

Knowledge Regarding Early Warning Signs of Alzheimer's Disease Among Adults.

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Abstract: Alzheimer's disease is an irreversible, progressive brain disease that slowly destroys memory and thinking skills, and eventually even the ability to carry out the simplest tasks. As disease advances, symptoms can include problems with language, disorientation, mood swings, loss of motivation, difficulty to manage self-care and decreased social interaction. Alzheimer's disease will cause a slow decline in memory, thinking and reasoning skills. Gradually, bodily functions are lost, ultimately leading to death. Symptoms of Alzheimer's will appear usually after the age of 60. The normal aging process occurs in every individual's lifespan. Each and every individual is involved in this process and none of one can escape from it. When the individual reaches to old age they will be so vulnerable to the changes which are happening to them. Alzheimer is the most common form of dementia, a general term for memory loss and other intellectual abilities which are serious enough to interfere with daily life. Alzheimer's disease and the number are expected to rise as the population ages¹.

Result: Majority of the respondents (55%) had average knowledge whereas (45%) had poor knowledge and none having good knowledge regarding Alzheimer's disease.

Keywords: Knowledge, Warning signs, Alzheimer's disease, adult.

I. Introduction

The normal aging process occurs in every individual's lifespan. Each and every individual is involved in this process and none of one can escape from it. When the individual reaches to old age they will be so vulnerable to the changes which are happening to them. Old age people are more prone to the physical and psychological problem. Alzheimer's disease is the one of the most common disease conditions which makes the old age people become so vulnerable. Alzheimer is the most common form of dementia, a general term for memory loss and other intellectual abilities serious enough to interfere with daily life.¹ Alzheimer's disease (AD) is an irreversible, progressive brain disease.¹ Warning signs of Alzheimer's include problems with language, disorientation, mood swings, loss of motivation, not managing self-care, and society. Gradually, bodily functions are lost, ultimately leading to death. In most of the people with Alzheimer's disease symptoms first appear after age 60. The estimation may vary, but experts suggest that as many as 5.1 million Americans may have Alzheimer's disease and the number is expected to rise as the population ages.² Currently, about 18 million people are affected by Alzheimer's disease worldwide. This figure is projected to more or less double by 2025 to 34 million. Developing countries will be more affected by this illness, Currently, more than 50% of people with Alzheimer's disease live in developing countries and by 2025, this will be more than 70%. However, At present developing countries are undergoing a demographic transition so that more and more people are surviving to an old age³.

II. Material and Methods

Descriptive research design study was opted for the study. The study was conducted in selected community area at Mangaluru, and 100 samples were recruited by using Non-probability purposive sampling technique. A tool used for the study was demographic Performa and questionnaire on knowledge regarding early warning signs of Alzheimer's disease. The reliability of the tool was tested by Cronbach's' alpha method. A pilot study was conducted prior to the main study. Prior to the data collection; permission was obtained from the concerned authority. The participants were explained about the study and consent was obtained. The Participants were assured about the confidentiality of their responses. Data was analyzed by using descriptive and inferential statistics.

III. Results

3.1 Demographic proforma

Majority (29%) of peoples belongs to the age group 50-59 years and (52%) are males and (48%) female gender,(40%) of community people have graduation in education, (44%) of people were under other occupation, (34%) community people having previous information on Alzheimer's disease and (73%) of community people not having history of Alzheimer's disease in their family.

