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Assessment of senior persons knowledge about constipation control in Dar al-shaffa and Basmat Al-Rahma in al-Kut City

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Abstract--Background: Constipation is a clinical diagnosis determined on the basis of insufficient stool evacuation, difficulty passing stool, or a combination of the two symptoms. Additionally, firm stools, stomach bloating, pain, and distention may occur. It is one of the most often encountered gastrointestinal disorders in Western nations' therapeutic practice. Objectives: Assess the senior persons' knowledge about constipation control in Dar al-shaffa and Basmat Al-Rhma in al-Kut city. Methods: The study carried out at two nursing home centres in Al-Kut City, a quantitative, quasi-experimental study design was carried out (Dar Al-Shafaa governmental home and Basmat Al-Rahma privet nursing home). The current research will run from December 24, 2020, through January 15, 2022. To meet the study's goals, a non-probability (purposive) sample of (57) senior citizens (27) for the case group and (30) nursing home residents for the control group was chosen. The instrument is divided into three sections: socio-demographic characteristics, a test of senior citizens' knowledge of multiple-choice questions, and a test of senior citizens' constipation indicators (severe, mild, and never). The instrument's content validity has been determined by a team of specialists. Cronbaghs' Coefficient alpha equation = 0.70 was used to establish the instrument scale's dependability. Data was gathered through a structured interview using a questionnaire format, and it was analyzed using descriptive and inferential statistical methods. Results: After assessing of senior persons knowledge about constipation management at nursing homes, results were reported low level of senior persons about constipation control and management at both nursing home. Recommendation: It has been emphasized in the

literature that patients must spend more time seeking health-related education in order to improve their health care outcomes. The teaching must be enthusiastic, motivated, and responsive to the individual patient's needs. For individual members of the society to realize the benefits of health education, there is a need for a robust, hearty engagement between patients and health care providers

Keywords---assessment, constipation control, senior persons, knowledge.

Introduction

Constipation is a common and major health concern among the elderly. More than one-seventh of the adult population in the globe suffers from constipation. It forms one percent of the annual referral of patients to physicians, resulting in the imposition of large expenses on the health system. The incidence of constipation in elderly women is 2 to 3 times that of elderly males, the prevalence of this illness in the senior person at the age of 60 years and beyond is 33.5% and Chronic constipation hits 17–40 % of them (Abd El-Fatah, et. al,2021, Mansouri et al., 2018 and Farahata et al., 2019). Chronic constipation is frequent in persons over the age of 60, and symptoms can occur in up to 50% of nursing home residents, according to the Centres for Disease Control and Prevention (Gallagher, et.al 2018).

Constipation is a functional disorder of the gastrointestinal tract that can express itself in the form of irregular stools as well as the difficult and painful passage of hard, solid stools through the digestive tract. Severe constipation can result in obstruction of the digestive tract, which may demand the use of a medical procedure to resolve (Forootan, et. al,2018). Chronic functional constipation is a type of intestinal ailment that affects children, adults, and the elderly. It can occur in any age group. This disease not only has a significant impact on physiological function, but it also causes varied degrees of psychological barriers to be present (Werth, & Christopher, 2021).

Symptoms of constipation include increased time for stool to pass through the colon, infrequent defecation, bloating, and abdominal discomfort. Constipation can be caused by aberrant innervations of the gut or visceral myopathy. Disorders of defecation can occur in individuals of any age, however, they are more common in the elderly patient population. A decrease in smooth muscular contraction in the rectum, as well as an inability to relax the muscles of defecation, might make it difficult to defecate properly. With age, it is possible that the response to stretching of rectal receptors is weakened, resulting in a reduction of the need to defecate despite the accumulation of huge amounts of stool in the body (Takaoka 2020). Constipation is subjective and is seen differently by different persons. Prevalence is frequently higher if the symptom is self-reported by persons than if precise diagnostic criteria, such as the Roman (III) Consensus Criteria, (Otani,et.al,2021).

Method

A quasi-experimental study design was used with the application of a two-group pre-post-test approach for the study group to assess the effectiveness of the nutritional program on senior people's knowledge regarding constipation management at a nursing home in Al-Kut city (Dar Al-Shafaa) and a private nursing home (Basmat Al-Rahmma) from December 4, 2020 to April, 19, 2022. The total number of senior persons who live in nursing homes (Dar Al-Shafaa and Basmat Al-Rahmma) was purposive selected and divided into two groups; twenty seven senior person as study group were exposed to the nutritional program and thirty senior person were not exposed to the program, considered the control group. The two groups had approximately the same demographic characteristics.

