

## ATTITUDE TOWARDS HEALTH OF YOUNG WOMEN WITH ARTERIAL HYPERTENSION

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**Purpose:** to reveal the attitude to their health among young women with arterial hypertension on the basis of a review of modern special literature and a questionnaire survey.

**Material and methods:** the research involved 40 women with a diagnosis of arterial hypertension, stage I at the age of 35-42 years, the duration of the disease is less than 3 years. The diagnosis was made by a family doctor, but drug therapy was not taken to correct blood pressure. The women had the following risk factors, namely, a decrease in the level of physical activity, inappropriate nutrition, excess weight, the presence of a large amount of stress in life and smoking. In individual communication, we conducted a survey according to the method of R.A. Berezovskaya "Attitude to health".

**Results:** the evaluation of the results was carried out on the basis of a qualitative analysis of the obtained data of the questionnaire in all areas of life. When asked about the most important values from all spheres of life, only 18 women rated

their health as a factor important for them at a given moment in life. Content analysis of the definition of "Health" showed that 35% of women believe that this is the harmony of physical and mental well-being. 53% of women believe that lifestyle influences their health. Only 60% of the women surveyed by us in their daily life use recreational activities to maintain their health.

**Conclusions:** the interviewed young women with arterial hypertension of the 1st stage do not follow the doctor's recommendations, do not undergo preventive examinations, do not follow a healthy lifestyle, and use recreational measures in small quantities. Modification of risk factors for arterial hypertension, development of educational and health-improving programs, aimed at increasing physical activity, will improve the quality of life of young people with hypertension.

**Keywords:** young women, arterial hypertension, questionnaire "Attitudes towards health".

## **Introduction**

The concept of "attitude to health" is a system of individual, selective connections of the individual with various phenomena of the surrounding reality, promote or, conversely, threaten the health of people, and also determine the individual's assessment of his physical and mental state [3; 8; 9].

The leading problem of modern health care is "diseases of civilization", the first place among which is taken by diseases of the cardiovascular system (CVS). G. L. Apanasenko believes that the development of many somatic diseases is associated with the negative influence of certain social and hygienic factors. So, in people over the age of 35, the risk of developing coronary heart disease with an increased level of blood pressure increases 6 times, with obesity - 3.4 times, with hypodynamia - 4.4 times, with smoking - 6.5 times. Combining several unfavorable social and hygienic factors, the likelihood of developing CVD increases significantly [1; 2; 6; 7].

Among diseases of the circulatory system, diseases associated with increased blood pressure (BP) prevail. Currently, hypertension is the most common disease not

only in Ukraine, but throughout the world. According to population studies for 2000, the prevalence of arterial hypertension (AH) in the world was 25%, and according to WHO forecasts by 2025 it will be almost 60%. AH is considered one of the main risk factors for vascular death in both men and women. According to the WHO, in previous decades, the most serious epidemiological situation was more pronounced among men, which led to an underestimation of the importance of early signs of hypertension in young women [5; 6; 10; 13].

At the urging of the European Society for Hypertension / European Society of Cardiology (ESC / ESH), strategies for lowering blood pressure (BP) have been formed: drug treatment and lifestyle modification. However, the question of intervention in the lifestyle of persons with hypertension is discussed superficially, while drug therapy for hypertension is based on very deep evidence, supported by the largest number of results of randomized controlled trials in clinical medicine [4; 14]. At the urging of the European Society for Hypertension / European Society of Cardiology (ESC / ESH), strategies for lowering blood pressure (BP) have been formed: drug treatment and lifestyle modification. However, the question of intervention in the lifestyle of persons with hypertension is discussed superficially, while drug therapy for hypertension is based on very deep evidence, supported by the largest number of results of randomized controlled trials in clinical medicine.

**Purpose and objectives of the study:** on the basis of a survey of modern special literature and a survey conducted to identify the attitude to their health in young women with arterial hypertension.

