Research article   **Medical research**

A & A: Attitude and aligned factors on acute stroke management of health professionals working at Hidar 11 hospital, Akesta

Prem Kumar[1], MihretuMamo[1], Hanan Sultan[1], Redeat Abebe[1], Yemiamrew Getachew[2]

[1]*Assistant Professor, College of Medicine and Health Sciences (CMHS), Wollo University*
[1]*Department of Nursing, College of Medicine and Health Science, Wollo University*
[1]*Department of Nursing, College of Medicine and Health Science, Wollo University*
[1]*Department of Nursing, College of Medicine and Health Science, Wollo University*
[2]*Head Department of Comprehensive Nursing, CMHS, Wollo University*

*Corresponding Author: Dr. Prem Kumar
Email id: greenwater3020@gmail.com

ABSTRACT

Stoke is the leading cause of death among adults, children and pregnant mother as well in Ethiopia. According to the latest WHO data published in may 2014 Stroke Deaths in Ethiopia reached 28,320 or 4.71% of total deaths. The age adjusted Death Rate is 71.94 per 100,000 of population ranks Ethiopia #107 in the world.

Objective

To assess the socio demographics and attitude towards of clinical expertise on acute stroke management among health professionals from December 2017 to April 2018.

Methods

Institution based cross sectional study design was employed. Stratified simple random sampling method used to select 102 health professionals. The collected data were analyzed using descriptive and inferential statistics.

Results

Among total participants 50.98% of the respondents were in the age group between 22-25 years, 59.80% were males and 40.19% female. Amongst participants majority (82.35) were belongs to Amhara ethnicity and least were belongs to Gurage. Forty nine (48.03%) were belongs to orthodox and same (48.03%) with Muslims and 63.72% were married. Of 9.80% were general practitioner, 44.11% & 34.31% nurses & midwives respectively and 11.76 % are other health professionals. Qualification reveals that highest percentage (67.64%) of the respondents from BSc Nursing, 27.45% are diploma holders, 3.92% are completed MD and 1% are others. Of 61.76%) of them with less than 2 years of experience Regarding monthly income of the health professionals more (66.66%) are earning 10000 and above and only 25.9% were participated in similar study. Attitude towards acute stroke management among health professionals difference ad categorized as agree, disagree and undecided with 9 items. It can be over and done with that, mainstream of the health professionals had positive attitude, very less negative and only few were uncertain.

Conclusion

The present study revealed that majority of health professionals' are attitude positive and only some of them are negative and a small number of undecided.

Keywords: Attitude, Aligned Factors, Acute stroke management, Health professionals.

INTRODCUTION

Stroke is a medical emergency which can cause permanent neurological damage, complications, and death. It is the leading cause of adult disability in the world. It is the number two cause of death worldwide and may soon become the leading cause of death worldwide. [1] A stroke, or cerebrovascular accident (CVA), is the rapid loss of brain functions due to disturbance in the blood supply to the brain. This can be due to ischemia caused by thrombosis, arterial embolism, or a hemorrhage. As a result, the affected area of the brain cannot function, which might result in an inability to move one or more limbs on one side of the body, inability to understand or formulate speech, or an inability one side of the visual field. [2] Globally, in 2013 there were 6.5 million stroke deaths, making stroke the second-leading cause of death behind ischemic heart disease. Approximately 795 000 strokes occur in the United States each year. On average, every 40 seconds, someone in the United States has a stroke, and on average, every 4 minutes, someone dies of a stroke. Approximately 60% of stroke deaths occurred outside of an acute care hospital. [3] The burden of stroke is increasing in many low- and middle-income countries (LMIC) [4] and due to high fatality rates and overwhelming resource incurred by the health systems, stroke and many non-communicable diseases (NCDs) are now targeted public health priorities in these regions [5], [6]. Stroke is increasingly becoming a challenging public health issue in Africa, and the non-availability of data has limited research output and consequently the response to this burden. [7] According to the latest WHO data published in may 2014 Stroke Deaths in Ethiopia reached 28,320 or 4.71% of total deaths. The age adjusted Death Rate is 71.94 per 100,000 of population ranks Ethiopia #107 in the world. [8]

OBJECTIVE

The objective is to assess the socio demographics and attitude towards of clinical expertise on acute stroke management among health professionals from December 2017 to April 2018.

