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RESEARCH ARTICLE

A STUDY TO ASSESS THE KNOWLEDGE, ATTITUDE AND PERCEPTION REGARDING VITILIGO AMONG ADULTS AT SANIYASIKUPPAM, PUDUCHERRY

Ms. Sowmiya R.¹, Mrs. Manimekalai S.² and Dr. Muthamilselvi G.³

1. M.Sc [Nursing]-II Year Sri Manakula Vinayagar Nursing College.
2. Reader in nursing, Sri Manakula Vinayagar Nursing College.
3. Principal, Sri Manakula Vinayagar Nursing College.

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Vitiligo, Knowledge, Attitude,
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Abstract

Background : Vitiligo is an acquired, pigmentary anomaly of the skin characterized by depigmented white patches surrounded by a normal or a hyperpigmented border. Understanding the perspective on vitiligo enables us to focus on their knowledge and train them to disseminate accurate information to the Public. A Positive Attitude. low perception of Vitiligo will reduce the psychological burden on the clients/ patients and deliver better clinical outcomes.

Methods: The study design was an Descriptive study. 30 samples fulfilled inclusion and exclusion criteria in this study.

Results: Data was analysed using inferential statistics. The findings reveals that majority of the adults 23[76.7%] had inadequate level of knowledge, 23[73.3%] had unfavourable attitude, 25[83.3%] had low level of perception.

Conclusion : This study implies that on the content of study investigator have assessed the knowledge, Attitude and Perception among adults. It is concluded that the adults have Inadequate knowledge Poor attitude and Low perception towards Vitiligo.

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Introduction:-

Vitiligo is a de-pigmenting skin condition characterized by a specific melanocyte depletion, resulting in melanin attenuation inside the skin's damaged regions. A distinguishing feature is a completely a melanotic, non-scaly, chalky-white macule with clear borders. The understanding of the etiology of vitiligo has advanced significantly in recent years. It is now categorically recognized as an autoimmune disorder associated with metabolism and oxidative stress, including cellular detaching diseases, as well as hereditary and environmental factors. The consequences of vitiligo can be mentally distressing and frequently have a significant impact on daily life; thus, this should never be dismissed as an esthetic or minor illness. The two main types of the condition recognized by a global consensus in 2011 were non-segmental vitiligo (NSV) and segmental vitiligo (SV). The term "vitiligo" was chosen to refer to all NSV types (including acrofacial, mucosal, generalized, universal, mixed, and rare variants). One of the most important critical decisions made by this consensus was to distinguish SV from other types of vitiligo, especially given the implications for prognosis. Vitiligo is still a common and identifiable condition among dermatologists, most doctors, and several wise members of the general population. The disease's defining feature is hypopigmented patches, which are frequently first noticed on the fingertips, knuckles, and area surrounding the lips, eyes, toes, and reproductive organs. The two most common ways for the skin to turn white are as follows. Melanocytes produce melanin and then pack them into

melanosomes that are transferred to the surrounding keratinocytes through their dendritic processes, which are then injected into neighboring keratinocytes. Keratinocytes transport melanins and melanosomes through the epidermis's basal layer to the stratum corneum, where cells are desquamated and released into the surrounding environment .

Certain diseases prevent or slow melanin production, causing the epidermis to become hypopigmented. Among these conditions are pityriasis alba, tinea versicolor, oculocutaneous albinism, and nevus depigmentosus. Melanocytes in the epidermis are generally present in healthy quantities

Statement Of The Problem

“A study to assess the knowledge attitude and perception regarding vitiligo among adults at Saniyasikuppam , Puducherry ”

It deals with the research approach, research design, setting of the study, population, criteria for sample selection, sample size, sample technique development and description of the tool for data collection, procedure for data collection and statistical analysis.

A Quantitative Research approach was adopted for this present study. This study adopted descriptive research design. The Study setting at Saniyasikuupam, Puducherry. The target population for this study comprises of all the adults.

The study sample consists of all the adults in Sanniyasikuppam who fulfils the inclusion criteria. Sample size consists of 30. Simple Random Sampling Technique was adopted for this present study.

