

Health Communication / Behavior Change Communication –

Paper #207442

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Background: India is experiencing an epidemic of coronary heart disease (CHD); by 2010, India is expected to account for 60% of CHD cases worldwide. We assessed urban Indians' knowledge about heart attacks and their beliefs about the causes and prevention of CHD.

Methods: Survey was verbally administered in Telugu, Hindi, and English, to 100 respondents recruited from two primary care clinics in Hyderabad, India.

Results: Respondents average age was 34 years, 30% were women, 44% were college graduates, and 76% were interviewed in Telugu or Hindi. Only 37% correctly identified CHD as the leading cause of death in India. When asked to describe in their own words, what is a heart attack, 23% of respondents used terms such as “blocked blood flow to heart,” “coronary artery disease,” “clot in arteries;” 37% said “pain in heart,” 16% used more generic terms such as “damaged heart,” “heart failure,” “heart does not pump,” and 14% said “do not know.” Most frequently mentioned CHD risk factors were high fat diet (42%), stress (39%), poor diet in general (29%), and smoking (21%). When asked what things prevent CHD, respondents most frequently cited exercise (48%), better diet in general (48%), low fat diet (34%), and not smoking (26%). Very few (13%) said control of cholesterol, blood pressure, or diabetes. 48% thought that most heart attacks were not preventable. English-speakers were more likely to know what a heart attack is compared to non-English speakers ($p < 0.01$). Individuals with higher education were more likely than those with lower education to believe that heart attacks are preventable ($p = 0.04$).

Conclusion: The majority of urban Indians are not aware that CHD is the leading cause of death and few are aware of the connection between cholesterol, hypertension, diabetes, and CHD. Non-English speakers and those with low education seem to know less and have more misconceptions. CHD education

programs targeted to urban Indians need to change knowledge and attitudes about the preventability of CHD and the importance of controlling cholesterol, blood pressure, and diabetes to achieve this. While broad public education is needed, messages may need to be somewhat different for population subgroups (e.g., by language and education) to be maximally effective.

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Learning Objectives:

- Describe knowledge and beliefs about coronary heart disease (CHD) in an urban Indian sample.
- Identify population subgroups that have lower levels of knowledge and awareness about CHD.
- Discuss targeting of CHD prevention messages for urban Indians.

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Presentation Format: NoPreference

Primary Geographic Focus of the Program or Study: India

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Presenting

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Qualified on the content I am responsible for because: I am the Principal Investigator of a related study on South Asians in the United States, which has been funded by the National Heart Lung and Blood Institute (K23HL084177). I have published original research articles in the topic area.

Any relevant financial relationships? No

Signed on 02/20/2009 by *Namratha Kandula*

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