METHODOLOGY

Study Area and Period

The study was conducted in the Hidar 11hospital, Akesta from December 2017 to April 2018.

Study Design

An institutional based cross sectional study was employed.

Source Population

All among health professionals working at Hidar 11 Hospital, Aketsa, Ethiopia.

Study Population

All health professionals working at Hidar 11 Hospital

Study Subjects

The study subjects were be the selected health professionals who meet the inclusion criteria

Sampling techniques and sample size

Stratified simple random sampling used to select 102 subjects.

Inclusion and Exclusion criteria

Inclusion criteria

All health professionals working at Hidar 11 Hospital who are working as full time.

Exclusion criteria

Health professionals who are severely ill and not available in working area during data collection

Dependent variable

Attitude regarding acute stroke management

Independent variables

Socio-demographic variables

- Age
- Sex
- Religion
- Ethnicity
- Marital status

Professional variables

- Profession
- Work experience
- Qualification
- Similar research

Attitude Score

- Positive attitude: Health professionals who scored the correct answers and agreed for attitude related questions above the mean.
- Negative attitude: Health professionals who not agreed for attitude related questions below the mean.
- Undecided: Health professionals who not decided for attitude related questions below the mean.

Data Collection Procedure

Self-administered structured questionnaires were administered to collect data. The questionnaires contain variables related to: Socio-demographic and Attitude of health professionals regarding acute stroke management. The questionnaires were prepared in English and; then, distributed for the Research Review Ethics Committee of Wollo University. After approval paper is taken from related hospital, the data distributed for the study subjects in English version. The data collection will be facilitated by trained BSC nurses.

Data Quality Control

Training was be given to data collectors 2 days before the actual data collection. Pre-test based feasible corrections will be made in questionnaires. Moreover, PIs will closely supervise the field activity on daily basis during data collection. At the end of each data collection day the principal investigator will check the completeness of filled questionnaires and quality of the recorded information. To evaluate the consistency of the questionnaires, pre-test was conducted on 10% of the sample size 1 week before the actual data collection using self-administered questionnaires. This Pre-test study will conducted among health professionals of other hospital which were not being included in main study.

Ethical Considerations

Initially ethical clearance will be obtained from Wollo University, College of Medicine and Health Sciences, and Department of Comprehensive Nursing Research Review Ethical Committee. Then, the formal letter was given to Akesta Hospital to obtain the permission to conduct the study. All the participants' response was kept confidential and their right to refuse to answer for the questions was be respected.

RESULTS

Part I: Description of demographic characteristics of health professionals

This part deals with distribution of participants according to their demographic characteristics. Data was analyzed using descriptive statistics and are summarized in terms of percentage.

Table 1: Frequency and percentage distribution of health professionals according to demographic characteristics   N=102

Sl. No.	Variable	Frequency	Percentage
1.	**Age**		
	22-25	52	50.98
	26-30	44	43.13
	31-35	5	4.90
	36 & above	1	0.98
2.	**Gender**		
	Male	61	59.80
	Female	41	40.19
3.	**Ethnicity**		

Sl. No.	Variable	Frequency	Percentage
	Oromo	7	6.86
	Amhara	84	82.35
	Gurage	1	0.98
	Tigray	8	7.84
	Others	2	1.96
4.	**Religion**		
	Orthodox	49	48.03
	Muslim	49	48.03
	Protestant	4	3.92
	Catholic	00	-
	Others	00	-
5.	**Marital Status**		
	Single	65	63.72
	Married	34	34.68
	Divorced	2	1.96
	Widowed	1	0.98
	Others	00	-
6.	**Profession**		
	General Practitioner	10	9.80
	Nurse	45	44.11
	Midwifes	35	34.31
	Others	12	11.76
7.	**Qualification**		
	Diploma	28	27.45
	BSc	69	67.64
	Medicine	4	3.92
	Others	1	0.98
8.	**Year of experience in years**		
	0-2	63	61.76
	3-5	29	28.43
	6-10	9	8.82
	11 and above	1	0.98
9.	**Monthly income (ETB)**		
	Up to 5000	14	13.72
	5001-10000	20	19.60
	10001 and above	68	66.66
10.	**Have you participated similar study before ?**		
	Yes	25	24.5
	No	77	75.49

