

Original Research Article

Health awareness, attitude and practices in male doctors

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ABSTRACT

Background: Studies of doctors' health have emphasised psychological health. Limited data is available on their physical health status. Doctors very often fail to follow recent preventive health guidelines for their physical health. Here, we collected the information available about physical health of male doctors. We stress how important it is for all doctors to have screening and regular check up.

Methods: A cross sectional study was conducted among 100 male doctors of M.B.B.S. and higher degrees of various subjects. Selection of male doctors was done randomly.

Results: In present study, out of 100 male doctors, 40 (40%) male doctors had normal BMI, 34 (34%) male doctors were overweight, 26 (26%) male doctors were obese while 0 (0%) male doctors were underweight.

89 (89%) had their own blood pressure check up, 88 (88%) had their own blood sugar checked, 85 (85%) had got their own lipid profile done while 85 (85%) male doctors had their electrocardiogram (ECG) done. 29 (29%) male doctors were diagnosed as hypertensive, 10 (10%) were diagnosed as diabetic, 7 (7%) had hyperlipidemia, 4 (4%) as having coronary artery disease, 1 (1%) were detected as collhaving Hodgekin's Lymphoma.

Conclusions: In spite of knowing about all diseases, their complications, screening methods and preventive care, practice of applying screening or preventive methods to themselves is not universal in doctors.

Keywords: Coronary artery disease, Diabetes, Hypertension, Hyperlipidemia, Male doctors, Screening

INTRODUCTION

Since last twenty years, doctors' health has been discussed intensely. Mostly, studies have focused on their mental health. It includes sleep deprivation, drug dependence, depression and suicide. But, mortality data show that mostly doctors die from physical problems than mental illness. There is limited research on doctors' physical health or their health behavior.¹

One study concluded that 44% of doctors have chronic health problems.² Another study reported that 50% of 408

GPs in the United Kingdom had a serious illness or some operation as an adult.³

Doctors are often reluctant to seek medical advice. In one survey, 26% of doctors with a medical problem reported that they feel inhibited consulting another doctor.⁴

S. George et al conducted 28 interviews of doctors. Common barriers to healthcare included inadequate time, fear of consequences, and concern about confidentiality. Concern is specially for mental health problems, chronic pain, substance abuse, and sexual dysfunction. Commonly seen is neglecting one's health, minimizing

symptoms, self-diagnosing and treatment, and a strong desire not to burden colleagues.⁵

Table 1: Recommended screenings AHA June 2017.⁶

Recommended Screenings AHA June 2017	How Often?
Blood pressure	Each regular healthcare visit or once every 2 years if blood pressure is less than 120/80 mm Hg
Cholesterol (“fasting lipoprotein profile” to measure total, HDL and LDL cholesterol)	Every 4-6 years for normal-risk. More often if any elevated risk for heart disease and stroke
Weight / Body Mass Index (BMI)	During regular healthcare visit
Waist circumference	As needed. It evaluates cardiovascular risk if BMI is greater than or equal to 25 kg/m ²
Blood glucose test	Every 6 months

Table 1 depicts AHA recommendations for screening. According to that, blood pressure screening is most important because high blood pressure usually has no symptoms. It can't be detected without being measured. High blood pressure increases the risk of heart disease and stroke. If blood pressure is <120/80 mm of Hg, it should be checked once every two years, from the age of 20 years. Higher blood pressure should be checked more often. High blood pressure can be controlled by modifying lifestyle and/or medication.⁶

The American Diabetes Association recommends testing blood sugar for all starting at 45 years. If tests are normal, it should be repeated at 3-year intervals.⁷

If BMI is greater than 25, the person is overweight (unless the persons weight lifter or do body-building exercises). If BMI is above 30, then the person is obese. Being overweight or obese increases the risk for many illnesses, including heart disease and diabetes.⁸

Cholesterol should be done every 5 years. It should be done at shorter intervals for people who have lipid levels close to those warranting therapy. It should be done at longer intervals for those not at increased risk and with repeatedly normal lipid levels." If the person is less than 35 years and smoke or have diabetes, high blood pressure, or heart disease in your family, cholesterol should be done more closely.⁸

Blood pressure screening should be done every two years if blood pressure is below 120/80 t should be done yearly if systolic blood pressure is 120 to 139 mmHg or diastolic blood pressure is 80 to 89 mmHg.⁸

To improve overall cardiovascular health, a person should do at least 150 minutes per week of moderate exercise or 75 minutes per week of vigorous exercise (or a combination of moderate and vigorous activity). Thirty minutes a day, five times a week is easy to remember.⁹

For lowering the blood pressure or cholesterol, 40 minutes of aerobic exercise of moderate to vigorous intensity three to four times a week is recommended to lower the risk of heart disease and stroke.⁹

