



A comparative study to assess the health status among smokers and nonsmokers at selected community area, at Karaikal

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Abstract

Statement: A comparative study to assess the health status among smokers and non-smokers at selected community area, at karaikal.

Objectives

- To assess the health status among smokers
- To assess the health status among non-smokers
- To compare the health status among smokers and non-smokers

Research Design and Method: Quantitative approach with non-experimental descriptive design was used to comparative study to assess the health status among smokers and non-smokers at selected community are, karaikal.

Results: The study result shows that among 30 men, 15(100%) men smokers and 15(100%) men non-smokers. The result of the study revealed that difference between the smokers and non-smokers among 15 (100%) of non-smokers all had moderate health status and among 15 smokers 1(6.7%) of the smokers had moderate health status, 14(93.3%) smokers had poor health status.

Conclusion: The comparison of health status among smokers and non-smokers using questionnaires method in selected community area karaikal. This study results shows that smokers health status was poor compare to the non-smokers.

Keywords: health, smokers, moderate, comparative

Introduction

According to WHO's smoking and tobacco use policy, a smoker is who smokes any tobacco products, either daily or occasionally. Tobacco use is the preventable causes of death in the world, killing early 5 million people annually. WHO has approximated that tobacco use is currently responsible for the death of about six million people across the world each year with many of these deaths occurring prematurely. This total include about 600000 people are also estimated die from the effects of second hand smoke.

"Smoking is injury to health" cigarette smoking is the inhalation of burning tobacco bind pipes, and cigars. Casual smoking is the act of smoking only occasionally, usually is a social situation or to relieve stress. A smoking habit is a physical addicted to tobacco substance. Many health experts now regards habitual smoking as a psychological addiction, too, and one with serious health sequence. – *Medical dictionary*

Smoking mainly of cigarette causes cancer of the lung, peripheral arterial disease, upper respiratory tract, oesophagus, bladder, and pancreas and probably of the stomach, liver and kidney is linked in leukaemia and may also causes cancer of the colon and rectum other organ.

Li and hunters

Cigarette certain about ingredients when the burn, they generate more than 7000 chemical, according to the American lung association. Many of these chemicals are

poisonous and at least 69 of them can causes cancer. May of the same ingredients are found in cigars and tobacco used in pipes and hookahs.

Cigarette causes about 90% of all lung cancer deaths in men and women. More than die from lung cancer for each year than breast cancer. About 80% of all death from chronic obstructive pulmonary disease (COPD) are caused by smoking. Smoking is estimated to increase by 2 to 4 times. For stroke by 2 to 4 times. Of men developing lung cancer by 25 times. Of women developing lung cancer by 25.7 times. Quitting smoking cardiovascular risk just after quitting smoking risk for a heart attacks drops sharply. Ten years after quit smoking risk for lung cancer drops by half. According to who global report on in 2010 there were 3.9 million non-smokers aged 15 years 78% of the 5.1 million population aged above 15 years. Tobacco related death from cancer, heart disease, lung disease and stroke is expected to increase to over 9.8 million annually by a 2030 1.5 million of them in idea. In current smoking partners continues it will leads to above 10 million death each year.

Materials and Methods

The research design for the present study was non experimental descriptive design. Research approach used for their study was quantitative approach. The study setting was keezhakasakudi community area at karaikal. The sampling technique in this study convenient sampling technique. Study conducted for 30 size of the population. 30 health

status questionnaires was to assess the health status.

Table 1: Distribution of level of health status among smokers

Level of health status	Frequency	Percentage (%)
Moderate	1	6.7%
Poor	14	93.3%
Total	15	100%

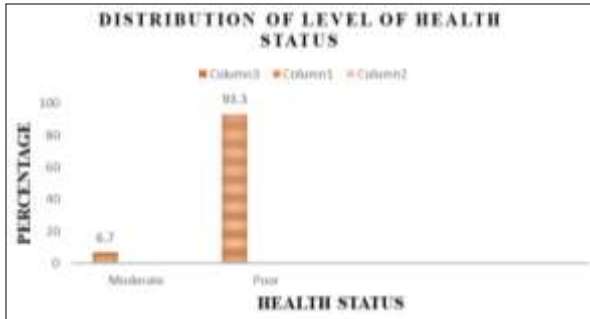


Fig 1

Table 2 shows among 15 smokers 1(6.7%) of the smokers had moderate health status, 14(93.3%) had poor health status.