Above stated data revealed that percentage distribution of health professionals according to their age in years shows that the uppermost percentage (50.98%) of the respondents were in the age group between 22-25 years, 43.13% of the respondents were in the age between 26-30 years, 4.90% were 31-35 years and just (0.98%) were in the age group of above 36 years. With respect to gender allocation of samples most (59.80%) of the respondents were males and 40.19% were female. Amongst participants majority (82.35) were belongs to Amhara ethnicity and least were belongs

to Gurage. Forty nine (48.03%) were belongs to orthodox and same (48.03%) with Muslims. Among 102 samples 63.72% were married and least (0.98%) are widowed. Giving out of sample according to their profession 9.80% were general practitioner, 44.11% & 34.31% nurses & midwives respectively and 11.76 % are other health professionals. Qualification reveals that highest percentage (67.64%) of the respondents from BSc Nursing, 27.45% are diploma holders, 3.92% are completed MD and 1% are others. Among selected health professionals majority (61.76%) of them have less than 2 years of experience and only 0.98% have 11 and above years of experience. Regarding monthly income of the health professionals more (66.66%) are earning 10000 and above. Greater part (75.49%) of the participants was not participated in similar study.

Part II: **Attitude towards clinical expertise acute stroke management among health professionals N= 102**
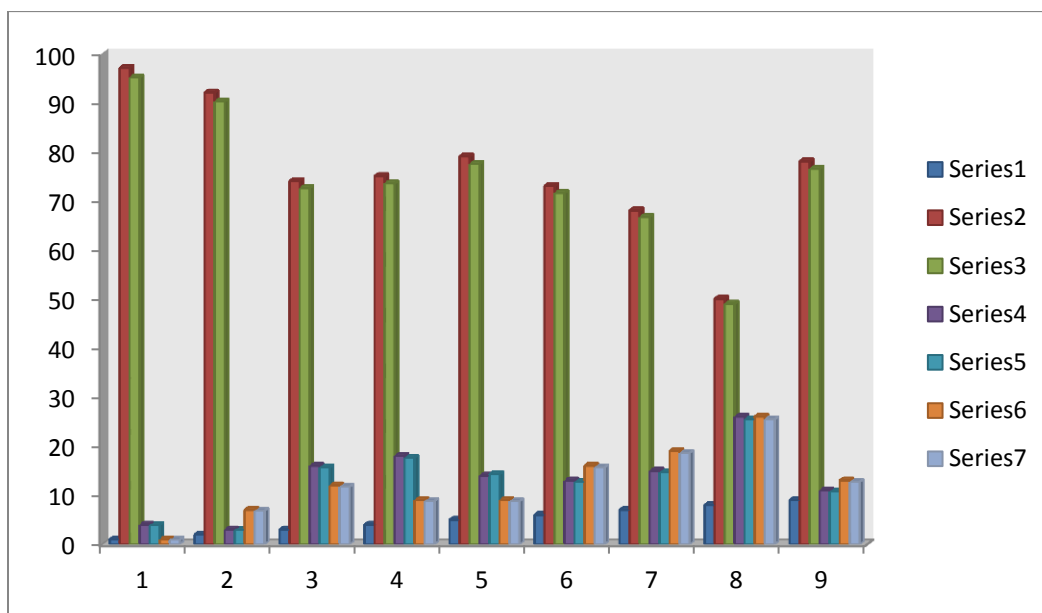

Figure 1: Attitude regarding clinical expertise on acute stroke management among health professionals

