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A STUDY TO ASSESS THE KNOWLEDGE REGARDING MYOCARDIAL INFARCTION AND ITS PREVENTION AMONG STUDENTS OF SCHOOL OF MANAGEMENT & COMMERCE, SANSKRITI UNIVERSITY CHHATA, MATHURA

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ABSTRACT

INTRODUCTION: This study aimed to assess the knowledge regarding myocardial infarction & its prevention among students. METHODS: A random survey study approach was adopted in this study. A random survey study was conducted in order to obtain detailed information of the study subject with specific characteristics. The research design used for this study is non experimental research design comma as it will help in the determining the cause, symptoms and prevention of myocardial infarction among students of school of School of Basic and Applied Sciences, Sanskriti University Mathura. A structured questionnaire method used to access the cause, symptoms and prevention of myocardial infarction among students. RESULTS:• Age of the students who responded were (93%) of under 18-20 years, (3.3%) of 21- 23 years, (3.33%) of 23-26 years, (0%) of over 26 years.• The gender of the students responded of which 36.60% were male and 63.30% were female.• Family type of the students responded 53% of nuclear families 43% of joint families and 1% of extended families.• Religion of the students who responded in 93% of Hindu,0% of Muslim, and 6.60% of Christian.• The main language of students responded by 36.60% of males and s, 63.30% of females .•Year of study of the students is 63.30% of Its year students, 36.60% of 2nd-year students, and 0% of 3rd and 4th-year students. • Prior knowledge regarding MI to the students is 53.30% of yes and 46.60% of nope. •Students nowing MI from different platforms were 3.33% from newspapers, 66.60% from the internet, 20% from journals, and 3% from mass media CONCLUSION: The following conclusions were drawn on the basis of the findings of the study. The finding showed that the students who are attending the class have some excellent knowledge regarding cause symptoms and prevention of MI.

Keywords: Assess, Students, Adolescent

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INTRODUCTION

A blockage of blood flows to the heart muscle.

A myocardial infarction (MI), commonly known as a heart attack, occurs when blood flow decreases or stops in one of the coronary arteries of the heart, causing infarction (tissue death) to the heart muscle. The most common symptom is retrosternal chest pain or discomfort that classically radiates to the left shoulder, arm, or jaw. The pain may occasionally feel like heartburn. This is a dangerous type of acute coronary syndrome. [1]

A myocardial infarction occurs when an atherosclerotic plaque slowly builds up in the inner lining of a coronary artery and then suddenly ruptures, causing catastrophic thrombus formation, totally occluding the artery and preventing blood flow downstream to the heart muscle. Other symptoms may include shortness of breath, nausea, faint feeling, a cold sweat, feeling tired, and decreased level of consciousness. About 30% of people have atypical symptoms. Women more often present without chest pain and instead have neck pain, arm pain or feel tired. Among those over 75 years old, about 5% have had an MI with little or no history of symptoms. An MI may cause heart failure, an irregular heartbeat, cardiogenic shock, or cardiac arrest. [2]

Most MIs occur due to coronary artery disease. Risk factors include high blood pressure, smoking, diabetes, lack of exercise, obesity, high blood cholesterol, poor diet, and excessive alcohol intake. [3]

The complete blockage of a coronary artery caused by a rupture of an atherosclerotic plaque is usually the underlying mechanism of an MI. MI is less commonly caused by coronary artery spasms, which may be due to cocaine, significant emotional stress (often known as Takotsubo syndrome or broken heart syndrome), and extreme cold, among others. Many tests are helpful with diagnosis, including electrocardiograms (ECGs), blood tests, and coronary angiography. An ECG, which is a recording of the heart's electrical activity, may confirm an ST elevation MI (STEMI), if ST elevation is present. [4]

