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SELF-CARE AMONG ULCERATIVE COLITIS PATIENTS

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ABSTRACT

Background: ulcerative colitis is emerging as a worldwide epidemic, with prevalence of around 1% in North America and some European countries, and a rapid increase in incidence reported in Asia, China and Australasia. A number of recent reports and publications point to the burden that this rising tide of ulcerative colitis is imposing on patients, healthcare services and society (Panés et al., 2014).

Study aims to assess self-care among patients with ulcerative colitis disease and its relationship with their demographic data.

Methodology: : a descriptive study design was conducted at Al-Najaf city in the southern region of Iraq in Al-Najaf Al-Ashraf Health Directorate/ Specialized Hospital for Gastrointestinal and Liver Disease and Surgery from February 20th, 2023, to May 21th, 2023, in order to assess self-care among ulcerative colitis patients. The methodological strategies for data collection used an assessment questionnaire survey

Results: As the study shows, that the total responses of patients to universal self-care is moderate.

Conclusion: the study concludes that the level of patients' self-care is moderate, besides, patients' gender and occupation affect their universal self-care level.

Recommendations: health education programs should be applied to increase the patients' knowledge regarding how to improve their self-care and factors that affecting their self-care abilities.

INTRODUCTION

Ulcerative colitis is emerging as a worldwide epidemic, with prevalence of around 1% in North America and some European countries, and a rapid increase in incidence reported in Asia, China and Australasia. A number of recent reports and publications point to the burden that this rising tide of ulcerative colitis is imposing on patients, healthcare services and society (Panés et al., 2014).

Chronic inflammatory disease that affects the colon, with a peak of disease onset at an age between 30 and 40 years. The disease is characterized by a relapsing remitting course and is responsible for considerable disability and high direct and indirect costs. While there does not appear to be

any gender-related differences, both the incidence and prevalence are increasing worldwide(Armuzzi & Liguori, 2021).

Self-care for patients with ulcerative colitis disease focuses on factors that can prevent relapses, relieve symptoms or help with managing daily life. Patients engage in a range of activities such as taking medication, restricting diet, modifying behaviors that could trigger symptoms, and maintaining close proximity to a toilet. A previous study showed that self-care for patients with ulcerative colitis disease could be divided into four categories: symptom recognition, symptom management, planning life, and seeking new options. Patients with ulcerative colitis disease have lifelong needs to learn how to manage their symptoms and situations. Being one step ahead and planning make life with ulcerative colitis disease easier (Lovén Wickman et al., 2019).

METHODOLOGY

Study Design: a descriptive study design was conducted at Al-Najaf city in the southern region of Iraq in Al-Najaf Al-Ashraf Health Directorate/ Specialized Hospital for Gastrointestinal and Liver Disease and Surgery from February 20th, 2023, to May 21th, 2023, in order to assess self-care among ulcerative colitis disease patients. The methodological strategies for data collection used an assessment questionnaire survey

Population and Study Sample:

A non-probability (convenience) sample of (48) patients who visit the Specialized Hospital for Gastrointestinal and Liver Disease and Surgery.

Data collection tool

A questionnaire was constructed by researcher to measure the variables of interest. The final study instrument consisting of two parts: the first part is the demographic data, the second part regarding self-care using the universal self-care scale.

Statistical methods

The data analysis process entailed using Statistical Package for Social Sciences computer software. Statistical analysis was performed using Statistical Package for Social Sciences version 21.0 for Windows. Descriptive statistics were used to present the demographic data and patterns of answers to the different questionnaire items; categorical variables were presented as frequency and percentage, whereas numerical ones were presented as mean \pm standard deviation (S.D). Chi-Square test (X²) to test independency distribution of observed frequencies, and for measuring the association between the studies variables according to its type.

