



ISSN: 0975-833X

Available online at <http://www.journalcra.com>

International Journal of Current Research  
Vol. 11, Issue, 06, pp.4980-4982, June, 2019

DOI: <https://doi.org/10.24941/ijcr.35772.06.2019>

INTERNATIONAL JOURNAL  
OF CURRENT RESEARCH

## RESEARCH ARTICLE

### PREVALENCE AND INFLUENCING FACTORS OF LIFESTYLE DISEASES AMONG MIDDLE AGED

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#### ARTICLE INFO

##### Article History:

Received 29<sup>th</sup> March, 2019  
Received in revised form  
14<sup>th</sup> April, 2019  
Accepted 25<sup>th</sup> May, 2019  
Published online 30<sup>th</sup> June, 2019

##### Key Words:

Prevalence,  
Lifestyle diseases,  
Adaption,  
Risk factors.

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**Citation:** Dr. Shibu Puthenparambil, 2019. "Prevalence and influencing factors of lifestyle diseases among middle aged", *International Journal of Current Research*, 11, (06), 4980-4982.

#### ABSTRACT

**Introduction:** Life style diseases have been recognized as a clear threat not only to human health, but also to the development and economic growth in many countries. The number of individuals suffering from these diseases has been a steady rise. Chronic diseases of lifestyle are a group of diseases that share risk factors such as unhealthy dietary choices, smoking, lack of physical exercise, sedentary behavior and life-stress. **Background of the study:** The impact of non communicable diseases on the lives of the people is serious in terms of economic loss of country, loss of life and loss of potentially productive years of life, disability, family hardship and poverty. **Objectives:** The main objective of the study was to assess the prevalence and influencing factors of lifestyle diseases among middle aged(30-55yrs) among patients in General Ward. **Hypothesis:** 1,There is no significant relationship between gender and lifestyle diseases.2,Stress in lifestyle diseases.3,Family history and lifestyle diseases. **Materials and methods:** A cross sectional study was conducted on 87 patients in District Hospital, Thodupuzha. Census method was adopted for selection of sample. Chi-square test and frequency distribution tables were used for the analysis and interpretation. **Results and discussion:** Males are more victims for the lifestyle diseases than the females in the sample study. Among the sample ,76 patients is having Lifestyle diseases , from the study it is clear that 47.61% of sample population is having the habit of alcoholism and smoking ,majority of patients in the sample population is having hyperlipidemia ,hypertension ,diabetics, joint pains etc . Statistical analysis shows that there is a significant relationship between gender and Lifestyle diseases, stress and lifestyle diseases and family history and lifestyle diseases. **Conclusion:** The study were conducted to assess the Lifestyle diseases among all patients in a district hospital .Modern life style patterns affects our health in different aspects like physically ,psychologically ,and socially. A healthy lifestyle must be adopted to combat these diseases with proper balanced diet, physical activity, and giving due with respect to a biological clock. Healthy diet, regular sleep, daily activity, and a moderate approach to life's stressful moments will all lead in the right direction to a healthy lifestyle.

## INTRODUCTION

Lifestyle diseases are defined as diseases linked with the way people live their life. This is commonly caused by alcohol, drug and smoking abuse as well as lack of physical activity and unhealthy eating. Diseases that impact on our lifestyle are heart disease, stroke, obesity and type II diabetes. The diseases that appear to increase in frequency as countries become more industrialized and people live longer. They can include Alzheimer's disease, arthritis, atherosclerosis, asthma, cancer, chronic liver disease or cirrhosis, chronic obstructive pulmonary disease, type 2 diabetes, heart disease, metabolic syndrome, chronic renal failure, osteoporosis, stroke, depression, and obesity. Diet and lifestyle are major factors thought to influence susceptibility to many diseases. Drug abuse, tobacco smoking, and alcohol drinking, as well as a lack of or too much exercise may also increase the risk of developing certain diseases. The prevalence of non communicable disease is showing an upward trend in India. The impact of non communicable diseases on

the lives of the people is serious in terms of economic loss to country, loss of life and loss of potentially productive years of life, disability, family hardship and poverty. The world health organization has already warned of increasing NCDs among adolescents as a major health problem. Lifestyle diseases can be prevented through reduction in smoking of tobacco, overweight and obesity can be prevented through a well balanced lifestyle through healthy eating and exercise.