Section-A [Demographic Variables]

Items on demographic variables consisting of age, religion, family monthly income, occupation, educational background, type of family, family history of any infectious disease , age at menarche, marital status, type of family , dietary pattern, Previous knowledge regarding vitiligo, family members working in health care systems.

Section B: [Self-Structured Knowledge Questionnaire]

SCORE	LEVEL OF KNOWLEDGE
15-20	Adequate Knowledge
12-11	Moderate Knowledge
Below 10	Inadequate Knowledge

This section consists of 15 knowledge questions regarding Vitiligo. Each question carry the score of 1 in case of correct answer, in case of wrong answer carry the score of 0, whereby responses will be ranged from inadequate knowledge, moderate knowledge, and adequate knowledge among adults.

Scoring Interpretations:

Section:C[Self-Structured Attitude Scale]

This section consists of 10 Attitude Self Structured Scale regarding Vitiligo. Each question carry the score of 1 in [Often] ,2 [Unsure], 3[Never] , whereby responses will be ranged from Bad Attitude [0-15] , Good Attitude [16-30] among adults.

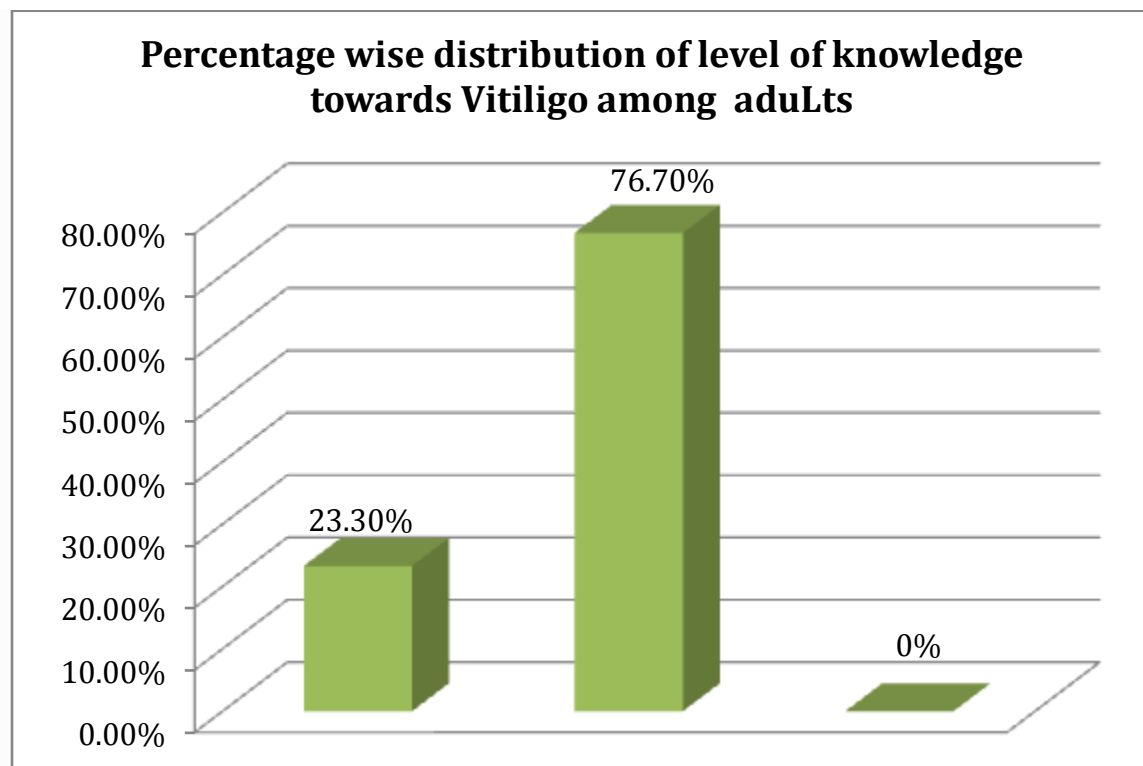
SCORE	LEVEL OF PERCEPTION
0-15	Bad Attitude
16-30	Good Attitude