TABLE 1: Frequency and distribution of samples

Sl No	Demographic variables	Frequency	Percentage%
1	Age in years		
	40-49 years	25	25%
	50-59 years	29	29%
	60-69 years	28	28%
2	Gender		
	Male	52	52%
	Female	48	48%
3	Education		
	Non formal	10	10%
	Primary	20	20%
	Secondary	30	30%
4	Occupation		
	Daily wages	36	36%
	Private employee	10	10%
	Government	10	10%
5	History of Alzheimer's disease		
	Yes	27	27%
	No	73	73%
6	Previous information about Alzheimer's disease		
	Yes	33	33%
	No	66	66%

3.2. Percentage of knowledge level on early warning signs of Alzheimer's disease

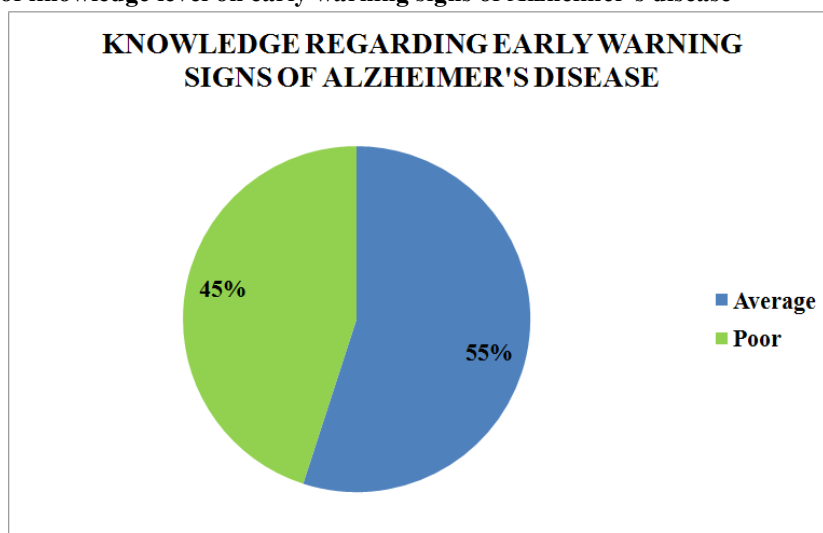


Fig 1: The percentage distribution of knowledge scores regarding early warning signs of Alzheimer's disease among adults.

3.3. Association with demographic variable

TABLE 2: Association between selected demographic variable and knowledge scores

Sl No	Demographic variables	Frequency	P value	Chi-square (χ^2)
1	Age in years		0.090	44.304
	40-49 years	25		
	50-59 years	29		
	60-69 years	28		
	70-79 years	18		

2	Gender Male Female	52 48	0.505	10.286
3	Education Non formal Primary Secondary Graduation	10 20 30 40	0.805	25.924
4	Occupation Daily wages Private employee Government Others	36 10 10 44	0.321-	36.211
5	History of Alzheimer's disease Yes No	27 73	0.184	14.962
6	Previous information Yes No	33 66	0.148	15.830

The table shows that there is no significant association between knowledge scores and the demographic variables such as age (1) $X^2=0.090$, gender (2) $X^2=0.505$, education(3) $X^2=0.805$, occupation (4) $X^2=0.321$, history of Alzheimer's disease (5) $X^2=0.184$, previous information (6) $X^2=0.148$ as the calculated value was lesser than the table value at 0.05 level of significance, Hence the null hypothesis was accepted and the research hypothesis was rejected that the knowledge scores is independent of the demographic variables among the community people.

IV. Conclusion

The findings of the study revealed that majority of the respondents (55%) average knowledge whereas (45%) of samples had poor knowledge and none having excellent knowledge regarding Alzheimer's disease. The findings of the study have implication in the field of nursing education, nursing practice, nursing administration and nursing research. It is the responsibility of the nurse to provide health education to the people and conducting training programs for the community people on Alzheimer's disease and early warning signs of Alzheimer's disease. The nurse administrator should take an initiative to make policies or plans in providing facilities to improving the knowledge of community peoples. There is a wide scope of conducting a research study in depth using other tools to assess the knowledge of community people regarding early warning signs of Alzheimer's disease hence; the nurse researcher should conduct the various teaching programs which help the community people to improve the knowledge. The study is limited to the community people in selected areas at Mangalore. Findings of the study could not be the generalized view of small size sample and limited area of setting.

Reference

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