Table: 2 Attitude of health professionals on acute stroke management

N= 102

Q.No	Item	A	%	DA	%	UD	%
1.	Do you think acute stroke management is very important in saving patient life?	97	95.09	4	3.92	1	0.98
2.	Do you think treating the brain attack in early hour is important?	92	90.19	3	2.94	7	6.86
3.	Are you using advanced management in treating Brain attack in future?	74	72.54	16	15.68	12	11.76
4.	Would you be willing to learn advanced stroke management and adopt in your practice?	75	73.52	18	17.64	9	8.82
5.	Would you be willing to practice this work flow regardless of conditions?	79	77.45	14	14.28	9	8.82
6.	Would you be willing to teach co-workers and patient about acute stroke management?	73	71.56	13	12.74	16	15.68
7.	Would you be willing to attend training on acute stroke management?	68	66.66	15	14.70	19	18.62
8.	Do you think acute stroke management can help for patient	50	49.01	26	25.49	26	25.48

survival at 100 %?						
9. Do you think any professional training about acute stroke management will be useful?	78	76.47	11	10.78	13	12.74

Key: A=Agree (positive attitude), DA= Disagree (negative attitude), UD= Undecided (uncertain)

Among all respondents, majority of (95.09%) them agreed acute stroke management is very important in saving patient life, 3.92% disagree and only 0.98%of them were undecided. When asked do you think treating the brain attack in early hour is important. Most of them (90.12 %%) agreed, 6.86 % undecided and some (2.94%) of them disagree. Most of the samples (72.54%) contracted when we asked them, are you using advanced management in treating Brain attack in future? Of them 15.68 % were said No and 11.76% were uncertain. Conventional (73.52%) numbers were all set to learn advanced stroke management and adopt in practice, only small members (17.64 %) are not and very few (8.82%) were at ambiguous.

More (77.45%) had agreed to practice recent work flow regardless of conditions and 14.28% were not agreed and some (8.82) were tentative. Broadly held figure (71.56%) are positive towards to teach co-workers and patient about acute stroke management, 15.68% were not sure and 12.74% are not ready. About 66.66 % participants are willing to attend training on acute stroke management, 18.62% were undecided and 14.70% are not willing for the same. Many (49.01%) health professionals are sure that acute stroke management can help for patient survival at 100 %? Very close opinion (25.49%) not agree and 25.48% were don't know clearly. Good numbers (76.47%) of professionals wish to have professional training regarding acute stroke management, while some (12.74%) were uncertain and few (10.78%) participants had negative attitude. The above cited data depict that, the attitude towards acute stroke management among health professionals difference ad categorized as agree, disagree and undecided with 9 items. It can be over and done with that, mainstream of the health professionals had positive attitude, very less negative and only few were uncertain.

DISCUSSION

A research from Brazil revealed the attitude that one-hundred forty-nine of 205 (73%) participants answered the questionnaire; 49% were women, average age of 37 years (range 21–59). Ninety (60%) were professionals allied to medicine (PAM–nurses, health auxiliary, dentists), six (4%) were physicians, and 53 (36%) were other professionals (secretary, driver). [9]

In this study the percentage distribution of health professionals according to their age in years shows that the uppermost percentage (50.98%) of the respondents was in the age group between 22-25 years. In gender allocation most (59.80%) of the respondents were males and 40.19% were female and majority (82.35) were belongs to Amhara ethnicity and least were belongs to Gurage. Forty nine (48.03%) were belongs to orthodox and same (48.03%) with Muslims and 63.72% were married. Off 9.80% were general practitioner, 44.11% & 34.31% nurses & midwives respectively and 11.76 % are other health professionals. Qualification reveals that highest percentage (67.64%) of the respondents from BSc Nursing, 27.45% are diploma holders, 3.92% are completed MD and 1% are others. Among participants majority (61.76%) of them have less than 2 years of experience. The monthly income of the health professionals more (66.66%) are earning 10000 and above and greater part (75.49%) of the participants was not participated in similar study.

An Iran study shows that the attitude towards stroke risk factors in the general population of Shiraz is adequate. [10] This study revealed that, the attitude towards acute stroke management among health professionals difference ad categorized as agree, disagree and undecided with 9 items. It can be over and done with that, mainstream of the health professionals had positive attitude, very less negative and only few were uncertain.

CONCLUSION

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