Scoring Interpretations:**SECTION D : [Self Structured Perception Scale]**

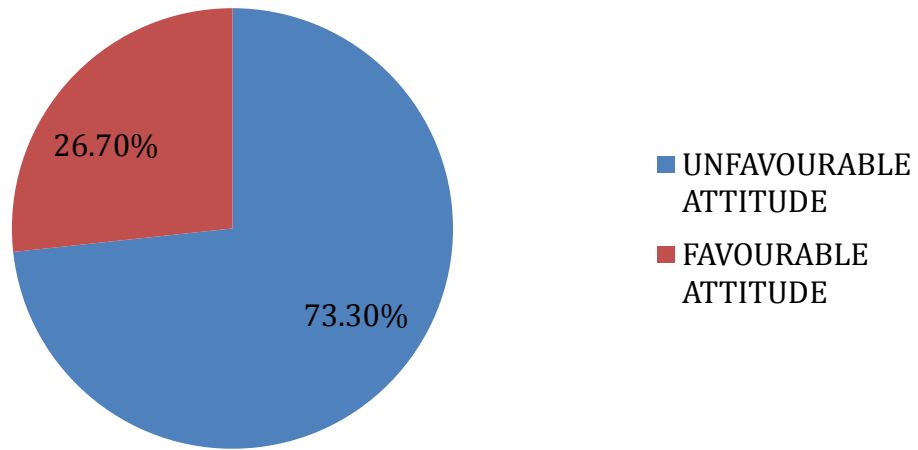
This section consists of 10 Self Structured Perception Scale Each question carry the score of 1 in case of Agree strongly [1], in case of Agree Slightly [2], In case Unsure [3], Disagree slightly [4] , Disagree strongly [5]whereby responses will be ranged from Low [0-11], Moderate [12-24] , High [25-37], Very High [38-50]among adults

Scoring Interpretations:

SCORE	LEVEL OF PERCEPTION
0 -11	Low
12- 24	Moderate
25-37	High



Percentage wise distribution of level of attitude towards Vitiligo among Adults



Percentage wise distribution of level of Perception towards Vitiligo among adults

