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Knowledge regarding first aid management of epistaxis among school students

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Abstract

Epistaxis is defined as the acute bleeding from the nasal cavity, nasopharynx or the nose. Bleeding from the septum is responsible for the majority of epistaxis cases. Many people are unaware about the causes and management of epistaxis.

Objective: To assess the knowledge regarding first aid management of epistaxis.

Method: A Quantitative research approach with descriptive study design was used to assess the Knowledge regarding Epistaxis among School Students. The universe of the study population comprised of School Students. The study was conducted in Senior Secondary School. Purposive sampling technique was used to select the hundred subjects from the population. Knowledge questionnaire was used to assess the knowledge regarding first aid management of epistaxis.

Results: The result of the study shows that majority (70%) of the School Students had Average knowledge, 26% had Poor Knowledge and 4% had good knowledge regarding first aid management of epistaxis.

Conclusion: The result indicates that a large percentage of students have average knowledge. Only few have good knowledge and some students have poor knowledge about first aid management of epistaxis.

Keywords: Knowledge, epistaxis, first aid management, school students

Introduction

Epistaxis is derived from the Greek word “epistazo” means to bleed from the nose: (epi) – “above”, “over” + (stazo) – “to drip” [from the nostrils] or a nosebleed is common occurrence of haemorrhage from the nose, when the blood drains out through the nostrils. The most common ENT emergencies presenting to the accident and emergency department (AED) worldwide. Epistaxis is a common otorhinolaryngology emergency in ear, nose and throat (ENT) and accident and emergency departments. It acts as a significant workload in accident and emergency and otolaryngology departments it usually causes anxiety for both patients and clinicians, it ranges from mild bleeding to severe, life-threatening rhinological emergency which acts as a challenges to an otolaryngologist. There are two types: anterior that is the most common, and posterior which is less common. In more severe cases, the blood can come through nasolacrimal duct and out from the eye. Fresh blood and clotted blood can also flow down into the stomach and cause nausea and vomiting ^[1].

According to medicine Net: nosebleed is simply bleeding from the blood vessels in the nose. The medical term for nosebleed is epistaxis ^[2]. Causes of nosebleeds has two categories, local and systemic factors. There is no significant cause for nosebleed. Local factors are blunt trauma, foreign bodies, acute respiratory tract infections, chronic sinusitis, allergic rhinitis or environmental irritants and other anatomical deformities, Insufflate drugs, intranasal Tumors, low relative humidity of inhaled air, nasal cannula O₂, nasal spray. In systemic factors are Allergies, infectious disease and hypertension ^[3]. The incidence of epistaxis was reported to range from 10% to 60% of individuals ^[4].

6% of individuals were admitted to medical treatment to control the haemorrhages, while 60% of them had at least one episode of epistaxis ^[5]. Some epistaxis episodes required hospital admission. First aid is the emergency treatment of injury or illness to prevent deterioration of condition and to decrease pain until professional medical help reaches, to reduce mortality and morbidity. In United States, around 1.7% of all AED visits are due to epistaxis, and about 1 in 200 ED visit in U.S is due to epistaxis.

The incidence usually is bimodal affecting mostly those younger and the older population (<10 years old and >70 years) [6]. Epistaxis that occurs in children younger than 10 years usually is mild and originates in the anterior nose, whereas epistaxis that occurs in individuals older than 50 years is more likely to be severe and to originate posteriorly [7].

Aim

The aims of the study were to measure the knowledge regarding first aid management of epistaxis among School students.

Materials and methods

A quantitative approach with Purposive Sampling

techniques was carried out to study the knowledge regarding first aid management of epistaxis among School Students. The universe of the study population comprised of School Students. The School students who were present at the time of data collection and willing to participate in the study were included from the study.

School students who were Studying in 8th – 12th class were purposively selected from the study population. Based on standard sample size calculation total 100 subjects were recruited. Knowledge Questionnaire was used to measure Knowledge regarding Epistaxis. Ethical committee permission was obtained from the concerning authority and informed consent was taken from the study subject after explaining about the study.