The assessment criteria is designed based on the patient's knowledge assessment need, information gained from the review of literature, scientific lecturer and previous study. The content of the program is evaluated by (13) experts in a different field; Revision is made on the contents of the program form based on these experts' recommendations and suggestions. The study instrument was constructed depending on literature reviews and previous studies related to constipation management and its complication and control, It is a questionnaire format for the research purpose and is composed of three parts. The first part delves into the social and demographic aspects of patients consisting of (11) items, which include (Age, gender, marital status, educational level, constipation duration, and constipation severity), while the second part related to senior persons knowledge about constipation. The knowledge test comprised (40) items, multiple-choice questions, and (10) items to determine the severity of constipation symptoms. The test addressed significant points from the major content area of the nutritional program. The questionnaire sheet is connected to senior individuals' knowledge For the aim of this study, the number of correct replies to the knowledge questionnaire was employed as the measurement of the level of knowledge. Each question comprised of (4) alternatives for multiple choice. The questions were scored as correct question (2) points and incorrect question (1) points. Reliability of the questionnaire was used to determine the accuracy of the questionnaire since the results showed a very high level of stability and internal consistency of principle parts concerning item's responses' of the questionnaire. After applying for the proposed program, all those were calculated by using the major statistical parameter: Alpha Cronbach through calculated the result that the questionnaire is successful, meaningful, as well as a designed questionnaire for the evaluating senior persons knowledge about constipation control and management in Dar al-shaffa and Basmat Al-Rahma in al-Kut City.

Statistical analysis

Statistics tables including. Observed Frequencies, Presents, Mean of score (MS), Standard Deviation (SD), Pooled Standard Deviation (PSD), Relative Sufficiency (RS%), and Percentile (Grand/or Global) Relative Sufficiency (PGRS%), as well as scoring scales of two categories, such that (True, and False), with integer numbers (1, and 0). Assessments intervals Scored by: [L: Low (0.00 – 33.33)]; [M: Moderate (33.34 – 66.66)]; [H: High (66.67 – 100)].

Results

Table 1, shows a summary of statistics of (Overall Assessment of the Senior Persons' Knowledge about Constipation at the Pre-test) related to the formed questionnaire's MCQ along studied (Pre-test). Results of testing comparisons significant with reference to studied items, as well as scoring scales assessments Findings illustrated at the pre-test period of measurement that the poor knowledge towards constipation have reported the highest percentage (n=25; 92.6%) as compared to those who have expressed a good level of knowledge (n=2; 7.4%) among senior persons ($M \pm SD=47.25 \pm 8.203$).

Table 1. Overall Assessment of the Senior Persons' Knowledge about Constipation at the Pre-test

Weight	Freq.	%	$M \pm SD$
Poor Knowledge	25	92.6	
Good Knowledge	2	7.4	47.25 ± 8.203
<i>Total</i>	27	100.0	

"M: Mean of total Scores, SD: Standard Deviation for total scores (Poor=40-60; Good=61-80"

Findings illustrated at the pre-test period of measurement that the poor knowledge towards constipation have reported the highest percentage (n=25; 92.6%) as compared to those who have expressed a good level of knowledge (n=2; 7.4%) among senior persons ($M \pm SD=47.25 \pm 8.203$).

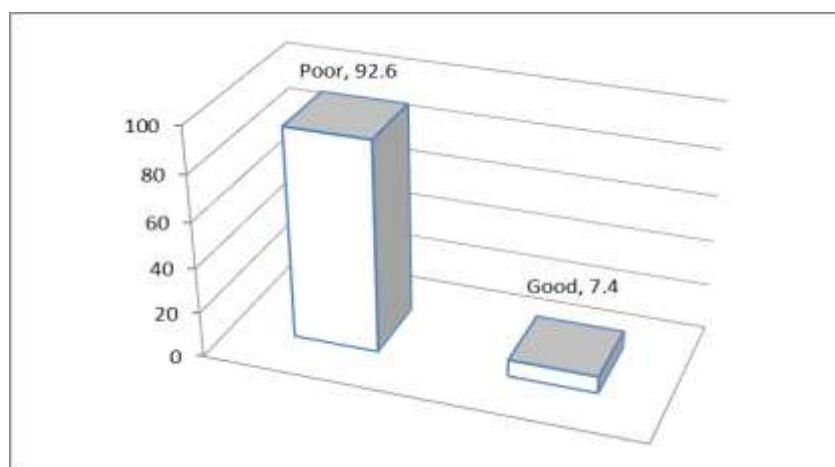


Figure 1. Pre-test for Study Group's Knowledge about Constipation

Figure 1. Pre-test for Study Group's Knowledge about Constipation show low level of senior person about constipation control and management .