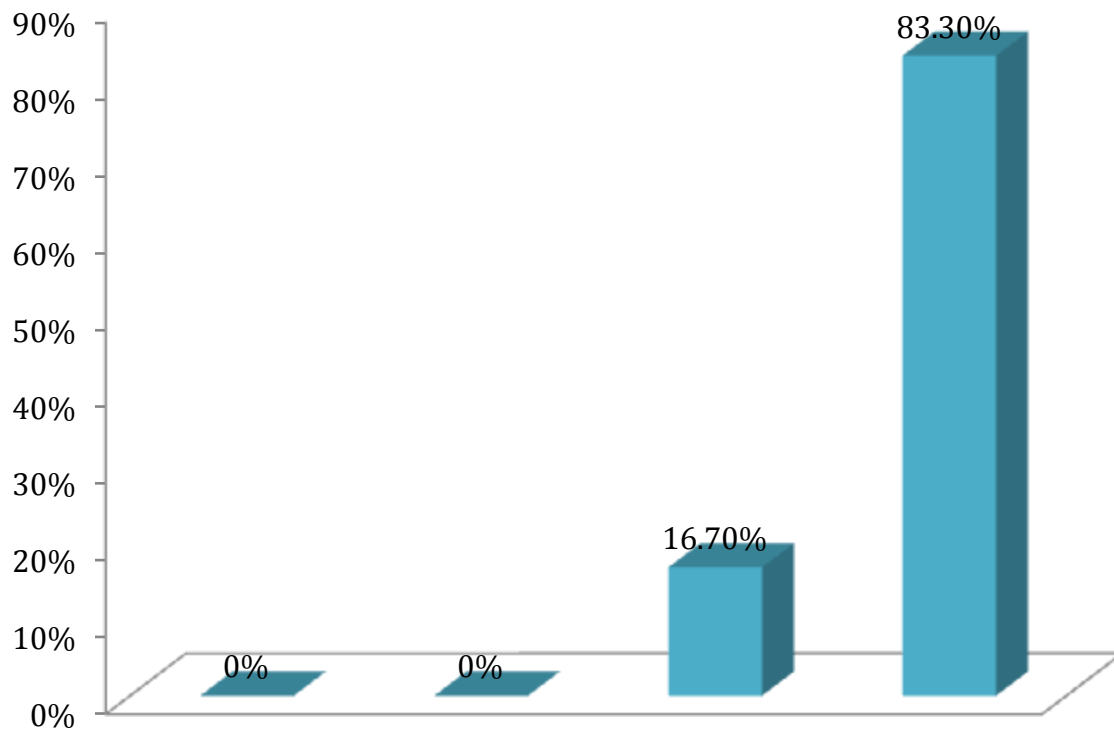


Table 6:- Association between the level of attitude regarding Vitiligo among adults with their selected demographic variables. (N=30)

SL. NO	DEMOGRAPHIC VARIABLES	LEVEL OF ATTITUDE				Chi-square X ² and P-Value
		Unfavourable		Favourable		
		N	%	N	%	
1	Age in years					X ² =10.64 Df=3 p =0.014 *S
	a. 22-34 years	6	27.3	2	25	
	b. 35-44 years	8	36.4	0	0	
	c. 45- 64 years	6	27.2	1	12.5	
	d. 65-75 years	2	9.1	5	62.5	
2	Gender					X ² =0.368 Df=1 p =0.544 NS
	a. Male	11	50	5	62.5	
	b. Female	11	50	3	37.5	
	c. Transgender	0	0	0	0	
	d. Others	0	0	0	0	
3	Religion					X ² =2.57 Df=2 p =0.276 NS
	a. Hindu	16	72.7	6	75	
	b. Christian	4	18.2	0	0	
	c. Muslim	2	9.1	2	25	
	d. Others	0	0	0	0	
4	Educational status					X ² =2.577 Df=3 p =0.461 NS
	a. Primary education	6	27.3	1	12.5	
	b. High school	5	22.7	2	25	
	c. Higher secondary	8	36.4	5	62.5	
	d. Degree and above	3	13.6	0	0	
5	Occupational status					X ² =1.85
	a. Government	6	27.3	1	12.5	
	b. Non-government	5	22.7	1	12.5	

	c. Daily wage	7	31.8	3	37.5	Df=3
	d. Home worker	4	18.2	3	37.5	p =0.604 NS
6	Marital status					
	a. Married	7	31.8	4	50	X ² =3.96
	b. Unmarried	7	31.8	4	50	Df=3
	c. Widow	5	22.7	0	0	p =0.265
	d. Divorced	3	13.7	0	0	NS
7	Family income					
	a. Rs. 5001-10,000 /-	4	18.2	3	37.5	X ² =4.38
	b. Rs. 10,001- 15000/-	7	31.8	4	50	Df=3
	c. Rs. 15,001-20,000/-	8	36.4	0	0	p =0.223
	d. Above Rs.20,000/-	3	13.6	1	12.5	NS
8	Dietary pattern					
	a. Vegetarian	0	0	2	25	X ² =5.89
	b. Non-Vegetarian	22	100	6	75	Df=1
	c. Mixed	0	0	0	0	p =0.015 *S
9	Type of family					X ² =0.292
	a. Nuclear family	16	72.7	5	62.5	Df=1
	b. Joint family	6	27.3	3	37.5	p =0.589 NS
10	Family history of any infectious disease					X ² =0.376
	a. Yes	1	4.5	0	0	Df=1
	b. No	21	95.5	8	100	p =0.540 NS
11	Previous knowledge regarding vitiligo					

	a. Yes	0	0	0	0	CONSTANT
	b. No	22	100	8	100	
12	Family members working in healthcare systems					$X^2=2.18$
	a. Yes	5	22.7	0	0	Df=1
	b. No	17	77.3	8	100	p =0.140
						NS

*-p < 0.05 significant, * *-p < 0.001 Highly significant, NS-Non significant

The table 6 depicts that in the evident of chi-square of the demographic variable **Age in years and Dietary pattern** had shown statistically significant association between the level of attitude regarding Vitiligo among middle adults with their selected demographic variables.

