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LIFESTYLE PATTERNS AMONG PATIENTS WITH CORONARY ARTERY DISEASE

Thesis

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Mazen Ibrahim Haidar

B.Sc .MD. Syria B.Sc .N. Alexandria

Faculty of Nursing University of Alexandria 2002

SUPERVISORS

Prof. Dr. Alice Edward Reizian

Professor of Medical-Surgical
Nursing
Department of Adult Nursing
Faculty of Nursing
University of Alexandria

Dr. Samia Mohammed Hafez

Lecturer of Medical-Surgical
Nursing
Department of Adult Nursing
Faculty of Nursing
University of Alexandria

الله الرحمل الرحيم

((وعلمك ما لم تكن تعلم وكان فضل الله عليك عظيما)) ميدق الله العظيم

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CONTENTS

CHAPTER	AGE
I. INTRODUCTION	1
II. AIM OF THE STUDY	33
III. MATERIAL AND METHODS	34
IV. RESULTS	41
V. DISCUSSION	73
VI. CONCLUSION AND RECOMMENDATIONS	89
VII. SUMMARY	95
VIII. REFFERENCES	101
APPENDICES.	
PROTOCOL.	
ARABIC SUMMARY.	

LIST OF TABLES

TABLE	PAGE
I: Age and sex distribution of the studied patients	43
II: Distribution of the studied patients as regards sociodemographic characteristics	45
III: Distribution of the studied patients as regards self-actualization	47
IV: Distribution of the studied patients as regards interpersonal support	49
V: Distribution of the studied patients as regards stress management	51
VI: Distribution of the studied patients as regards exercise or physical activity	54
VII: Distribution of the studied patients as regards nutrition	. 56
VIII: Distribution of the studied patients as regards health responsibility	. 59
IX: Relation between obesity and opinion about obesity	62

TABLE		PAGE
X:	Relation between physical activity and obesity	64
XI:	Relation between physical activity and occupation	66
XII:	Relation between income and high fat food intake	68
XIII	: Relation between income and eating most of meals at home	. 70
XIV	7: Relation between level of education and attendance of	health
	care programs	72

Introduction

Chronic diseases, such as cardiovascular diseases and cancer are considered the primary killer in the world today ⁽¹⁾. In developed countries, coronary artery disease and stroke are responsible for 40-50 % of all deaths. The main underlying pathological process of these 2 diseases is atherosclerosis ^(2, 3).

Coronary Artery Disease (CAD) is the leading cause of morbidity and mortality in the world today ⁽⁴⁾. In the United States, Atherosclerosis is a leading cause of death and impairment. It is estimated that 1,100,000 new or recurrent coronary attacks occur per year. It affects close to 60 million Americans. To better place this disease in perspective, every 20 seconds a person in the United States has a heart attack, and one third of these attacks lead to death ⁽⁵⁾. Moreover, a steep rise in the incidence of mortality caused by CAD is being experienced in the developing countries ⁽⁴⁾. In Egypt, the incidence of deaths caused by CAD is nearly 6721 per 100,000 population ⁽⁶⁾. However, Mortality rate in the Western world from CAD seems to be on the descending limb, after a peak in the middle of the last century. This decline has been attributed mainly to lifestyle changes in the population, leading to better management of cardiovascular risk factors ⁽⁴⁾.

Coronary artery disease (CAD) is an insidious, chronic, progressive disease of the coronary arteries that results in their narrowing

or complete occlusion usually due to a build up of fatty plaques along the vessel walls (7).

Coronary artery atherosclerosis is also commonly known as coronary artery disease (CAD), hardening and/or thickening of the arteries. It involves the slow buildup of deposits of fatty substances, cholesterol, body cellular waste products, calcium, and fibrin (a clotting material in the blood) in the inside lining of an artery. The buildup that results, called plaque, may partially, or totally block the blood flow through the artery. This can lead to the formation of a blood clot (thrombus) on the plaque's surface. If either of these occurs and blocks the entire artery, a heart attack may result (2,5).

Hardening, which is the lay term for CAD, and/or thickening of the arteries, gets its name from the fact the people have noticed for thousands of years that the entire arterial system literally hardens or becomes progressively more rigid as people age. That process is readily appreciable by simple feeling an artery of a 20 year old person and comparing it with that of an octogenarian. Based on that presumption no one really gave much attention to this process until the last 40 years ^(2, 8).

CAD has a long latent period. It is a slow, progressive disease, that may start in childhood, fatty streaks appear within the aorta shortly after birth, but symptoms usually do not occur until late middle age when coronary artery lesions exceed 75%, i.e. 75% of the vessel lumen is occluded by atherosclerotic plaque ^(7, 9). In some people, this disease