Self-reported health, illness and self-care among doctors of Meerut

Rahul Bansal1, Rashmi Katyal1, Sartaj Ahmed3, Ranjeeta Kumari4
1Professor & Head, 2M.D. student, 3Assistant Professor, Department of Community Medicine, 4Assistant Professor, Sociology, Subharti Medical College, Meerut.

Abstract: This document provides insight on lifestyle and healthcare status of doctors based on key findings from a survey conducted in Meerut City, (U.P.) India.

Objectives:
1. To study the lifestyle pattern among the doctors of Allopathy and Ayurveda & teachers of local private Medical college, local private Dental college.
2. To study the (self-reported) prevalence of common non-communicable diseases in the same.
3. To know the pattern of healthy lifestyle practices adopted by the doctors.

Material & Methods: The Cross-sectional study was conducted with the help of a pre-designed and pre-tested questionnaire which was filled by the faculty of local private Medical College, Dental college, Ayurvedic doctors and local practicing doctors of allopathy and Ayurveda. Verbal consent was implied.

A purposive sample of 240 doctors [60 each from Medical and Dental colleges and 60 each from allopathy private practitioners (p.p.allo.) and ayurvedic private practitioners (p.p.ayur.)] were given the questionnaire-and response rate was 84%.

Results: 47.5% of the doctors had raised B.M.I. (Body Mass Index- more than 25); 21% of the doctors were smokers, 10% were current drinkers and 32% were hypertensive. Only 2.5% were found to be diabetic in our study. About 52% of the doctors exercised regularly. 32.5% were trained for yoga.

Conclusion: This study implies that a large proportion of doctors themselves do not follow the healthy lifestyle and are having lifestyle diseases like obesity, hypertension etc. Interestingly, there was not much difference between doctors doing private practice or teaching in Medical/Dental College.

Keywords: Ayurveda, Lifestyle patterns, 3 D’s, Medical faculty, Dental faculty, B.M.I

INTRODUCTION:
It is sad and surprising that physicians have significant psychological vulnerabilities and are more likely than the average person to suffer from one or more of “the three Ds”- drugs, drink & depression.1

Illnesses experienced by doctors include all the expected categories for the population at large: cardiovascular diseases (4% to 15%), respiratory illnesses (10% to 21%), musculo-skeletal problem (9% to 38%), cancer (2 to 3%) & psychiatric illness (3 to 10%). 30% of doctors attending for psychiatric care were found to have a concomitant physical illness.2

Many studies have documented high levels of stress and higher than expected rates of psychiatric morbidity in doctors and medical students. One study found that suicide rates in male doctors to be about double than that expected3 Doctors experience ill-health, they disregard the advise they give to their own patients4

It was therefore thought to be important to find the morbidity and lifestyle patterns among the doctors of Meerut.

MATERIALS & METHODS:
The Cross-sectional study was conducted with the help of a pre-designed and pre-tested questionnaire which was filled by the faculty of local private Medical College, Dental college, Ayurvedic doctors and local practicing doctors of allopathy and Ayurveda. Verbal consent is implied. A purposive sample of 240 doctors [60 each from Medical and Dental colleges and 60 each from allopathy private practitioners (p.p.allo.) and ayurvedic private practitioners (p.p.ayur.)] were given the questionnaire-and response rate was 84%. The data was entered in Microsoft excel 2007 to know the frequency of the various lifestyle patt.

Results: General characteristics of doctor’s study:

SOCIAL BACKGROUND
Socio-demographic characteristics are highlighted in Table I.

DIET AND LIFESTYLE OF DOCTORS:
60% of doctors were strict vegetarian, i.e. who did not consume non-veg at all.

The difference in the dietary pattern (vegetarians and non-vegetarians) among the subgroup of the doctors is highly significant (p value<0.001).

Address for Correspondence:
Dr Rahul Bansal, Deptt. Of Community Medicine, Subharti Medical College, Meerut.
EmailID: meusims2008@gmail.com
Smoking status of doctors:
Overall, 22% of the doctors were smokers and it is interesting to observe that about 76% of doctors have never smoked, 11% of doctors are currently smoking and 10% have left it since more than one year. (fig. I)
No significant differences in rates of smoking were observed among groups.