A healthy diet for men includes

- Eat at least 2 cups of fruits and 2½ cups of vegetables each day for vitamins, minerals and fiber
- Eat at least half of all grains as whole grains each day. Replace refined grains with whole-grain bread, cereal, pasta, brown rice or oats.
- Two to three servings of fish per week.
- 8 grams of fiber a day for younger men; 30 grams of fiber a day for more than 50 years.
- Unsaturated fats like oils, nuts and oil-based salad dressings instead of saturated fats including full-fat dairy foods, butter and high-fat sweets.
- 4,700 mg/day of potassium from fruits, vegetables, fish and milk.¹⁰

Aims and Objectives of the study was to evaluate weight awareness, attitude and practices in terms of diet and exercise in male doctors. To evaluate awareness, attitude and practices of hypertension, diabetes and coronary artery disease in male doctors

METHODS

A cross sectional study was conducted among 100 male doctors of various subjects who attended a conference at Mathura, U.P. Selection of male doctors was done randomly.

This survey was conducted in Mathura district in male doctors of M.B.B.S. and higher degrees from July to October 2017 using a questionnaire.

Inclusion criteria

Male doctors above 30 years of age were included.

Exclusion criteria

Male doctors below 30 years of age were excluded as very young male doctors don't think of investigating themselves.

This evaluated implementation of screening and preventive measures used by them for self-protection. Data was collected in Microsoft excel sheet and analyzed. Statistics was done in percentages.

RESULTS

Table 2: Age distribution.

Age distribution	No. of male doctors	%
31-40 years	18	18
41-50 years	42	42
51- 60 years	29	29
>60 years	11	11
Total	100	100

In present study, out of 100 male doctors, 42 (42%) male doctors were between 41-50 years, 29 (29%) male doctors were between 51-60 years, 18 (18%) male doctors were between 31-40 years, 11 (11%) male doctors were >60 years. Female doctors of <30 years were excluded (Table 2).

Table 3: Body mass index (BMI).⁶

Body mass index (BMI)	No. of male doctors	%
Normal	40	40
Underweight	0	0
Overweight	34	34
Obese	26	26

In present study, out of 100 male doctors, 40 (40%) male doctors had normal BMI, 34 (34%) male doctors were overweight, 26 (26%) male doctors were obese while 0 (0%) male doctors were underweight (Table 3).

Table 4: Diet and Exercise pattern.

Diet pattern	No. of male doctors	%
Vegetarian	32	32
Mixed (Veg and non-veg)	68	68
Outside food <3 times a week	58	58
Outside food >3 times a week	42	42
Exercise > 3 times a week	64	64
Exercise <3 times a week	36	36

In present study, out of 100 male doctors, 32 (32%) male doctors were consuming pure vegetarian diet while 68 (68%) male doctors were consuming mixed (vegetarian and non-vegetarian) food.

Advice regarding healthy food was given.

In present study, out of 100 male doctors, 42 (42%) male doctors were eating outside food >3 times a week while 58 (58%) male doctors were eating outside food < 3 times in a week.

In present study, out of 100 male doctors, 64 (64%) male doctors were doing exercise >3 times a week while 36 (36%) male doctors were doing exercise < 3 times in a week (Table 4).

Table 5: Speciality of male doctors.

Specialty of female doctors	No. of male doctors	%
Physician	20	20
Surgeon	18	18
Anesthetist	11	11
Pediatrician	8	8
Orthopedician	7	7
Pathologist	6	6
Radiologist	6	6
Ophthalmologist	6	6
Gynecologists	6	6
ENT Surgeon	6	6
General practitioner	2	2
Pulmonologist	1	1
Neurosurgeon	1	1
Gastroenterologist	1	1
Pediatric surgeon	1	1

In present study, out of 100 male doctors, 20 (20%) were physician, 18 (18%) were surgeons, 11 (11%) were anesthetists, 8 (8%) were pediatricians, 7 (7%) were Orthopedicians, 6 (6%) were gynecologists, , 6 (6%) were pathologists, 6 (6%) were radiologists, 6 (6%) were ophthalmologists, 6 (6%) were ENT Surgeons, 2 (2%) were general practitioners while 1(1%) each were pulmonologist, Neurosurgeon, Gastroenterologist and Pediatric Surgeon (Table 5).

Table 6: Awareness of hypertension, diabetes, coronary artery disease.⁶

Awareness of hypertension, diabetes and coronary artery disease	No. of male doctors	%
Blood pressure checked	89	89
Blood sugar done	88	88
Lipid profile done	85	85
Electrocardiography (ECG)	85	85

In present study, out of 100 male doctors, 89 (89%) had their own blood pressure check up, 88 (88%) had their own blood sugar checked, 85 (85%) had got their own lipid profile done while 85 (85%) male doctors had their electrocardiogram (ECG) done (Table 6).

Table 7: Suffering from major disease.