Table 2: Distribution of level of health status among non-smokers

Level of health status	Frequency	Percentage (%)
Moderate	15	100%
Poor	-	-
Total	15	100%



Fig 2

Table 1 shows that among 15 (100%) of non-smokers had moderate health status.

Table 3: Compare the health status among smokers and non-smokers

	Moderate	Poor
smokers	6.7%	93.3%
non-smokers	100%	-

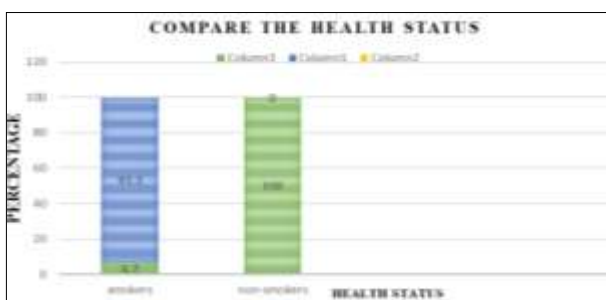


Fig 3

The comparison of health status among smokers and non-smokers results shows that smoker’s health status was poor compare to the non-smokers.

Discussion

Discussion of the Demographic Variables

- Majority of finding of this study shows that among 15 smokers (26.7%) belongs to 25-35years, (20%) belongs 35-45 years, (26.7%) of them belongs 55-65 years.
- Regarding education (46.7%) of them illiterate, (26.7%) of them high school, (26.7%) of them higher education.
- Regarding occupation (46.7%) of them coolie, (26.7%) of them business, (26.7%) of them government employers.
- Regarding food patten (53.3%) were belongs to vegetarian, (46.7%) belongs to non-vegetarian.
- Regarding history of smoking (53.3%) were 2-4 years taking smoking, (46.7%) belongs to 5-7 years.
- Regarding cigarette smoking (33.3%) person take for 8-10 cigarette per day, (66.7%) person take for 1-3 packets.
- Regarding days a week take of cigarette (46.7%) person taking one day or less (53.3%).
- Regarding began to starting of smoking 21-25 years (100%).
- Majority of finding of this study shows that among 15 nonsmokers (20%) belongs to 25-35years, (26.7%) belongs 35-45 years, (26.7%) belongs 45-55 years (26.7%) of them belongs 55-65 years.
- Regarding education (26.7%) of them illiterate, (6.7%) of them high school, (40%) of them higher education.
- Regarding occupation (20%) of them coolie, (73.3%) of them business, (6.7%) of them government employers.
- Regarding food patten (20%) were belongs to vegetarian, (73.3%) belongs to non-vegetarian.

Discussion of the Health Status Among Smokers and Non-Smokers.

According to first objective of this study is to assess the health status among smokers. Regarding 15 smokers 1(6.7%) of the smokers had moderate health status, 14(93.3%) had poor health status. Second objective of this study is to assess the health status among non-smokers. 15 (100%) of non-smokers had moderate health status.

Compare the Health Status Among Smokers and Non-Smokers

The comparison of health status among smokers and non-smokers results shows that smoker’s health status was poor compare to the non-smokers.

Conclusion

This study revealed that identification of health status among smokers and non-smokers. The comparison of health status among smokers and non-smokers using questionnaire method. The research study result shows that smokers health status was poor comparing to the non-smokers health status.

References

1. BT Basavanthappa. Nursing research and statistics, 3rd edition. New Delhi: Jaypee brother’s publication, 2014, 481-484.

2. Black Hawks. Medical Surgical Nursing, 7th edition. New Delhi: Elsevier publication, 2005, 1818-1829.
3. Brunner Suddarth's. Medical Surgical Nursing, 11th edition. New Delhi: Wolters Kluwer publication, 2008, 686-696.
4. Daniel. Biostatistics, Basic concepts and methodology, 9th edition. New Delhi: Wiley publication, 2014, 594-597.
5. Martha RaileAlliGood. Nursing Theories, 8th edition. USA: Elsevier publication, 2014, 340-349.
6. Phipps Monahan. Medical Surgical Nursing, 7th edition. New Delhi: Elsevier publication, 2011, 566.
7. Surrender H Singh. Anatomy and Physiology for Nursing and Allied health science, 1st edition. New Delhi: CBS publication, 2008, 181-223.