



# **“A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE AND PRACTICE OF CHRONIC RENAL FAILURE CLIENT REGARDING DIET THERAPY IN NEPHROLOGY UNIT OF SELECTED HOSPITALS TUMKUR.”**

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## **ABSTRACT**

A study was conducted to assess the effectiveness of structured teaching programme on knowledge and practice of chronic renal failure client regarding diet therapy in nephrology unit of selected hospitals, Tumkur .It was a pre experimental study with one group pre-test and post test design to assess the effectiveness of structured teaching program on chronic renal failure client.The conceptual framework of the study used in this study was based on health promotion model. The purposive sampling technique was used to collect the data. The study included a sample of 50 chronic renal failure clients. In pre-test, overall mean percentage of knowledge score was 37.44% and that of the post-test was 79.76% with the enhancement of 42.32%. The statistical paired ‘t’ value 18.56 is greater than the table value 2.02 which implies that the difference between the pre-test and post-test knowledge scores found to be statistically significant at 5% level. In pre-test, mean percentage of Practices cores was 36.42% and in the post test, the mean percentage of Practice score was 79.76% with the enhancement of 40.64%. The statistical paired ‘t’ value 17.68 is greater than the table value 2.02 which implies that the difference between the pre-test and post- test Practice scores found to be statistically significant at 5% level .

## INTRODUCTION

Chronic renal failure is a gradual and progressive loss of the ability of the kidneys to function normally. The change is irreversible and is due to loss of nephrons of the kidney.

The nephrons are basic functioning unit of the kidney and there are normally about one million nephrons in each kidney.

CKD is a worldwide health problem. According to World Health organization (WHO)

Global Burden of Disease project, diseases of the kidney and urinary tract contribute to global burden with approximately 850,000 deaths every year and 115,010,107 disability adjusted life years. CKD 12 leading cause of death and 17 cause of disability.

Changing what you eat and drink may be hard at first. You may need to make these changes part of your daily routine. Following a renal failure diet may help you feel better. Choose a variety of items on this diet to avoid getting tired of having the same items every day.

**Protein:** You will need to limit the amount of protein in your diet. This will help decrease the wastes in your blood, helping your kidneys to work better.

**Phosphorus:** You will need to limit the amount of phosphorus in your diet. When you have kidney failure, your kidneys cannot get rid of extra phosphorus that builds up in your blood. This may cause calcium to leave your bones and make them weak.

**Sodium:** You may have to limit the amount of sodium in your diet if you have certain health problems.

**Potassium:** Usually, you do not need to limit the amount of potassium in your diet. However, you may need to limit potassium if you have too much potassium in your blood.

Therefore, your diet needs to be individualized. Your diet should reflect what stages of kidney disease you are at, your treatment choice, whether or not you have diabetes or high cholesterol, and your blood work

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CKD is 12<sup>th</sup> leading cause of death and 17<sup>th</sup> cause of disability. Patients with CKD are at high risk for cardiovascular disease (CVD) and cerebro vascular disease (CBVD), and they are more likely to die of CVD than to develop end-stage renal failure. Moreover, patients with CVD often develop CKD during the course of their disease, which may go unrecognized.

“As the food so the mind , As the mind, so the man”  
Gita, Chapter4,Verse 39-40.

## PROBLEM STATEMENT

A study to assess the effectiveness of structured teaching programme on knowledge and practice of chronic renal failure client regarding diet therapy in nephrology unit of selected hospitals, Tumkur.

## OBJECTIVES OF THE STUDY

- To assess the pre-test knowledge regarding dietary management among patients with chronic renal failure
- To assess the pre-test practice regarding dietary management among patients chronic renal failure
- To evaluate the effectiveness of structured teaching programme regarding dietary management among patients with chronic renal failure
- To correlate the knowledge and practice regarding dietary management among patients with chronic renal failure
- To find the association between knowledge and practice of patients with selected demographic variables

## RESEARCH METHODOLOGY

### Research Approach :

Evaluation research approach (quantitative)

### Research design:

The research design adopted for this study is pre experimental One group pre test and post test research design.

### Setting of the study:

The study was conducted in selected hospitals of Tumkur, Karnataka. Shridevi medical college and research hospital Tumkur .

### Accessible population:

The accessible population for the study was patients with chronic renal failure.

### Sample:

The sample comprised of all the patients with chronic renal failure selected at hospital under the study area of Tumkur constitute the target population for the study.

**Sample size:-**

The Sample size of the study consists of 50 patients with chronic renal failure as a sample size for explicating the effectiveness of structured teaching programme on knowledge and practice of chronic renal failure client regarding diet among patients with chronic renal failure in selected Hospital of Tumkur.