Table 1: Frequency (f) and Percentage (%) distribution of students according to their selected personal variables n-100

S. No	Sample characteristics	Frequency(f)	Percentage (%)
1.	Age		
	11-13 year	10	10
	14-16year	44	44
	17-19year	46	46
2.	Gender		
	Female	59	59
	Male	41	41
3	Religion		
	Hindu	98	98
	Muslim	2	2
4.	Monthly income of family		
	<10000	28	28
	11000-20000	22	22
	21000-30000	14	14
	31000-40000	16	16
	41000-50000	5	5
	>50000	15	15
5.	Education status of father		
	No formal education	12	12
	Primary school	14	14
	Secondary school	3	3
	High school	56	56
	Graduate	13	13
	Postgraduate	2	2
6.	Education status of mother		
	No formal education	15	15
	Primary school	17	17
	Secondary school	6	6
	High school	46	46
	Graduate	15	15
	Postgraduate	1	1
7.	Occupation of father		
	Farmer	56	56
	Private employee	10	10
	Business	13	13
	Government employee	21	21
8.	Occupation of mother		
	Home maker	88	88
	Private employee	1	1
	Government employee	7	7
	Self-employee	4	4
9.	Type of family		
	Nuclear	21	21
	Joint	74	74
	Extended	5	5
10.	Health facility near home		
	Sub centre	31	31
	PHC	6	6
	CHC	4	4
	District hospital	59	59
11.	Education status of student		
	8 th class	9	9
	9 th class	8	8

	10 th class	12	12
	11 th class	35	35
	12 th class	36	36
	Family members belongs to medical line		
12.	One	17	17
	Two	3	3
	More than two	4	4
	None	76	76
13.	Do you have any knowledge regarding epistaxis		
	yes	44	44
	No	56	56

Table no. 1 The majority (46%) of participants were in the age group of 17-19 years. Majority (59%) were female and majority (98%) were Hindu. Majority (28%) had monthly family income <10000. Majority (56%) student's father and (46%) mother studied up to high school. Majority (56%) student's fathers were farmer and (88%) were home maker. (74%) students belong to joint family. Majority (59%) had district hospital facility near their houses. Majority (36%) student's were from 12th class and (76%) of students had nobody belongs to medical line. Majority (56%) students had no knowledge regarding first aid management of epistaxis.

Table 2: Frequency and percentage distribution of knowledge score obtained by school students.

S. No	Knowledge score	Score Level	Frequency (%)
1	0-5	Poor	26(26)
2	6-10	Average	70(70)
3	11-15	Good	4(4)
4	16-20	Excellent	0(0)

Table no. 2 showed that majority (70%) had average knowledge, (4%) had good and (26%) had poor Knowledge regarding First aid management of epistaxis.

Table 3: Association between knowledge score with their personal profile of study participants.

S. No.	Sample characteristics	chi square	df	P value
1	Age	93.5	90	0.37
2	Sex	8.32	90	0.59
3	Religion	4.10	90	0.94
4	Family monthly income	42.4	90	0.76
5	Father's Education	45.1	90	0.66
6	Mother's Education	40.6	90	0.82
7	Father's Occupation	34.7	90	0.25
8	Mother's occupation	44.2	90	0.04*
9	Type of family	28.27	90	0.10
10	Health Facility near home	43.19	90	0.05*
11	Education status of Student	62.1	90	0.01*
12	Family Member belongs to Medical line	50.0	90	0.01*
13	Any Knowledge Regarding Epistaxis	5.3	90	0.8

Table no 3: There is a significant association between knowledge scores with demographic factor like-mother occupation facility near home, student class, family members belongs to medical line.

Discussion

The study findings illustrated that majority and seventy percent had average knowledge, four percent had good and twenty six percent had poor knowledge regarding first aid management of epistaxis. This study show that there was no statistical association was found between the knowledge score of the study participants and their selected personal profile data. These study findings consistent with Tanner R, Lr Med J. (2015) conducted a cross sectional study to assess current knowledge of epistaxis first aid management. The study result showed that twenty five percent patient didnot use compression during episode of epistaxis, sixty percent used the compression technique failed to compress the lower one third of the nose, only ten percent identified their GP as having taught them first aid for epistaxis.

Conclusion

The investigator was observed that epistaxis are common most often its a nuisance and not a true medical problem. But they can be both. Nosebleed care includes sit upright it reduce the blood pressure in the vein of the nose and sitting

forward will help avoid swallowing blood. Pinch nose for 10-15 min. It stops the flow of blood. The first aid management of epistaxis depends directly upon the degree to which student have knowledge of management for epistaxis when to seek emergency care like bleeding last for more than 30 min. The main conclusion drawn from present study was that the overall average knowledge regarding first aid management of epistaxis.

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