A Study to Assess the Effectiveness of Video Assisted Teaching Module on Knowledge Regarding Myocardial Infarction and its Prevention among the Patients Attending Diabetic Clinic at BVV Sangha's HSK Hospital and Research Centre, Bagalkot

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Abstract:- Heart is one of body's most important organ. Essentially a pump, the heart is a muscle made up of four chambers separated by valves and divided into two halves. This heart may be getting failured. It may be chronic and irreversible. Diabetic mellitus clients are prone to develop all types of infection, mainly due to dysfunction of the host defines. Acute myocardial infarction is one of the most common diagnoses in hospitalized patients in the industrialized countries, which is a serious complication of atherosclerotic coronary heart disease. Pre-experimental research design with one group pre test post test without control group was used. The 40 study subjects were selected through convenient sampling technique. Data was collected by means of a Structured Closed Ended knowledge Questionnaire by interview schedule. Data was analyzed by using descriptive and inferential statistical in terms of mean, frequency distribution, percentage't' test and chi-square test. Comparison of mean and standard deviation of the knowledge scores of the pre-test and post-test reveals an increase in the mean knowledge score of the clients the attending diabetic clinic regarding myocardial infarction and its preventions. . Hence, there is need for creating greater awareness among Clients, educate clients in all aspects regarding prevention of infection. Hence, the Present study was undertaken to evaluate the effectiveness of video assisted teaching module regarding prevention of infection.

Keywords:- Effectiveness, Video Assisted Teaching Module Programme, Myocardial Infarction.

I.   INTRODUCTION:

The heart is like any other muscle, requiring blood to supply oxygen and nutrients for it to function. The heart's needs are provided by the coronary arteries, which begin at the base of the aorta and spread across the surface of the heart, branching out to all areas of the heart muscle.

The coronary arteries are at risk for narrowing as cholesterol deposits, called plaques, build up inside the artery. If the arteries narrow enough, blood supply to the heart muscle may be compromised (slowed down), and this slowing of blood flow to the heart causes pain, or angina. [3]

Cardiovascular diseases are at present the leading causes of death in the developed countries. Ischemic heart disease is the cause of 25 – 30% of deaths in most industrialized countries.Myocardial infarction (MI) or acute myocardial infarction (AMI), commonly known as a heart attack, is the interruption of blood supply to a part of the heart, causing heart cells to die.

So these risk factors can be modified to reduce the occurrence of myocardial infarction. If the patients are having some knowledge about these risk factors, they may try to manipulate these risk factors to avoid complications in future. [5]

Here in this study, we assess the prevalence of myocardial infarction and its prevention and related health problems among the persons attending the Diabetic clubs in a tertiary care hospital of Bagalkot, kartnataka, India.

II.   THE OBJECTIVES OF THE STUDY:

➢ To assess the existing knowledge regarding Myocardial infarction and its prevention among the Patients attending Diabetic clinic at BVV Sangha's HSK Hospital and Research centre hospital, Bagalkot.
➢ To find the effectiveness of Video Assisted Teaching Module on knowledge regarding Myocardial infarction and its prevention among the Patients attending Diabetic clinic at BVV Sangha's HSK Hospital and Research centre hospital, Bagalkot.
➢ To determine the association between post test knowledge scores regarding Myocardial infarction and its prevention among the Patients with their selected socio-demographic variables.

III. HYPOTHESIS

- **H₁:** There is a significant difference between pretest and post test knowledge scores regarding Myocardial infarction and its prevention among patient's attending Diabetic clinic.
- **H₂:** There is a significant relationship between the posttest knowledge Scores regarding Myocardial infarction & its prevention and the selected socio demographic variables.

IV. METHODOLOGY

Study Design: was pre experimental one group pre test -post test without control group design

- Study Population The sample for the present study are clients attending the diabetic clinic of tertiary care hospital of Bagalkot.
- Study Duration: March 2018- May 2018
- Sample Size(N) : This study composed of 40 clients attending the diabetic clinic of tertiary care hospital.
- Study Tool: A video assisted closed ended Questionnaire was prepared by extensive review of literatures and on the basis of guide's opinion. The tool validity was obtained from 8 experts from different states. According to the expert's opinion, warm exercises were included and items was organised in order.