**Sample Technique:-**

The purposive sampling technique was used.

**Inclusion Criteria :-**

Chronic renal failure patients

**Exclusion criteria:**

Chronic renal failure patients with other disease conditions.

**DATA COLLECTION PROCEDURE**

The data collection was scheduled from 1/07/2019 to 15/08/2019, before proceeding data collection, the investigator obtained the formal permission from Dr. M. R Hulinayakar, MBBS, MS to conduct the study.

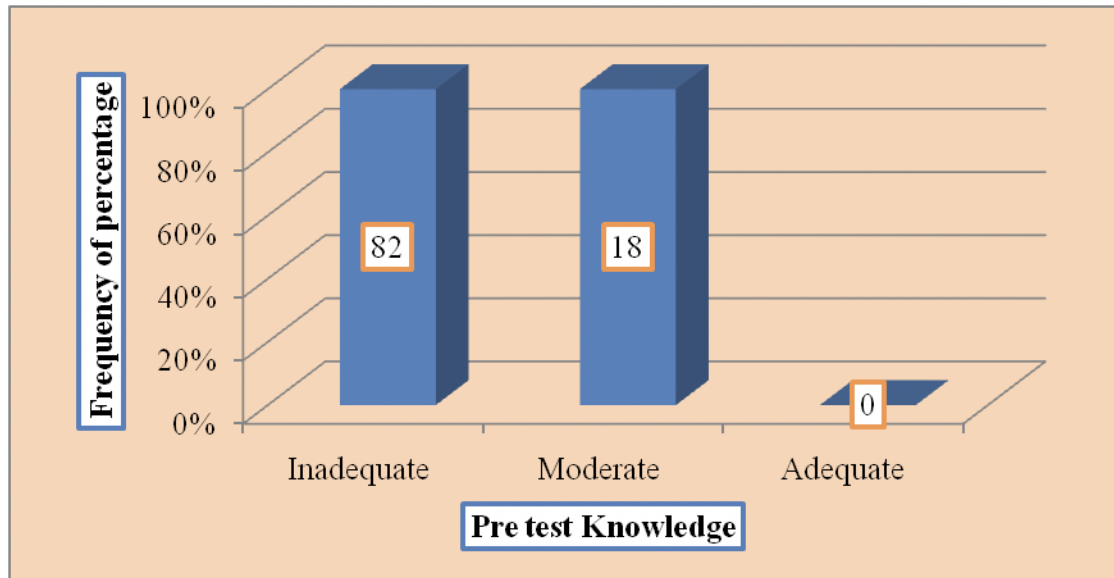
The investigator selected 50 chronic renal failure patients meeting inclusion criteria for data collection using purposive sampling technique. The investigator interacted through direct contact collectively at one time and explained the purpose of the study, the cooperation required and the anonymity assured before obtaining verbal and written consent. Attempt where made to establish good rapport to gain confidence and cooperation from the subject to facilitate the data collection process. Confidentiality was maintained during Data Collection. The data was collected using self-structured questionnaire. Pretest and STP was conducted on the same day. After an Interval of three days a post test was conducted for the same questionnaire schedule for evaluating the effectiveness of STP.

