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Compliance to the secondary prophylaxis of rheumatic heart disease and disease awareness in common people: A cross sectional study in eastern India

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Rheumatic Heart Disease (RHD) is a major cause of long term morbidity and premature mortality in developing world. It is a disease causing damage to the cardiac valves which is sequel to Rheumatic Fever (RF) developing after infection with group A Beta Hemolytic Streptococcus. The important fact is that this disease is preventable and controllable. It may lead to chronic morbidity with repeated hospitalization and often unaffordable cardiac surgery. Rheumatic fever affects school aged children primarily and over 330000 children between the ages of 5 and 14 years are affected by rheumatic fever each year with global prevalence of 0.3-5.7/1000. Deaths from rheumatic heart disease are estimated between 250000 and 468000 annually. A single tertiary cardiac centre in western India registered 120 deaths in a year. The improvement in the living standards with better sanitation, avoidance of overcrowding and overall betterment in healthcare system will improve the above figures. The other important areas where the disease can be attacked are community awareness regarding the disease and primary and secondary prophylaxis. In India there is no structured community awareness program on rheumatic fever. Community awareness regarding relationship of sore throat and joint pain with the heart disease would lead to early healthcare seeking with improvement in primary prevention and early detection of acute rheumatic fever. Registry of RF and RHD cases will help in ensuring regular secondary prophylaxis. Injection Benzathine Penicillin is most commonly used medicine for secondary prophylaxis. It is very cheap but yet not available in most of the government hospitals in India. In our cross sectional study conducted in eastern India in a region with low per capita income, we found a poor awareness regarding RHD among common people. We also found that only 54% of people are compliant with the secondary prophylaxis of ARF/RHD. Significantly low level of community awareness regarding RF/RHD was found in our study population from eastern India. Only half of the patients were compliant to the regular secondary prophylaxis. Raising community awareness and improving secondary prophylaxis could decrease the disease burden of RHD in areas in the developing world with significant prevalence of the disease.

Biography

Arun Prasad is currently working as an Assistant Professor of Pediatrics in Emergency Department at All India Institute of Medical Sciences, Patna. He has previously worked in Pediatric Cardiology Department for 5 years. He has an experience of 11 years of doing echocardiography. He is keen to improve morbidity and mortality due to rheumatic heart disease in the region.

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