Suffering from major disease	No. of male doctors	%
Hypertension	29	29
Diabetes	10	10
Hyperlipidemia	7	7
Coronary artery disease	4	7
Hodgekin’s Lymphoma	1	1

In present study, 29 (29%) male doctors were diagnosed as hypertensive, 10 (10%) were diagnosed as diabetic, 7 (7%) had hyperlipidemia, 4 (4%) as having coronary artery disease, 1 (1%) were detected as having Hodgkin's Lymphoma (Table 7).

DISCUSSION

In present study, 29 (29%) male doctors were diagnosed as hypertensive, 10 (10%) were diagnosed as diabetic, 7 (7%) had hyperlipidemia, 4 (4%) as having coronary artery disease, 1 (1%) were detected as having Hodgkin's Lymphoma (Table 7).

Margaret P Kay et al reported that Illnesses experienced by doctors include cardiovascular disease (4%–15%), respiratory illness (10%–21%), musculoskeletal problems (9%–38%), cancer (2%–3%) and psychiatric illness (3%–10%).¹

In present study, out of 100 male doctors, 42 (42%) male doctors were between 41-50 years, 29 (29%) male doctors were between 51-60 years, 18 (18%) male doctors were between 31-40 years, 11 (11%) male doctors were >60 years. Female doctors of <30 years were excluded. (Table 2)

JY Chen et al reported that 3/4th of respondents were male and obtained their medical degree in Hong Kong. Most were aged between 30 and 50.¹¹

Fawibe AE et al found that majority of doctors (78.7%) were married. Mean age was 39.3 ± 9.4 years with a range of 26–61 years. 206 doctors (39.5%) were between 25–45 years age group, and 284 (54.4%) were >45 years while 32 (6.1%) did not indicate their age.¹²

In present study, out of 100 male doctors, 40 (40%) male doctors had normal BMI, 34 (34%) male doctors were overweight, 26 (26%) male doctors were obese while 0 (0%) male doctors were underweight. (Table 3)

In present study, out of 100 male doctors, 32 (32%) male doctors were consuming pure vegetarian diet while 68 (68%) male doctors were consuming mixed (vegetarian and non-vegetarian) food (Table 4).

In present study, out of 100 male doctors, 42 (42%) male doctors were eating outside food >3 times a week while 58 (58%) male doctors were eating outside food < 3 times in a week (Table 3).

In present study, out of 100 male doctors, 64 (64%) male doctors were doing exercise >3 times a week while 36 (36%) male doctors were doing exercise < 3 times in a week (Table 4). A Mathavan et al recorded a prevalence of hypertension as 41% among men and 23% among women, metabolic syndrome in 49% of female physicians and 41% of male physicians. They found that only 17% doctors were physically active. Less than one-half of

them consumed vegetables. Nearly 31% of male physicians were smokers.¹³

Bazargan M et al reported that 35% of participants reported “no” or “occasional” exercise.¹⁴

In present study, out of 100 male doctors, 20 (20%) were physician, 18 (18%) were surgeons, 11 (11%) were anesthetists, 8 (8%) were pediatricians, 7 (7%) were Orthopedicians, 6 (6%) were gynecologists, 6 (6%) were pathologists, 6 (6%) were radiologists, 6 (6%) were ophthalmologists, 6 (6%) were ENT Surgeons, 2 (2%) were general practitioners while 1(1%) each were pulmonologist, Neurosurgeon, Gastroenterologist and Pediatric Surgeon (Table 5).

In present study, out of 100 male doctors, 89 (89%) had their own blood pressure check up, 88 (88%) had their own blood sugar checked, 85 (85%) had got their own lipid profile done while 85 (85%) male doctors had their electrocardiogram (ECG) done. (Table 5).⁷

McCall L et al showed that 93% of GPs had checked their blood pressure and 64% had checked their cholesterol level in the previous 3 years.¹⁵

CONCLUSION

Additional interventions designed to improve physicians' lifestyles and personal health behaviors should be encouraged. A focus on creating healthy lifestyles will benefit physicians as much as the general population.

Doctors frequently do not “practice what they preach.”

There is a need to incorporate physical health into the debate on doctors' health.

There are other lifestyle changes men should make to maintain their health.

- Lose weight if you're overweight.
- Don't smoke or use tobacco.
- Limit alcohol you drink. Men should have no more than 2 drinks a day.
- Protect your skin from the sun.
- Manage your stress.
- Practice safe sex.
- Avoid risky or harmful actions or choices. Extreme sports and stunts increase your chance of injury or death. Wear seatbelts in moving vehicles. Wear helmets when riding bicycles and motorcycles. Always avoid texting while driving.

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Questionnaire

Questionnaire	Answer
Name	-
Age	-
Height and weight to calculate body mass index	-
Vegetarian or Mixed	-
Frequency of hotel food	-
Exercise done more than 3 times per week	-
Blood pressure got checked or not	-
Blood sugar got checked or not	-
Lipid profile got checked or not	-
ECG done or not	-