**MAJOR FINDINGS OF THE STUDY**

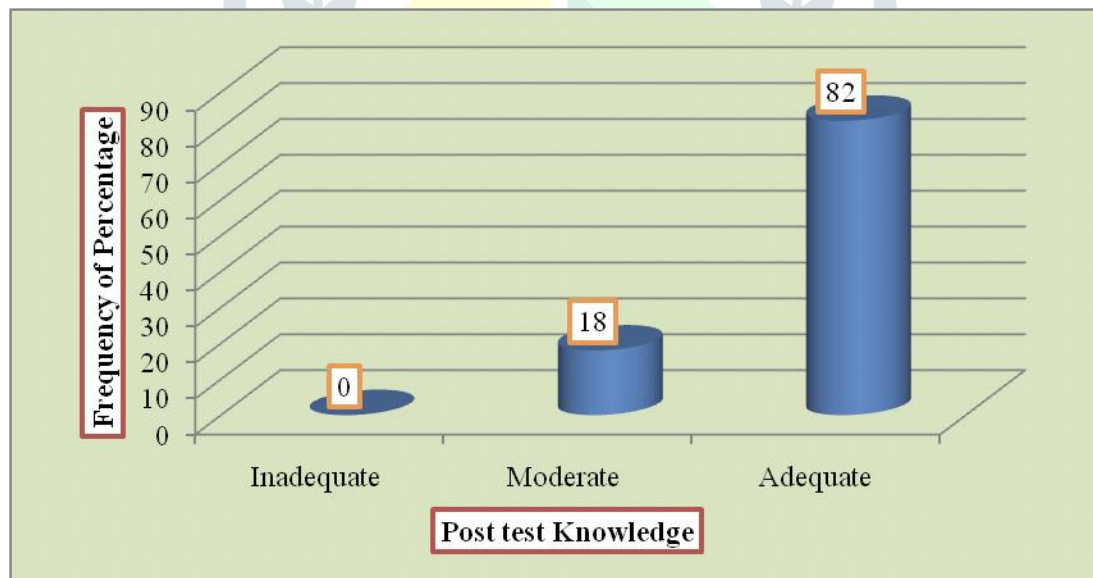
- Majority of the respondents age was  $\leq 40$  years i.e 42%, 36% were in 41-50 years and the remaining 22% were 51-60 and no one belongs to 61-70 years and above.
- Majority of the of the respondents are male 64% and the remaining 36% are female.
- Majority of the respondents were Hindus 44%, 36% were Muslims and 20% of them were belong to Christianity.
- Majority of the respondents have studied up to school level 36%, 30% are undergraduate, 18% were post graduate and 16% are illiterates.
- Majority of the respondents are private employees 56%, 24% are self employees, 20% are government employee and none of them were Unemployed.
- The family income of majority of the respondents was Rs  $\leq 10,000$  50% followed by 22% between Rs 20,001 - 30,000, 20% between Rs 10,001 – 20,000 and 8% was more than Rs  $\geq 30,001$ .

- All of the respondents are Married100%.

**Figure 1.1 : Classification of Respondents based on their Pre-test Knowledge scores regarding Diet therapy**



**Figure 1.2 : Classification of Respondents based on their Post-test Knowledge scores regarding Diet therapy.**



**Figure 2.1 : Classification of Respondents based on Pre-test Practice scores of respondents towards Diet therapy.**

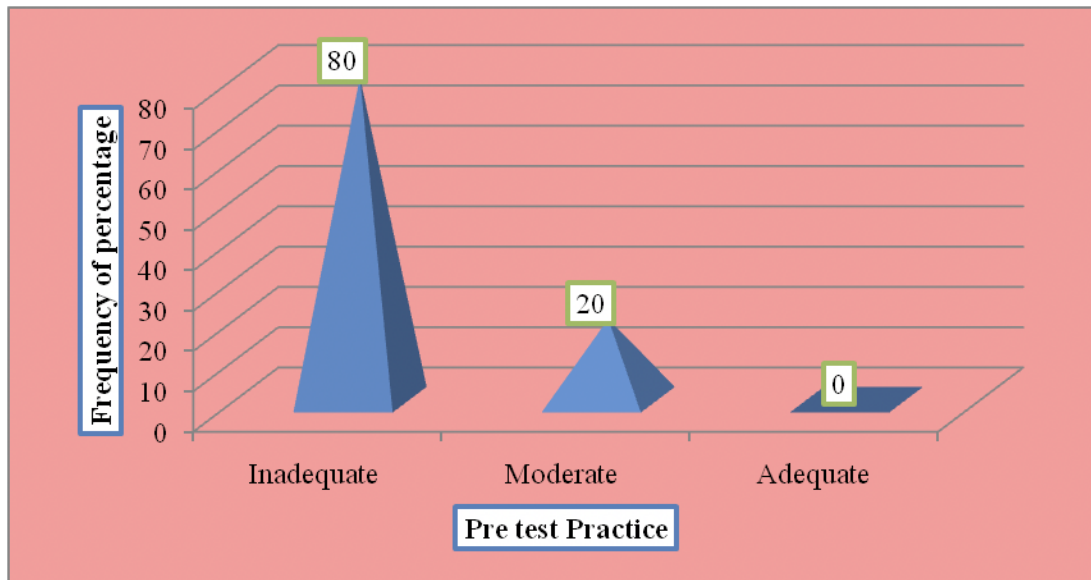
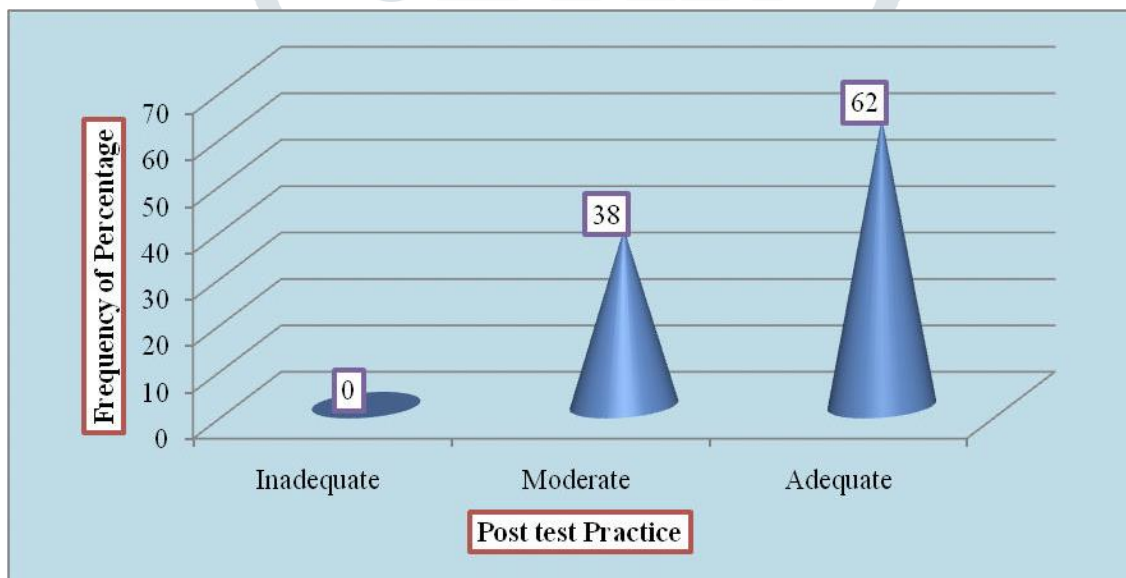