**Review of literature:** Lifestyle diseases have been recognized as a clear threat not only to human health, but also to the development and economic growth in many countries. Chronic diseases of lifestyle are a group of diseases that share risk factors such as unhealthy dietary choices, smoking, and lack of physical exercise, sedentary behaviour and life-stress. These result in various disease processes culminating in high morbidity and mortality due to cardiovascular and cerebrovascular disease, diabetes, tobacco- and nutrition induced cancers, chronic bronchitis, emphysema and many others. The non communicable or lifestyle related diseases

include cardiovascular disease, diabetes, cancers, chronic respiratory disease, mental health problems, musculo-skeletal disorders and others. However, the first four diseases in this list account for over 50% of mortality globally and share a small number of behavioural risk factors. These include excessive dietary calorie intake, a diet high in salt, saturated and trans fatty acids, excessive alcohol intake, physical inactivity and tobacco smoking. Amongst other interventions, this would include the adoption of healthy nutrition habits, taking regular physical activity and refraining from smoking. Furthermore, various forms of stress management practices, therapeutic education interventions and limitation of exposure to harmful stimuli e.g. pollutants or cellular phones are powerful forms of healthy lifestyle interventions. Generally, the health benefits of physical activity increase with increasing frequency, duration and intensity of Adverse life-stress exerts independent adverse effects on cardiovascular and other health parameters. Prospective studies consistently indicate that hostility, depression, and anxiety are all related to increased risk of coronary heart disease and cardiovascular death exercise. The current burden of chronic diseases reflects the cumulative effects of unhealthy lifestyles and the resulting risk factors over the life span of people. All these initiatives will provide countries with information to identify and act appropriately to promote a healthy lifestyle. The failure of countries to adopt the necessary steps to promote a healthy lifestyle, however difficult such a decision might be early in the twenty-first century, will inevitably lead to increasing levels of obesity, hypertension, hyperlipidemia, and diabetes in the populations of Sub-Saharan Africa countries. This, in turn, will be the cause of an avoidable chronic disease epidemic within a few decades.

**Prevalence of Lifestyle diseases and risk factors:** Lifestyle diseases are diet-related chronic diseases and the main ones include obesity, heart disease, diabetes, hypertension and cancers. According to the World Health Organisation (WHO), more than nine million deaths worldwide attributed to NCDs occur before the age of 60. High intake of refined sugar and low vegetable protein favor gallstone formation. Consumption of excessive saturated fats coupled with less physical activity and high waist hip ratio were the most significant predictors and point toward unhealthy lifestyle practices.

**Preventing lifestyle diseases:** Many people equate healthy eating with eating bland, boring, and unexciting foods. It basically means going for Balanced meals, in Moderate amounts, and with a Variety of foods based on the Food Pyramid. Physical activity improves cardiovascular fitness, strength and flexibility, and burns up calories to keep you fit and trim. This leaves you looking, feeling and thinking better. When your fitness improves, the intensity and amount of time spent on physical activity can be gradually increase.

## MATERIALS AND METHODS

A cross sectional study was conducted on 87 patients in District Hospital, Thodupuzha. Census method was adopted for selection of sample. Chi-square test and frequency distribution tables were used for the analysis and interpretation

**Objectives:** The main objective of the study was to assess the prevalence and influencing factors of lifestyle diseases among middle aged(30-55yrs) among patients in General Ward.

## Hypothesis:

1. There is no significant relationship between gender and lifestyle diseases.
2. There is no significant relationship between stress in lifestyle diseases.
3. There is no significant relationship between family history and lifestyle diseases.

The study was conducted on 87 patients in District Hospital, Thodupuzha. Census method was adopted for the study .Chi-square test and frequency distribution tables were used for the calculation.

## RESULTS AND DISCUSSION

### Gender and lifestyle Diseases

Life Style diseases	Present	Absent	Total
Gender			
Males	33 (78.57%) (55.93%)	9 (21.42%) (32.14%)	42 (48.27%)
Females	26 (57.78%) (44.068%)	19 (42.22%) (67.85%)	45 (51.73%)
Total	59 (67.81%)	28 (32.18%)	87

Among the sample 48.27% of individuals belongs to males of which 78.57% of males having lifestyle diseases, around 51.73% of individuals belongs to female categories out of which about(57.78%) of individuals having lifestyle diseases. From the study it is clear that males are more prone to lifestyle diseases than females. By applying Chi-square test, the calculated value is 7.466 which is greater than Table value (3.841) at 5% significance level with 1 degrees of freedom. So alternate hypothesis is accepted and hence it shows a significant relationship between gender and lifestyle diseases.

### STRESS/LIFE STYLE DISEASES

Life Style diseases	Present	Absent	Total
Stress			
Present	64 (85.33%) (100%)	11 (14.66%) (45.83%)	75 (86.21%)
Absent	0	12 (100%) (50%)	12 (13.79%)
Total	64 (73.56%)	24 (27.58%)	87

Among the sample (86.21%) of individuals having stress in which 100% of individuals having lifestyle diseases, and about 13.79 % of individuals have no stress and they have no lifestyle diseases. Hence it indicates that stress is directly related to lifestyle diseases.

### FOOD HABIT/ LIFE STYLE DISEASES

Life Style diseases	Present	Absent	Total
Food Habit			
Mixed	68 (100%) (78.16%)	0	68(78.16%)
Vegetarian	19 (100%) (21.83%)	0	19 (21.84%)
Total	87 (100%)	0	87

Among the sample 78% of individuals are following both vegetarian and non- vegetarian in which all individuals having

lifestyle diseases, and about 21.83% of individuals are following vegetarian food habit and they have also lifestyle diseases. Hence it indicates majority of the population is following both vegetarian and non –vegetarian food habit and they were having lifestyle diseases also.

#### OBESITY / LIFE STYLE DISEASES

Life Style diseases	Present	Absent	Total
Obesity			
Present	39 (79.59%) (73.58%)	10 (20.40%) (29.41%)	49 (56.32%)
Absent	14 (36.84%) (26.41%)	24 (63.15%) (70.58%)	38 (43.68%)
Total	53 (60.91%)	34 (39.08%)	87

Among the sample 79.59% of individuals are obese and about 73.58% of obese individuals having lifestyle diseases. By applying Chi-square test, it is clear that calculated value is=16.41, table value at 5% level is=3.841, degree of freedom =1. From this it is clear that calculated Chi-square value is higher than that of table value. So alternate hypothesis is accepted. Hence it shows a significant relationship between obesity and lifestyle diseases.

#### HERIDITY/ LIFE STYLE DISEASES

Life Style diseases	Present	Absent	Total
Heridity			
Present	59 (84.28%) (89.39%)	11 (15.7%) (52.38%)	70 (80.46%)
Absent	7 (41.17%) (10.60%)	10 (58.82%) (47.61%)	17 (19.54%)
Total	66 (75.86%)	21 (24.13%)	87

In the sample 84.28% of individuals having family history of lifestyle diseases in which 89.39% of individuals having lifestyle diseases. By applying Chi-square test, it is clear that calculated value=13.88, table value at 5% level is =3.841, degree of freedom=1. From this it is clear that calculated Chi-square value is higher than that of table value .So alternate hypothesis is accepted. Hence it shows a significant relationship between family history and lifestyle diseases.

## RESULTS AND DISCUSSION

The study was conducted to assess the lifestyle diseases among all patients in District Hospital, Thodupuzha. From the study it is known that 80.45% of individuals having lifestyle diseases like hyperlipidemia, hypertension, diabetics, allergies, backpain, jointpains etc. Males are more victims of lifestyle diseases due to change in their lifestyle patterns and most of the individuals are obese in the population. The growing burden of Lifestyle Diseases is likely to grow even further in the coming years. The health community and the business community are both equally likely to be effected by the same .

#### Conclusion

A healthy lifestyle must be adopted to combat these diseases with a proper balanced diet, physical activity and by giving due respect to biological clock. To decrease the ailments caused by occupational postures, one should avoid long sitting hours and should take frequent breaks for stretching or for other works involving physical movements. It is the need of the hour that India's health industry is better equipped with improved facilities, an effective delivery mechanism and awareness programs on Lifestyle disease.

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