Table 2, shows a summary statistics of (Mean of Scores on Items of Senior Persons' Knowledge about Constipation at Pre-test for the Study Group)

Knowledge Items		Pre-test	
		M ± SD	Ass.
1	With ageing the amount of calories or energy decrease because?	1.22±0.42 3	Low
2	Healthy food for Senior persons contributes to physical health and also greatly affects?	1.14±0.36 2	Low
3	With ageing, there are many physiological changes may happen like?	1.29±0.46 5	Low
4	Senior persons need fewer calories to maintain their weight because they move less, if they continue to eat the same amount of calories they are going to?	1.14±0.36 2	Low
5	Healthy nutrition is the best way for senior persons to prevent?	1.07±0.26 6	Low
6	The most common digestive problems in senior persons?	1.07±0.26 6	Low
7	Nutrition for the senior persons is important because?	1.18±0.39 5	Low
8	Essential nutrient can be defined as?	1.14±0.36 2	Low
9	Dietary fiber can be defined as?	1.03±0.19 2	Low
10	The main reason senior persons need protein is to maintain muscle strength and mass , so protein is vital with ageing . Its decrease can lead to?	1.07±0.26 6	Low
11	Dietary fiber important for senior persons because?	1.03±0.19 2	Low
12	From the sources of carbohydrates?	1.18±0.39 5	Low
13	Vitamin B12 deficiency affects people over the age of 60 due to?	1.14±0.36 2	Low
14	Signs of vitamin B12 deficiency in older people are?	1.22±0.42 3	Low
15	Osteoporosis can happen due to decrease of?	1.25±0.44 6	Low
16	What metal is responsible for maintaining strong muscles and normal blood pressure levels?	1.25±0.44 6	Low
17	Fatty acids are essential fats, healthy and necessary for health it is available in?	1.25±0.44 6	Low
18	Low levels of omega-3 can lead to?	1.11±0.32 0	Low
19	The digestive system is responsible for?	1.22±0.42 3	Low
20	Saliva function is destroying some types of?	1.14±0.36 2	Low
21	Stomach contain cannot return to the esophagus because?	1.37±0.49	Low

		2	
22	Stomach functions are?	1.07±0.26 6	Low
23	Small intestine can absorb nutrient because of ?	1.07±0.26 6	Low
24	Large intestine function is?	1.29±0.46 5	Low
25	It is accessory organ to complete digestion process except?	1.11±0.32 0	Low
26	Food move through the intestines in waves shape called?	1.22±0.42 3	Low
27	The gastro-colic reflex increases in?	1.14±0.36 2	Low
28	Constipation affects people in?	1.37±0.49 2	Mod.
M	Constipation is a common digestive problem can causes disorders in?	1.33±0.48 0	Mod.
30	Constipation can be define as?	1.25±0.44 6	Low
31	Constipation can happen due to?	1.07±0.26 6	Low
32	Chronic constipation, common in the elderly and always synchronized with?	1.29±0.46 5	Low
33	Constipation may be due to decrease secretion of?	1.18±0.39 5	Low
34	Chronic constipation can lead to?	1.22±0.42 3	Low
35	Constipation warning signs are?	1.18±0.39 5	Low
36	Constipation complications like?	1.14±0.36 2	Low
37	Dietary fiber can help in control?	1.14±0.36 2	Low
38	Some types of food rich in dietary fiber like?	1.14±0.36 2	Low
39	Increase use of abdominal softener can lead to?	1.14±0.36 2	Low
40	Constipation is?	1.18±0.39 5	Low

(*) Sig. [L: Low (0.00 – 1.30)]; [M: Moderate (1.31 – 1.37)]; [H: High (1.38 – 100)]. Testing are based on McNemar Test.

Analysis of such knowledge shows that the large number of senior persons, has expressed poor level of knowledge about constipation control and constipation management at nursing homes . Such poor level of knowledge is evidenced in all the low mean of scores on items of senior persons' knowledge about constipation as show in table .2).

Discussion

Table 1, shows descriptive Statistics of the senior persons knowledge about constipation control that the large number of senior persons, in study group, has expressed poor level of knowledge about constipation control. These findings can be interpreted in a way that these senior persons are not aware about the problem of constipation and they have experienced lack in their capacity of knowledge about constipation prior to their being exposed to the nutritional program. So, the study confirms that they need to have access to some means of nutrition's to increase their awareness relative to such a problem. Supportive evidence to such finding is reported in the work of Emmanuel and his colleagues (2017) who conclude that awareness of constipation, its complications and treatment options need to be increased among older patients. It has been emphasized in the literature that patients must spend more time seeking health-related nutrition in order to improve their health care outcomes. Lack of knowledge about health problems has resulted in inappropriate use of patients' adherence towards treatment and self-care management of health related problems.

Conclusions

After assessing senior persons knowledge about constipation control were reported low level of senior persons toward constipation knowledge and constipation control to prevent complications.

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