Figure 2.2 : Classification of Respondents based on Post-test Practice scores of respondents towards Diet therapy.



a) Comparison of knowledge scores and effectiveness of structured teaching programme.

**Table 1 : Mean, SD, Median, Mean% and CV of overall Pre test, Post test and enhanced Knowledge scores of respondents regarding Diet therapy and calculated 't' value.**

N=50

Aspects	Max. Score	Respondents Knowledge					Paired 't' test
		Mean	Mean (%)	Median	SD	CV	
Pre test	25	9.36	37.44	7	3.03	32.37	18.56*
Post test	25	19.96	79.76	22.5	2.47	12.68	
Enhancement	25	10.58	42.32	15.5	4.09	38.65	

Significant at 5% level,  $t(0.05,49df) = 2.02$ 

**a) Comparison of Practice scores and effectiveness of structured teaching programme.**

**TABLE 2 : Mean, SD, Median, Mean% and CV of overall Pre test, Post test and enhanced Practice scores of respondents towards Diet therapy and calculated 't' value.**

N=50

Aspects	Max. Score	Respondents Practice					Paired 't' test
		Mean	Mean (%)	Median	SD	CV	
Pre test	19	6.92	36.42	6	2.57	37.13	17.68*
Post test	19	19.96	79.76	22.5	2.57	37.13	
Enhancement	19	7.78	40.64	8.5	3.17	40.74	

Significant at 5% level,  $t(0.05,49df) = 2.02$

## ANALYSIS OF CORRELATION BETWEEN POST-TEST KNOWLEDGE AND PRACTICE SCORE OF RESPONDENTS.

**TABLE 3 : Mean, SD, Median, Mean% and CV of post-test knowledge and Practice score with coefficient of correlation with paired 't' test.**

N=50

Aspects	Max score	Response				Correlation coefficient 'r'	Paired 't' test
		Mean	SD	Mean (%)	CV		
Knowledge	25	19.96	2.47	79.76	12.68	0.011	20.34*
Practice	19	14.7	1.90	77.36	12.92		

\* Significant at 5% level,  $t(0.05, 48df) = 2.02$

The mean percentage of post-test knowledge score was 79.76% and the mean percentage of post-test Practice score was 77.36%. The calculated 'r' value is + 0.011. Hence there is a positive correlation between knowledge and Practice score of respondents. The calculated 't' value is 20.34 which is greater than 2.02 at 5% level. Therefore existing correlation is significant.

### Recommendations

- ❖ A similar study can be conducted on a large sample to generalize the study findings.
- ❖ Mass and individual education in regional languages to enlighten the population with renal failure can be organized at all the level of health facilities.
- ❖ Similar study can be conducted on students studying in various other health care professional at hospitals

### Conclusion

Chronic renal failure patients had poor knowledge about diet for chronic renal failure in the hospitals. Many people were not aware about diet of chronic renal failure and who were aware, had limited knowledge about the same. The vast majority of people didn't practice any measures to protect or prevent occurrence of renal failure through diet. Hence teaching program had been planned and implemented which is found to be effective in increasing knowledge about diet and among multiparous women in rural

References: 1. Basavanhappa B .T Medical surgical Nursing. 1<sup>st</sup> Edition, New Delhi : Jaypee Brothers Publication