### **Material and methods of the research**

The study was promising, carried out in the scientific problem laboratory of the KSAPC. The study involved 40 women aged 35-42 years with AH grade I, disease duration less than 3 years. The diagnosis was made by a family doctor at primary health care centers, however, drug therapy was not used to correct blood pressure. The women had the following risk factors, namely: decreased physical activity, poor diet, excess weight, the presence of a large amount of stress in life, smoking. The study was carried out in accordance with international bioethics standards and

recommendations of the Bioethics Committee of the Ministry of Health of Ukraine. With all the women, individual communication was tested according to the questionnaire of R.A. Berezovskaya "Attitude to health" [3], which consists of 10 questions and instructions. There is only one answer for each statement. It is recommended not to spend a lot of time thinking about the answers.

### **Results of the research**

Formation of attitudes towards health is a rather complex, contradictory and dynamic process, which is due to two groups of factors:

- external (characteristics of the environment, including the features of the social micro- and macroenvironment, as well as the professional environment in which a person is located);
- internal (individual psychological and personal characteristics of a person, as well as his state of health) [3; 8].

The analysis of the results was carried out on the basis of the analysis of the data obtained using the questionnaire, which was carried out at several levels: each statement was analyzed separately; data analysis was carried out for each question (all statements included in the given question were interpreted) each block of questions or scale was considered separately (all questions and statements included in this scale were analyzed).

*Answers to question 1 (People assess different areas of life differently. Rate how important these values are for you at the moment):* 47% of women who participated in the testing assessed their health as a factor important for them at the moment in their lives; 23% rated a happy family life as an area that is important for them at the moment. Only 26% of women gave their preference to the factor of independence; 4% of the respondents assessed the presence of true friends in their lives. Material well-being is considered an important factor by 66% of women.

*Answers to question 2 (What do you think is necessary in order to achieve success in life?):* 78% of women believe that perseverance and hard work; 57% preferred health, 34% - ability, 27% - luck (good luck), 41% - support from friends,

acquaintances, however, 70% of women believe that in order to succeed in life, you need to have a good education and material wealth.

*On question 3 (How would you define in a few words (or one phrase) what health is?)* it was necessary to provide your answer (Table 1).

*Table 1*

**Content analysis of the definition of "Health"**

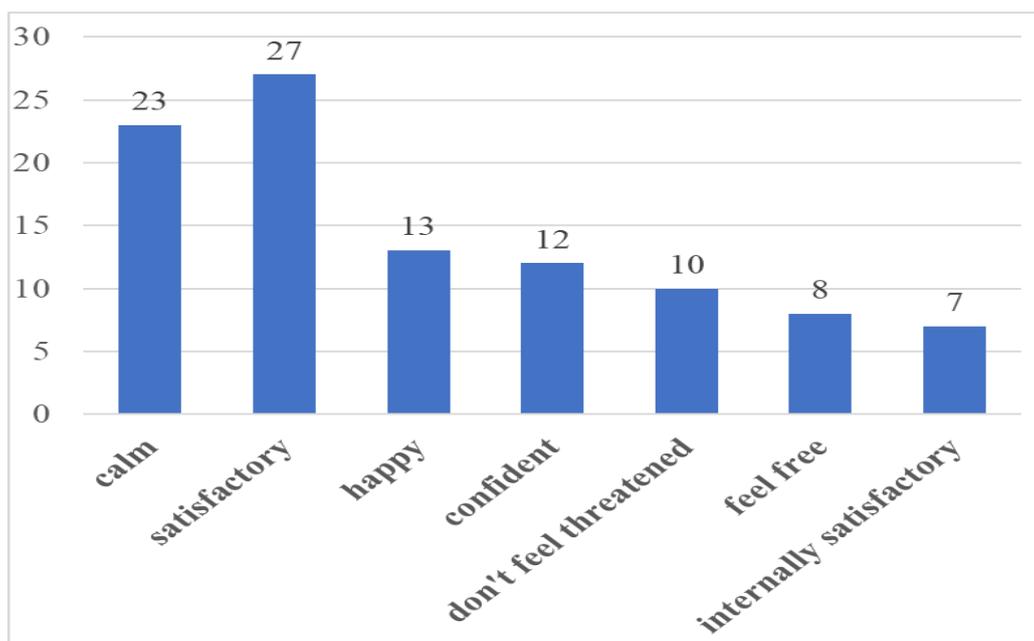
<b>Question</b>	<b>Possible answers</b>	<b>Answers, %</b>
How would you in a few words, or in one phrase, define what health is?	Harmony of physical and mental well-being	35
	Absence of painful conditions	25
	Healthy lifestyle	15
	Sport	5
	The basis (basis) of all human activity	10
	This is life (full and active), a taste for life	5
	Wellness (Well-being, calmness, confidence)	5