Pattern of alcohol use among doctors:
The findings are quite similar to the smoking pattern. 70% have never tried alcohol. 10% are currently drinking and around 8% have left it more than one year back while 8% did not respond.
Maximum current drinkers were from Dental faculty (26%) followed by private allopathic practitioners (12%), Medical faculty (10%) and private ayurvedic practitioners (3%). The difference between the subgroups is found to be highly significant (p value <0.001)

Exercise among doctors:
Surprisingly, only 37% of doctors were doing regular exercise i.e. more than 4 days/week while another 15% exercised less than 4 days. The rest (42%) exercised occasionally (Table II). This pattern of exercise among the various subgroups is significant (P value<0.05)
Only 24% of doctors exercised regularly for 40-60 minutes on the days which they had chosen to do physical activity; around 15% did not respond which can be taken as a proxy for not exercising within different groups.

Health status of doctors:
Obesity:
Around 38% of doctors were found to be overweight with BMI between 25-30. There was a significant difference among the various subgroups (p value < 0.01)

Hypertension:
Looking at the hypertension among doctors, only around 57% of the doctors were normotensive, rest (32%) reported Blood Pressure (B.P.) levels which can be labelled as hypertensive (cut off being 130/85mm of Hg) while around 11% have not responded to this question, which can be taken as not being aware of their blood pressure.
Surprisingly, the category of unanswer was highest among Dental college faculty (32%) followed by Medical college faculty (12%). The pattern of distribution of hypertension among the subgroups of doctors was found to be highly significant (p value <0.01).

Blood sugar:
37% of them did not respond which can be taken as not being aware of their blood sugar levels. 60% of them reported having normal blood sugar levels. Only 2.5% i.e. 5 doctors reported as having raised blood sugar levels. The difference in blood sugar levels among the various subgroups was found to be highly significant (p value <0.001).

History of major illnesses:
14% of doctors reported a major illness in the last one year. When asked to report any major illness in the last one year, around 14% doctors said yes, 84% no and 2.5% did not answer. Around 19% doctors accepted having at least one non-communicable disease, around 79% denied while only 3% did not respond.

Maximum persons who accepted having non-communicable disease were ayurvedic private practitioners (28%). Maximum proportions of doctors on regular medication were from allopathic private practitioners (33%), followed by Ayurvedic private practitioners (28%). 26% were currently on medication and around 69% were not while 6% did not answer.

Yoga and meditation among doctors:
Only 10% of all the doctors were trained for yoga and 32.5% were not trained while 58% did not answer.
The difference in the practice of yoga among the various subgroups was found to be highly significant (p value<0.001).
23% meditated, 67% did not and 8% did not answer. 39% of the allopathic practitioners were maximum in numbers who meditate followed by Medical faculty, Dental faculty and ayurvedic practitioners.
The difference in practice of meditation among the various subgroups was found to be significant (p value <0.01).

Stress:
Self reported occupational stress was found in 47% of doctors while 52% had no stress. The difference in the stress among the various subgroups was not found to be significant.

Prayer:
Overall 81% of the doctors prayed regularly and 17% did not do so.

Choice of Profession:
Except for the 21% doctors who preferred other profession or have unanswered, the remaining 79% want to be in the same profession if given a chance.
If given a choice to choose a profession, 79% wanted to be in the same profession, 14% in the other and 7% did not answer in the faculty of Medical college group; in the Dental college group 78% wanted to be in the same profession while 18% did not want to do so and about 4% were unanswered.
In the allopathic private practitioners and the Ayurvedic private practitioners: 76% and 83% wanted the same profession respectively while 14% and 13% did not want the same profession and 10% and 5% did not answer respectively.
Spirituality:
Overall, 73% of the study subjects believed in the cosmic intelligence and 15% did not do so.
77% believed in cosmic intelligence, 11% did not and 12% unanswered in the faculty of Medical college group while Ayurvedic practitioners had 68% believing in the cosmic intelligence, 10% not while 23% were unanswered.