RESULTS AND DISCUSSION

Table (1) Characteristics and socio-demographic data of the study participants

Demographic Data	Rating and Interval	Freq.	%
Age	<= 36	32	66.7
	37 - 47	10	20.8
	48 - 58	4	8.3
	59+	2	4.2
Gender	Male	23	47.9
	Female	25	52.1
Educational level	Illiterate	7	14.6

	Able to Read and Write	9	18.8
	Primary School Graduate	4	8.3
	Intermediate School Graduate	6	12.5
	Preparatory School Graduate	9	18.8
	Institute Graduate	5	10.4
	College Graduate	8	16.7
	Sufficient	7	14.6
Socio-economic status	Sufficient to some extent	37	77.1
	Insufficient	4	8.3
Residence	Rural	15	31.3
Residence	Urban	33	68.8
	Single	17	35.4
Marital status	Married	28	58.3
	Widowed	3	6.3
	Retired	9	18.8
Occupation	Housewife	14	29.2
Occupation	Employee	7	14.6
	Jobless	18	37.5
Diagnosis	Ulcerative colitis	28	58.3
Diagnosis	Crohn's disease	20	41.7
	1 - 5	31	64.6
Disease duration since diagnosis	6 - 10	14	29.2
	11 - 15	3	6.3

Table (1) shows that the most of participant age groups are less than (36 years old). considered as the highest percentage (66.7%) among the study sample. Regarding gender of the study sample, the study indicates that (52%) are females, also this table present that the majority of the participant (18.8%) able to read and write and (18.8%) preparatory school. The results illustrated that (77.1%) of study sample had sufficient to some extent monthly income, (68.8%) are living in urban residential area. The majority of the study participants (58.3%) are married. Concerning occupational status, about (37.5%) jobless of the study participant. Regarding study participant was (58.3%) had suffered from ulcerative colitis, and the (64.6%) of the study participant had from (1-5 years') duration of disease.

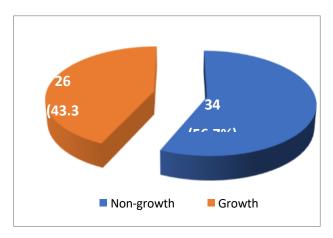


Table (2) Assessment of Self- care among patients with ulcerative colitis disease

n	Items	Ms.	Asses.
1	Do not eat late at night	2.94	Moderate
2	Keep salt intake low	2.98	Moderate
3	Do not full my stomach even I am hungry	3.04	Good

			1
4	Keep sugar intake low	2.85	Moderate
5	Always drink water after the bath or after exercise	2.81	Moderate
6	Consume less-sweet foods	2.48	Moderate
7	Eat home-prepared meals	3.54	Good
8	Drink water daily	3.67	Good
9	Keep fat intake low	3.1	Good
10	Do not snack between meals	2.75	Moderate
11	Avoid artificial ingredients (preservatives, chemical flavorings agents)	2.75	Moderate
12	Take care to eat a balanced diet	2.69	Moderate
13	Walk often	3.04	Good
14	Use stairs rather than the elevator to climb one or two floors	3.02	Good
15	Exercise daily (walking, running)	2.81	Moderate
16	Use coping strategies to avoid getting angry	3	Good
17	Laugh away annoyances and insults	2.6	Moderate
18	Avoid arguing and stressful confrontations	2.92	Moderate
19	Express your opinions without offending other people	2.96	Moderate
20	Make time religious activities	3	Good
21	Read books – watch TV	2.79	Moderate
22	Reduce or stop smoking	2.77	Moderate

Table (2) This table reveal that the patient's participant responses to the universal self-care assessment is moderate, while the assessment was (good) for the items numbered (3,7,8,9,13,14,20). The total universal self-care assessment is (moderate).

Table (3) ANOVA table for the relationships between the level of self-care among patients with ulcerative colitis disease and their demographic characteristics

Demographic Data	Rating and Interval	Ms.	SD.	F	P-value
Age	<= 25	2.87	0.31		
	26 - 36	2.87	0.25		
	37 - 47	3.09	0.37	1.18	0.33
	48 - 58	3.07	0.22		
	59+	2.91	0.32		
Gender	Male	3.05	0.33	7.22	0.01*
Gender	Female	2.83	0.25	1.22	0.01
	Illiterate	2.82	0.32		
	Able to Read and Write	2.97	0.26		
	Primary School Graduate	2.98	0.20		
Educational level	Intermediate School Graduate	2.86	0.34	0.45	0.84
	Preparatory School Graduate	2.98	0.46		
	Institute Graduate	2.83	0.23		
	College Graduate	3.02	0.24		
Socio-economic status	Sufficient	3.13	0.26		
	Sufficient to some extent	2.92	0.30	2.77	0.07
	Insufficient	2.70	0.35		
Residence	Rural	3.01	0.38	1.47	0.23
	Urban	2.90	0.27	1.4/	0.23