*Question 4* asked to evaluate information about sources that influence a person's awareness of health issues. 43% of women consider the information received from doctors to be very important; 27% of respondents preferred information obtained from Internet resources; 30% of women rely on the experience of relatives, relatives and friends.

Unfortunately, none of the respondents assessed the influence of the media on knowledge in the field of health by, which indicates insufficient coverage of health issues and a healthy lifestyle in the media.

*Answer to question 5 (What factors have the most significant effect on your health?):* 53% of women believe that it is the lifestyle (33% - dietary habits, 20% - bad habits) that affects health; 30% of respondents gave preference to the quality of medical care; 17% - noted the environmental situation as a factor that most significantly affects the state of health.

*Question 6* suggested giving an answer to the question: *How do you feel most often when everything is in order with your health?* (Fig. 1).



**Figure. 1.** Answers to questions: How do you feel most often when everything is in order with your health?

*On the 7th question* about how you feel most often when you find out about the deterioration of your health, 18% of women answered that they were alarmed and very nervous, the rest found it difficult to choose an answer.

**Question 8:** Are you doing anything to support your health? The answers to this question are presented in Table 2.

Table 2

**Activities that women use to maintain their health**

Answer	Respondents, %
Exercise (gymnastics, running, etc.)	4/10%
Practicing diet	5/12,5%
Practicing work and rest	-
Hardening	-
Preventive visit to a doctor	1/2,5%
I keep track of my weight	5/12,5%
I go to the bathhouse or sauna	-
Avoid bad habits	2/5%
I visit sports sections	5/12,5%
I practice special health systems (yoga, Chinese gymnastics and others)	2/5%

Based on the data in the table, we can conclude that only 60% of the women surveyed by us in their daily life carry out activities to maintain their health.

*Answer to question 9: If you take care of your health insufficiently or irregularly, then why?* Only 8% of women answered that they lack willpower. The rest of the women explained this answer by the insufficient amount of free time or the lack of understanding of taking care of their own health as a necessary degree.

*On the 10th question about indisposition,* we showed who the respondents turn to if necessary. Thus, 7% of women visit a doctor; 8% of respondents try not to pay attention; 20% of women find solutions on their own based on past experience. The rest of the respondents gave the answer "other", but without indicating their actions.

Thus, summing up the results of the survey according to the questionnaire of R.A. Berezovskaya "Attitude to health" we can talk about the irresponsible attitude of women aged 35-42 years with AH stage I to their health.

### **Conclusions / Discussion**

According to the results of the study, it can be argued that young women with AH stage I are irresponsible about their health, namely, they do not follow the doctor's recommendations, do not undergo preventive examinations, do not comply with the components that form a healthy lifestyle, a small number use recreational activities, which confirms data of E.V. Burik (2011), L. D. Boreiko, G. G. Mararash (2020) [4; 5],

In women with hypertension, the number of modified risk factors increases with age, which lead to CVD against the background of high blood pressure. To promote the improvement of the quality of life of young people in the early stages of the disease, it is necessary to exercise RF, introduce educational programs, and optimize recreational and motor activity. All of the above confirms the work Ruban, L. (2018), Makarova, I. et el. (2019) [11, 13].

Thus, the modification of risk factors for the occurrence of hypertension, the development of educational and health-improving programs aimed at increasing

physical activity will help improve the quality of life of young people with hypertension.

**Prospects for further research** are associated with the creation of the “Women's Health” school, aimed at improving the quality of life through recreational and motor activity.

**Conflict of interests.** The authors declare that no conflict of interest.

**Financing sources.** This article didn't get the financial support from the state, public or commercial organization.

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Received: 28.09.2020.

Published: 26.10.2020.

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