Assessment of Knowledge, Attitude and Practice of Mothers and their Children with Rheumatic Fever Towards their Disease



Submitted in partial fulfillment of Master Degree in Community Health Nursing

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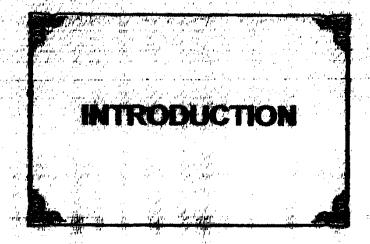
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INTRODUCTION

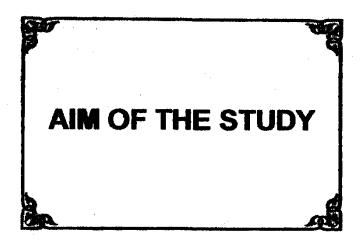
World wide rheumatic fever remains a major cause of acute and chronic cardiac morbidity and mortality. In developed countries, it is uncommon but does occur, [Levene, 1995]. It causes 25-40% of all cardio-vascular disease in developing countries, [Kaplan, 1992]. The prevalence of rheumatic fever in many developing countries is about 10 per 1000 in school age children, [WHO, 1990].

Rheumatic fever is a sequel of group A Beta hemolytic streptococcal infection of the upper respiratory tract, occurring in about 2.8% of all those having a streptococcal throat infection, producing nonsuppurative inflammatory lesion in connective tissue of the heart, joints, subcutaneous tissues, and central nervous system, [Thompson, et al., 1993]. The peak period of risk is 5-15 years of age, more common in girls, and is now more common in blacks, reflecting the socioeconomic factors [Hay and Groothuis, 1995]. The progress of the disease depends on the extent to which the myocardium is involved, [Pillitteri, 1981]. Only through well-organized health programs aimed at improved living standards especially housing, early treatment of streptococcal infection and resistant prophylaxis of affected individuals, can a reduction in this common and eminently preventable cause of serious cardiac disease be achieved, [Coovadia, and Loening, 1984].

Healthy children are a vital resource to ensure the future well being of

the nation, they are the parents, workers, leaders, and decision makers of tomorrow, [Spradley, 1985]. Rheumatic fever occurs in school age children, this is the period during which the child enters society's training system from which he would emerge as a contributing member of the community according to his capabilities, [Ebrahim, 1982].

Prevention of rheumatic fever is one of the major focuses of nursing, today the nurse can make contributions towards the prevention of rheumatic fever. Prevention through all types of measures to a reduction in incidence of disease. If the disease is already present, measures should be taken to reduce the severity or to postpone the occurrence of disability or handicap. [WHO, 1981b]. So assessment is very important for the family of the child with rheumatic fever, it involves the use of the five senses to compile appropriate information that allows for the identification of actual and potential health problems and the development of a plan to improve the level of wellness of the family through assessment which includes, family history, family and child health assessment, [Hartrick, et al., 1994].



Aim of study:

The aim of this study is to assess the knowledge, attitude and practice of mothers and their children with rheumatic fever towards their disease.