Marital status	Single	2.86	0.34		
	Married	2.98	0.29	0.85	0.43
	Widowed	2.94	0.21		
Occupation	Retired	2.98	0.24		
	Housewife	2.84	0.28	2.05	0.01*
	Employee	3.25	0.28	3.95	0.01
	Jobless	2.86	0.30		
Diagnosis	1	2.91	0.30	0.45	0.51
	2	2.97	0.32	0.45	0.51
Disease duration since diagnosis	1 - 5	2.97	0.33		
	6 - 10	2.86	0.25	0.66	0.52
	11 - 15	2.86	0.34		

This table shows that there is a significant relationship between the level of self-care among patients with ulcerative colitis disease and occupation from their demographic characteristics at p-value less than 0.05

The present study reveals the most of participant age groups are less than (36 years old). This result is supported by (Knowles et al., 2018) this study is systemic reviews from 37 study shows that mean of age (36-39 years old. Regarding gender of the study sample, the study indicates that barely equals are females to male. This result is supported by (Iglesias-Rey et al., 2014), also this table present that the majority of the participant equal between able to read and write and preparatory school. This result is supported by (Moradkhani et al., 2013). The results illustrated that most of study sample had sufficient to some extent monthly income. This result is agree with (Kitahata et al., 2022) and disagree with (Agrawal et al., 2019) this study shows low household income. Regarding living of the study participant, the most of them lived in urban residential area. This result is agree with (Luo et al., 2021) (Cohen et al., 2014). The majority of the study participants are married. This result is supported by (Matos et al., 2021) (Lovén Wickman et al., 2016). Concerning occupational status, about most of responses is jobless. This result is supported by (Hanlin et al., 2020). Regarding study participant was most of them suffered from ulcerative colitis. This result is supported by (Xu et al., 2022) (Lovén Wickman et al., 2016). Concerning of the study participant most of them had from (1-5 years') duration of disease. This result is supported by (Barello et al., 2021).

Regarding assessment of patients' universal self-care, the study results reveal that the patients' responses to self-care domain items are moderate at the eighteen items and high at the items: (I can find help when I am feeling stressed; I can discuss my questions and worries about the inflammatory bowel disease with my family and/or friends; and I can ask family or friends for help when I am feeling helpless or frustrated). This result is supported by (Lovén Wickman et al., 2019).

Concerning for the relationships between the level of self-care among patients with ulcerative colitis disease and their demographic characteristics, the results show that there is a significant relationship between the level of self-care among patients with ulcerative colitis disease and occupation and gender from their demographic characteristics. Highly significant correlations between the occupational distribution of Crohn's disease and ulcerative colitis were found among both male and female employees. It seems that occupations involving work in the open air and physical exercise are protective, while being exposed to air-conditioned artificial working conditions or extended and irregular shift working confer a risk of contracting ulcerative colitis disease. The reasons for the abovementioned gender-specific differences in ulcerative colitis epidemiology remain unclear; genetic predisposition and different exposition to environmental factors are possible explanations.

CONCLUSION

The study concludes that the level of universal self-care for patients who suffer from ulcerative colitis disease is less than the ideal, in addition, patients' gender and occupation affect their self-care abilities.

RECOMMENDATIONS

The researchers recommend that further research should be carried out to improve and explore effective methods to improve the self-care abilities of life for patients with ulcerative colitis disease. In addition, health education programs should be applied to increase the patients' knowledge regarding improving the level of their universal self-care. A booklet containing an explanation and instructions about ulcerative colitis disease and how it affects self-care abilities should be distributed to patients. Besides, since the nurses still with the patients 24 hours daily, the health management should be activated and to increase nurse's roles in health education process that improve the patients' knowledge.

STUDY LIMITATIONS

The chosen participants may not have been an adequate sample size to be generalized to the larger population. Also, some patients were less cooperative than others, or uncooperative at all.

ETHICAL CONSIDERATIONS

The researcher obtains an approval from the nursing specialists department in the faculty of nursing /University of Kufa. also, an official permission is attained from the Specialized Hospital for Gastrointestinal and Liver Disease and Surgery, in order to interviewing each subject. And finally, subject agreement also obtained from the patient himself after the researcher explain the purpose of the study to them; seeks informed consent; and offer a respect to participants' confidentiality as well as making the participation voluntary, to answer the questionnaire.

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CONFLICT OF INTEREST

The researchers declare no conflict of interest to declare for publication

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