Commonly used blood tests include troponin and less often creatine kinase MB. Treatment of an MI is critical. Aspirin is an appropriate immediate treatment for a suspected MI. Nitro-glycerine or opioids may be used to help with chest pain; however, they do not improve overall outcomes. Supplemental oxygen is recommended in those with low oxygen levels or shortness of breath. In STEMI, treatments attempt to restore blood flow to the heart and include percutaneous coronary intervention (PCI), where the arteries are pushed open and may be stented, or thrombolysis, where the blockage is removed using medications. People who have a non-ST elevation myocardial infarction (NSTEMI) are often managed with the blood thinner heparin, with the additional use of PCI in those at high risk. In people with blockages of multiple coronary arteries and diabetes, coronary artery bypass surgery (CABG) may be recommended rather than angioplasty. After an MI, lifestyle modifications, along with long-term treatment with aspirin, beta blockers and statins, are typically recommended. [5]

Worldwide, about 15.9 million myocardial infarctions occurred in 2015.More than 3 million people had an ST elevation MI, and more than 4 million had an NSTEMI. STEMIs occur about twice as often in men as women. About one million people have an MI each year in the United States. In the developed world, the risk of death in those who have had a STEMI is about 10%. Rates of MI for a given age have decreased globally between 1990 and 2010. In 2011, an MI was one of the top five most expensive conditions during inpatient hospitalizations in the US, with a cost of about $11.5 billion for 612,000 hospital stays. [6]

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PROBLEM STATEMENT

"A study to assess the knowledge regarding myocardial infarction among. students of the School of Management & Commerce, Sanskriti University, Mathura, Uttar Pradesh".

OBJECTIVES

1. To assess the knowledge regarding myocardial infarction & its prevention.
2. To determine the association between knowledge scores with demographic variables.

METHODLOGY

Refers to the systematic plan used to conduct the research. This chapter describes the research approach, research design, variables, setting, population, sample, sampling technique, sample size, tools, scoring, validity, ethical consideration, data collection procedure, and plan for data analysis. The present study to assess the assess the knowledge regarding myocardial infarction among. students of the School of Management & Commerce, Sanskriti University, Mathura, Uttar Pradesh.

The research methodologies include strategies to be used to collect and analysis the data collection accomplish the research objectives. It has crucial implication for the validity and credibility of study findings.

RESULTS

Table 1. demographic variables of students (N=30)

Demographic variables	No. OF students (Frequency)	Percentage(%)
1. Age(in years)		
Under 18-20years	28	93%
21-23 years	1	3.3%
24-26 years	1	3.3%
Over 26 years	0	0
2. Gender:		
Male	11	36.6%
Female	19	63.3%
Other(specify)	0	0
3. Family type:		
Joint family	16	53.3%
Nuclear family	13	43.3%
Extended family	1	3.3%

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4. Religion		
Hindu	28	93.3%
Muslim	0	0
Christian	2	6.6%
Others	0	0
5. Main Language		
Hindi	27	90%
English	3	10%
6. Year of study		
1st year	19	63.3%
2nd year	11	36.6%
3rd year	0	0
4th year	0	0
7. Previous knowledge regarding MI		
Yes	16	53.3%
No	14	46.6%
8. If yes? Then how?		
Newspaper	1	3.3%
Internet	20	66.6%
Journal	6	20%
Mass media	3	10%

Table 2. **Association of knowledge score with demographic variable at p-0.05 level of significance.**

(N=30)

S.NO.	Demographic variables	df	Chi- square
1.	Age (in years) a. Under 18-20 years b. 21-23 years c. 24-25 years d. Over 26 years	6	2.563^{NS}

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2.	Gender a. Male b. Female c. Others (specify)	4	7.612^{NS}
3.	Family type a. Joint family b. Nuclear family	4	1.161^{NS}
4.	Religion a. Hindu b. Muslim c. Christian d. Others	6	0.1528^{NS}
5.	Main language a. Hindi b. English	4	1.610^{NS}
6.	Year of study a. 1^{st} year b. 2^{nd} year c. 3^{rd} year d. 4^{th} year	6	0.0211^{NS}
7.	Previous knowledge regarding MI a. Yes b. No	2	0.584^{NS}
8.	If yes? Than how? a. Newspaper b. Internet c. Journal d. Mass media	6	3.362^{NS}

NS= Not significant

S= significant

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