

# Assessment of Knowledge, Attitude and Practice towards Migraine Treatment and Prevention among Medical College Students in Saveetha Medical College

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## Abstract:-

### ➤ Aim:

*Our aim is to assess the of knowledge , attitude and practice towards migraine treatment and prevention among medical college students in saveetha medical college.*

### ➤ Method

A cross sectional study(questionnaire based) will be done to assess *the of knowledge and attitude and practice towards migraine treatment and prevention among medical students from first year to final year in saveetha medical college. Collected data will be analysed. The results will be used to propose teaching modules to medical students which will reduce delay in referrals and speedy treatment for the needy*

### ➤ Result

The awareness among the medical students was poor regarding, what are the causes of migraine and migraine prophylaxis and treatment.The attitude and practice about the disease was also poor among most of the students as they don't even consider migraine as a disease that needs consultation and the most of them will take drugs without consultation.

### ➤ Conclusion

We conclude there is lack of awareness, knowledge, attitudes, about migraine treatment and prevention among medical students. Further community-based population studies and awareness programmes should be carried out to improve the knowledge about migraine prevention and treatment.

## I. INTRODUCTION:

Migraine is a neurological disorder that has many symptoms which is frequently characterized by highly painful headaches. Symptoms include vomiting, difficulty in speaking ,tingling sensation , nausea and sensitivity to light and sound .To give proper treatment for migraine accurate diagnosis, and ruling out other causes, teaching the patient and prescribing a best drug for controlling of pain is

essential .For treating migraine there are two ways pharmacologically that should be used individually or combined for patients with severe migraine . The preventive therapy can be used for reduce the intensity, severity and duration of migraine attacks . enhancing the practice and knowledge among medical students can result in prevention of migraine episodes and its effect on quality of life. Our study aims to assess the knowledge ,attitude and practice towards migraine treatment and prevention among medical students.

## II. MATERIAL AND METHODS:

We performed a questionnaire-based study amid medical students to assess *the of knowledge , attitude and practice towards migraine treatment and prevention among medical college students* A well-designed questionnaire was given to medical students , and response was analysed. The questionnaire was given to total of 300 students of second year third year and final year.

The questionnaire contains three sections regarding knowledge, attitude, and practice regarding migraine treatment and prevention.

### ➤ Statistical Analysis:

The data processing was done by using spss.

## III. RESULT:

### ➤ Migraine treatment and prevention (knowledge assessment):

Each and every student(100%) knew migraine definition and the fact women are more commonly affected by migraine as compared to men was known only by 38% . surprisingly 96.33% knew that migraine is caused by vascular disturbance and anomalous brain function .only 36.6% knew about the predisposing factors which influence migraine on other hand everyone were able to name different drugs that can be used for migraine and many(83.3%) knew that migraine episodes can be reduced by doing some lifestyle modifications and taking few drugs .only few knew(50%) about the prophylaxis of breakthrough of migraine.

<b>Table 1</b>	<b>Correct</b>
Is migraine a chronic neurological disease	<b>300(100%)</b>
Do women have higher risk of developing migraine than men due to their hormonal changes	<b>114(38%)</b>
Migraine is caused due to vascular disturbance and anomalous brain function.	<b>289(96.33%)</b>
Does migraine have predisposing factors like environmental factors and heredity	<b>110(36.6%)</b>
What are the two drugs that can be used for chronic and acute migraine	<b>300(100%)</b>
Can migraine episodes be reduced by doing some lifestyle modifications and taking few drugs	<b>250(83.3%)</b>
Does the severity of the migraine decide the need for prophylaxis	<b>150(50%)</b>
How many months should the drugs be taken without missing	<b>250(83.33)</b>

Table 1

*Evaluation of attitude towards migraine:*

Most (66.66%) of the students prefer taking medication by themselves than consulting a doctor. and 60% of students did not prefer to change lifestyle for preventing migraine

and 73.3% didn't prefer follow up sessions with a consultant for several months as presented in table. 2.

<b>If you suffer from recurrent headache, what would you do?</b>	<b>No.</b>	<b>Percentage (%)</b>
Consult a doctor	100	33.33%
Go to pharmacist for help	0	0
taking paracetamol by yourself without consulting doctor	200	66.66%
<b>If u are suffering from migraine will you modify your life style?</b>		
yes	120	40%
no	180	60%
<b>will you go for follow up session to a doctor for several months for treatment of migraine?</b>		
yes	80	26.66
no	220	73.33

Table 2

*Assessment of Practice pattern towards migraine:*

The level of practice among most of participants was also very poor see in table 3

	<b>yes</b>	<b>no</b>
1. Have you ever suffered from migraine	76.5%	23.5%
2 is lifestyle modifications and acute medication the best treatment?	52.3%	47.7%
3. if your friend or relative is suffering from migraine Would you recommend them consulting a doctor ?	25%	75%
4. will u suggest your friend certain type of drugs if he has migraine	63.33%	36.67%

Table 3

**IV. DISCUSSION:**

This was the first study conducted to assess the KAP regarding migraine treatment and prevention among medical students and to enhance their knowledge assessment and practice of migraine treatment and prevention. The awareness level among most of the students were poor .the medical students are going to be the future doctors they are the ones who are going to advice the patient if they only lack awareness how will they advice patients so measures to improve their knowledge about treatment of migraine should be done among medical students. many doctors don't tell their patients about their illness ,treatment and prevention briefly which lead to poor quality of life among patients .it is

not easy to change the attitude after they become doctors but it can be easily changed at this stage of medical student. So migraine prevention and treatment should be a part of undergraduate teaching and health campaigns must be launched .telecommunication must help educating doctors in remote areas and media must help in spreading awareness among general population. There are some limitations in this study there was no previous studies to compare our study results with them. Also, the sample size, and time plan were other obstacle.

## V. CONCLUSION:

The KAP level about migraine treatment and prevention was poor among most of the medical students. Medical students must have proper knowledge, positive attitude and practice skills towards not only migraine about all the diseases to maintain a better quality of life among patients and to advice them properly so it is really important for the health authorities to launch educational campaigns in all medical college.

## REFERENCES

- [1]. Carson AP, Rose KM, Sanford CP et al. (2004): Lifetime prevalence of migraine and other headaches lasting 4 or more hours: the Atherosclerosis Risk in Communities (ARIC) study. *Headache*, 44:20-28.
- [2]. Radtke A and Neuhauser H (2009): Prevalence and burden of headache and migraine in Germany. *Headache*, 49:79-89.
- [3]. Steiner TJ, Scher AI, Stewart W et al. (2003): The prevalence and disability burden of adult migraine in England and their relationships to age, gender and ethnicity
- [4]. Loder S, Sheikh HU and Loder E (2015): The prevalence, burden, and treatment of severe, frequent, and migraine headaches in US minority populations: statistics from National Survey studies. *Headache*, 55:214- 228.
- [5]. Lipton RB, Manack Adams A, Buse DC et al. (2016): A comparison of the chronic migraine epidemiology and outcomes (CaMEO) Study. American migraine prevalence and prevention (AMPP) study. *Headache*, 56:1280-1289.
- [6]. Lipton RB, Serrano D, Holland S et al. (2013): Barriers to the diagnosis and treatment of migraine: effects of sex, income, and headache features. *Headache*, 53:81-92.