The other demographic variable had not shown statistically significant association the level of attitude regarding Vitiligo among middle adults with their selected demographic variables respectively.

Table 7:- Association between the level of perception regarding Vitiligo among adults with their selected demographic variables. (N=30)

SL. NO	DEMOGRAPHIC VARIABLES	LEVEL OF PERCEPTION				Chi-square X ² and P-Value
		HIGH		VERY HIGH		
		N	%	N	%	
1	Age in years					X ² =3.12 Df=3 p =0.372 NS
	a. 22-34 years	0	0	8	32	
	b. 35-44 years	1	20	7	28	
	c. 45- 64 years	2	40	5	20	
	d. 65-75 years	2	40	5	20	
2	Gender					X ² =5.25 Df=1 p =0.022 *S
	a. Male	5	100	11	44	
	b. Female	0	0	14	56	
	c. Transgender	0	0	0	0	
	d. Others	0	0	0	0	
3	Religion					X ² =1.036 Df=2
	a. Hindu	4	80	18	72	
	b. Christian	0	0	4	16	

	c. Muslim	1	20	3	12	p =0.596
	d. Others	0	0	0	0	NS
4	Educational status					$X^2=6.211$ Df=3 p =0.102 NS
	a. Primary education	1	20	6	24	
	b. High school	1	20	6	24	
	c. Higher secondary	1	20	12	48	
	d. Degree and above	2	40	1	4	
5	Occupational status					$X^2=2.19$ Df=3 p =0.533 NS
	a. Government	0	0	7	28	
	b. Non-government	1	20	5	20	
	c. Daily wage	2	40	8	32	
	d. Home worker	2	40	5	20	
6	Marital status					$X^2=3.73$ Df=3 p =0.292 NS
	a. Married	0	0	11	44	
	b. Unmarried	3	60	8	32	
	c. Widow	1	20	4	16	
	d. Divorced	1	20	2	8	
7	Family income					$X^2=3.49$ Df=3 p =0.322 NS
	a. Rs. 5001-10,000 /-	0	0	7	28	
	b. Rs. 10,001- 15000/-	3	60	8	32	
	c. Rs. 15,001-20,000/-	2	40	6	24	
	d. Above Rs.20,000/-	0	0	4	16	
8	Dietary pattern					$X^2=0.429$ Df=1
	a. Vegetarian	0	0	2	8	
	b. Non-Vegetarian	5	100	23	92	

	c. Mixed	0	0	0	0	p =0.513 NS
9	Type of family					$X^2=2.57$
	a. Nuclear family	5	100	16	64	Df=1
	b. Joint family	0	0	9	36	p =0.109 NS
10	Family history of any infectious disease					$X^2=5.17$
	a. Yes	1	20	0	0	Df=1
	b. No	4	80	25	100	p =0.023 *S
11	Previous knowledge regarding vitiligo					CONSTANT
	a. Yes	0	0	0	0	
	b. No	5	100	25	100	
12	Family members working in healthcare systems					$X^2=0.048$
	a. Yes	1	20	4	16	Df=1
	b. No	4	80	21	84	p =0.827 NS

Results:-

The findings reveals that majority of the adults 23[76.7%] had inadequate level of knowledge, 23[73.3%] had unfavourable attitude, 25[83.3%] had low level of perception

Discussion:-

This study was conducted to assess the Knowledge, Attitude and Perception regarding Vitiligo among adults at Sanniyasikuppam , Puducherry

This chapter depicts that in the evident of chisquare of the demographic variables Gender and Family history of any infectious disease had shown statistically significant association between the level of perception regarding Vitiligo among adults with their selected demographic variables.

The other demographic variable had not shown statistically significant association the level of perception regarding vitiligo among adults with their selected demographic variables.

Conclusion:-

The misconceptions about vitiligo in this study seems to be higher. Visualized based Questionnaire instead of asking from the word Vitiligo directly. Educational knowledge about disease recognition , causes and mode of transmission should be encouraged for public.

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