V. FINDINGS OF THE STUDY:

Percentage wise distribution of subject according to age groups reveals that out of 40 subjects, 17.5 % of the subjects belongs to age group of between 35-45 years, followed by 55% in the age group of 45-55 years, 20% were 55-65 years of age and 7.5% were 65-75 age group. Percentage wise distribution of subject according to gender reveals that, 67.5% of subjects were male and remaining 32.5% were females. Religion type shows that 72.5% of subjects were from Hindu, 25% of subjects were from Muslim, and remaining 2.5% were from Christian. 10% of the subjects had no formal education, 17.5% up to primary education, 30% had secondary education, 10% had higher secondary education and 32.5% subject had degree and PG. Study subjects according to occupation showed 12.5% subjects were coolie , 7.5% were farmer, were 27.5% Govt employee, were 25% private employee, were 17.5% business, and remaining 10% of the subjects were unemployed. Monthly income shows that, 5.1%% subjects had an income below Rs 5000/-, followed by 52% subjects with income between Rs. 5001/--10000/-, 37.5% had Rs 10001/-20000. Income Rs. 20001/and above.

Knowledge wise comparison of study subjects in pre test and post test reveals the following results. In pre-test .out of 40 subjects 0 (0%) had good knowledge followed by 2 (5%) had average knowledge followed by 23 (57.5%) subjects with poor knowledge regarding myocardial infarction and its prevention. However after STP in post test, 55% subject with excellent, 35% subjects with good, 10% with average and no subjects had poor knowledge regarding myocardial infarction and its prevention (Table No. 1).

Level of knowledge	Pre – test		Post-test	
	No.of respondents	Percentage	No.of respondents	Percentage
Excellent	0	0	22	55
Good	0	0	14	35
Average	2	5	4	10
Poor	23	57.5	0	0
Very poor	15	37.5	0	0
Total	40	100	40	100

Table 1:- Comparison of knowledge level of undergoing myocardial infarction subjects in pre-test and post-test.

Test	Mean	Std. Error	Mean Diff	SD Diff	Paired t-value	Table value
Pre-test (x_1)	9.25	0.025	22.45	0.564	26.59	2.023
Post-test(x_2)	31.7					

Table 2 :- Significant difference between the pre test knowledge and post test knowledge scores of subjects attending the diabetic clinic.

As the calculated t value (26.59) was much higher than table 't' value (2.023) the hypothesis: **H₁** -there is a significant difference between the pre test knowledge and post test knowledge scores of the subjects at attending the diabetic clinic is accepted. Findings revealing the presence of significant difference between pre-test and post-test knowledge scores, hence the

video assisted teaching model on prevention of myocardial infarction which is prepared by the researcher was proved to be effective (Table No. 2).

SL. NO	Socio demographic variables	Df	Chi-square value	Table value	Level of significance	Significant
1	Age	1	2.98	3.84	0.05	Not significant
2	Gender	1	0.99	3.84	0.05	Not significant
3	Religion	1	0.04	3.84	0.05	Not significant
4	Educational status	1	2.53	3.84	0.05	Not significant
5	Occupation	1	2.47	3.84	0.05	Not significant
6	Family income	1	2.99	3.84	0.05	Not significant

Table 3:- Association between post-test knowledge scores and selected socio demographic variables

Chi square was calculated to find association between post knowledge scores of subjects at attending the diabetic clinic with their selected socio demographic variables by using 2×2 contingency table.

There is no significant association was found between the post test knowledge scores of myocardial infarction and its prevention among attending the diabetic clinic and their socio-demographic variables such as age, gender, religion, education, occupation, family monthly income.

Thus H_2 stated is rejected. (Table No. 3)

VI. CONCLUSION:

Findings revealing the presence of significant difference between pre-test and post-test knowledge scores. The persons diagnosed with diabetes mellitus still are unknown about risk factors of myocardial infarction. Hence is there is need to develop awareness of the on prevention of myocardial infarction among the patients diagnosed with the diabetes mellitus.

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