.e 25 to 35 years and 36 to 45 years

chhattisgarh in Raipur, Bilaspur, Bhilai, Durg and Raigarh. The study has focused on the linkage between status of health and sedentary life style of the people working in cities. The variables analyses are as follows:

1. The percentage analysis in the Age Group A (25 to 35) 3.09% subjects were diagnosed with hypertension, 6.07% from diabetic, 1.90% from cardiac complication, 43.08% from overweight, 8.76% were diagnosed with more than one disease, where as 37.10% were not diagnosed with any of the disease and age group B (36 to 45) 6.88% subjects were diagnosed with hypertension, 13.94% from diabetic, 9.91% from cardiac complication, 36.82% from overweight, 28.39% were diagnosed with more than one disease, where as 4.06% were not diagnosed with any of the disease.
2. Age Group A (25 to 35) percentage analysis of that 82.08% subjects were facing the health problems for last few days 15.22% for last few month and 2.68% for last few years and Age group B(36 to 45) percentage analysis of that 77.81% subjects were facing the health problems for last few days 20.16% for last few month and 2.01% for last few years.

Conclusions

On the basis of research findings, text books depiction, scientific facts available and research scholars own understanding of this research investigation following discussion on were made:

First and foremost observation of this study was an overwhelming majority of subjects of the study were sedentary because of their nature of job. The extended duty hour, arm chair or desktop job and significant absence of physical movement were regular features in their daily life. This might have made their living sedentary.

The highlight of the findings was that among both the age group subjects, life style diseases like, depression. insomnia, diabetes, arthritis, backache, digestive disorder, blood pressure, were highly prevalent and obesity was found to be highly endemic feature in both the group.

This finding clearly implies that with aging health complexity, venerability and suffering multiplicity significantly increases among sedentary population.

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