Table I: Overall Population Distribution

<table>
<thead>
<tr>
<th>Socio-demographic characteristics</th>
<th>Criteria</th>
<th>MC (57)</th>
<th>DC (54)</th>
<th>Private Ophthalmology (29)</th>
<th>Private Ayurveda (29)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>25-35</td>
<td>27</td>
<td>44</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>36-45</td>
<td>14</td>
<td>7</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>46-55</td>
<td>9</td>
<td>1</td>
<td>18</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>56-65</td>
<td>5</td>
<td>1</td>
<td>10</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>65+</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Unanswered</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Gender</td>
<td>Male</td>
<td>39</td>
<td>27</td>
<td>37</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>18</td>
<td>27</td>
<td>12</td>
<td>6</td>
</tr>
<tr>
<td>Marital status</td>
<td>Married</td>
<td>52</td>
<td>41</td>
<td>45</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>Unmarried</td>
<td>2</td>
<td>12</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Widow/widower</td>
<td>3</td>
<td>0</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Unanswered</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Education</td>
<td>Under Graduate</td>
<td>4</td>
<td>10</td>
<td>8</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>Post Graduate</td>
<td>53</td>
<td>42</td>
<td>41</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Unanswered</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Years of medical practice</td>
<td>0-10</td>
<td>28</td>
<td>34</td>
<td>15</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>11-20</td>
<td>11</td>
<td>6</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>21-30</td>
<td>4</td>
<td>1</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>31-40</td>
<td>7</td>
<td>0</td>
<td>7</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>&gt;40</td>
<td>7</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Unanswered</td>
<td>0</td>
<td>12</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Occupation of Spouse</td>
<td>Medical</td>
<td>35</td>
<td>31</td>
<td>33</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Non/medico</td>
<td>18</td>
<td>11</td>
<td>11</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>Unanswered</td>
<td>4</td>
<td>12</td>
<td>5</td>
<td>4</td>
</tr>
</tbody>
</table>

MC - Medical College
DC - Dental College
p.p.allo - Private Practitioner Allopathy
p.p.ayur - Private Practitioner Ayurveda

Fig. I: Smoking status of doctors

Table II: Pattern of exercise followed among doctors

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Occasional</td>
<td></td>
<td>29</td>
<td>24</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>&lt;4 days</td>
<td></td>
<td>09</td>
<td>09</td>
<td>00</td>
<td>09</td>
</tr>
<tr>
<td>&gt;=4 days</td>
<td></td>
<td>17</td>
<td>15</td>
<td>25</td>
<td>17</td>
</tr>
<tr>
<td>Unanswered</td>
<td></td>
<td>02</td>
<td>03</td>
<td>04</td>
<td>04</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>57</td>
<td>54</td>
<td>49</td>
<td>40</td>
</tr>
</tbody>
</table>

MC - Medical College
DC - Dental College
p.p.allo - Private Practitioner Allopathy
p.p.ayur - Private Practitioner Ayurveda

Fig. II: Yoga among doctors

Fig. III: Stress among doctors

MC - Medical College
DC - Dental College
p.p.allo - Private Practitioner Allopathy
p.p.ayur - Private Practitioner Ayurveda
Discussion:

In most of the studies done on health of doctors, their health problems are mainly discussed in relation to substance abuse and psychiatric disorders rather than in terms of physical diseases. None of them have dealt with the health promotional activities being followed by the doctors such as physical activity, and practice of yoga and meditation. According to the study of prevalence of cardiometabolic risk factors among young physicians in India by Ramachandran A. et al5, 60.4% of the doctors had B.M.I. higher than that found in our study where 47.5% of the doctors have raised B.M.I.(more than 25); prevalence of smoking was 10.7% in the above study while it came out to be 21% in our study5. Similarly alcohol users among doctors in the above study were 16.4% while they were 17% in our study which is very similar to it.

According to our study the proportion of doctors who suffer from lifestyle diseases seem to be 30%- 38% hypertensive, 38% were overweight which correlates well with the fact that around 70% are teetotallers and 60% are not under much stress.

Very small proportions (around 40%) were on regular exercise, still smaller 10% were trained in Yoga and one fourth of doctors did regular meditation.

It is logical to infer that those 30% doctors who are regular drinkers/smokers are highly stressed and also don’t exercise or do meditation.

Conclusion:

This study supports the findings from the other parts of india and the world that doctors are not able to take proper care of their health which may be due to the stress factors, due to the busy schedule and also due to pure negligence. From the very first year of medical education, the department of Community Medicine should denote few lectures on this topic that is, the poor state of doctor’s health and what should be done to maintain optimum level of health throughout the profession.

References:


