

**“A STUDY TO ASSESS THE EFFECTIVENESS OF  
STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE  
REGARDING PREVENTION OF MYOCARDIAL INFARCTION  
AMONG ELDERLY PEOPLE IN SELECTED AREAS AT ANHRA  
PRADESH”**

**B.Archana, Agnes Chinta Singh, Vipin.A, Priyanka Agarwal,  
Toijam Monika Devi, Jasmi Johnson  
[archana.rcn@ramauniversity.ac.in](mailto:archana.rcn@ramauniversity.ac.in)**

**Faculty of Nursing, Rama University, Mandhana, Kanpur U.P 209217**

**ABSTRACT**

The experimental one group pretest and posttest design was used. A total 60 samples were selected by using simple random sampling technique. The data were collected Structural questionnaire, before and after structured teaching programme regarding prevention of myocardial infarction habits, diet, exercise, and life style changes. The results of post-intervention showed significant improvement in ( $P<0.05$ ) knowledge score. The percentage differences between pre-test and post -test score was analyzed using proportion with 95% Confidence interval which showed the effectiveness of structured teaching.

**Keywords:** Myocardial Infarction, Lifestyle Modifications, STP

**INTRODUCTION**

Most Myocardial infarction occurs 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, among others. The complete blockage of a coronary artery caused by a rupture of an atherosclerotic plaque is usually the underlying mechanism of a myocardial infarction.

**STATEMENT OF THE PROBLEM:**

**OBJECTIVES OF THE STUDY:**

1. To assess the knowledge of elderly people in selected areas regarding prevention of myocardial infarction with pretest knowledge score.
2. To administer structured teaching programme on myocardial infarction among the elderly people in selected areas in Nellore.
3. To assess the knowledge of elderly people regarding myocardial infarction with posttest knowledge score.
4. To evaluate the effectiveness of structured teaching programme by comparing pre-test and post-test knowledge scores of elderly people in selected areas at Nellore.
5. To find out association between pre-test and posttest knowledge scores with selected demographic variables among elderly people in selected areas at Nellore.

## **MATERIALS AND METHODS:**

### **Research approach:**

The research approach adopted for the present study is pre- experimental approach

### **Research design:**

pre-experimental study design to be specific one group pretest and posttest was considered

### **Setting of the study:**

Setting refers to the physical location and conduction in which data collection takes place for the present study the setting is selected areas in Nellore.

### **Sample and sampling technique:**

Sample size for the present study was 60 elderly people. Subjects for the study were selected by using convenience sampling technique.

### **Inclusion criteria:**

**The study includes the elderly people who are:**

- Elderly people in selected areas at Nellore.
- Willing to participate in the study.
- Available at the time of data collection.

### **Exclusion criteria:**

**The study excludes the elderly people who are not:**

- Elderly people in selected areas at Nellore.
- Willing to participate in the study.
- Available at the time of data collection.

## **DEVELOPMENT AND DESCRIPTION OF THE TOOL:**

### **Part-A:**

This section consists of 4 items on selected demographic characteristics of the participants in relation to their age in years, diet, and personal habits and source of information.

### **Part-B:**

The structured questionnaire consists of 35 items deals with knowledge related to prevention of myocardial infarction with four options. Each correct answer was assigned a score of one the total score of part-B was 35.

**MAJOR FINDINGS OF THE STUDY:**

**SECTION-I**

**Table-1** Frequency and Percentage Distribution of Demographic Variables.

**N=60**

S. No	Variable	Frequency	Percentage
1.	<b>Age</b>		
	a) 60 Years	07	11.7%
	b) 61 Years	20	33.3%
	c) 62 Years	21	35%
	d) Above 62 Years	12	20%
2.	<b>Diet</b>		
	a) Vegetarian	23	38.3%
	b) Nonvegetarian	28	46.6%
	c) Eggitarian	09	15%
3.	<b>Personal Habits</b>		
	a) Alcohol	18	30%
	b) Smoking'	26	43.3%
	c) Tobacco chewing	16	26.6%
4.	<b>Sources of information</b>		
	a) Magazines	10	16.6%
	b) News papers	24	40%
	c) Massmedia	20	33.3%
	d) Friends	6	10%

**TABLE-I:** Out of 60 respondents, most of them 7 (11.7%) were in the age inyears group of 60 years, 20 (33.3%) were in the age group of 61,21 (35%) were in the group of 62 years, 12(20%) were in the age group of Above 62 years. 23 (38.3%) were vegetarian, 28 (46.6%) were Non vegetarian, 09 (15%) were eggetarian.18 (30%) were Alcohol, 26 (43.3%) were having smoking habit,16 (26.6%) were having tobacco chewing.10 (16.6%) were through magazines, 24(40%) were News Papers, 20(33.3%) were by mass media,06 (10) through friends

- **TABLE-2: Mean Standard deviation, Mean percentage of pre-test and post test knowledge score of elderly people regarding prevention of myocardial infarction.**

S. no	Knowledge On	No. of Items	Pre test			Posttest		
			Mean	Standard Deviation	Mean %	Mean	Standard Deviation	Mean %
1	Myocardial infarction	35	18.66	1.6	53.3%	28.4	2.0	80.6

**TABLE-2:** In pretest the mean knowledge score of elderly people, for 35 items found to be 18.66 with standard deviation of 1.6 and the mean percentage score is 53.3%. In posttest the

mean knowledge score of elderly people, for 35 items found to be 28.3 with standard deviation of 2.0 and the mean percentage score is 80.6 %

**TABLE-3- Association related to Post-Test knowledge elderly people regarding prevention of myocardial infarction with selected demographic variables.**

S.NO	Demographic variable	Degree of freedom	Chi-Square value	Table value	Level of Significance
1.	Age in years	6	13.29	12.59	S*
2.	Diet	4	14.6	9.49	S*
3.	Personal habits	4	8.23	9.49	NS*
4.	Source of information	6	9.89	12.59	NS*

**Note:** NS-Not Significant, S-Significant

There is a significant association related to Post – Test knowledge level of elderly people regarding prevention of myocardial infarction with selected demographic variables like age, type of diet at 0.05 level of significance.

**CONCLUSION:**

There is a significant association related to posttest knowledge level of elderly people with selected demographic variables like age, type of diet at 0.05 level of significant.

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