## A situational analysis on heart disease in urban and rural Kenya

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## **Abstract:**

BACKGROUND: With the purpose of providing a new tool in the prevention of cardiovascular disease, which is fast becoming the first cause of morbidity and mortality in the World, the idea of utilizing young medicine students' motivation in the development of an educational strategy that permits the formation of resource through capacitation of the population in the diagnosis of populational risk and the implementation of programs presented itself, designed in educational than informative, intervening in little communities and evaluating the results to medium and long term. OBJECTIVE: To determine the level of knowledge about the heart, heart diseases, risk factors and perception of prevention in both the rural and urban populations in Kenya. MATERIALS AND METHODS: Medical students of the University of Nairobi, members of the heart friends around the world developed a questionnaire which they administered to a rural population in rural Kisii and non medical students of the Kenyatta University, Thika Kenya. All the responses were tabulated coded and analyzed by the Statistical Program of Social Sciences (SPSS) version 12. RESULTS: One hundred and fifty three respondents participated in the survey. Most (67%) of the respondents had a tertiary level of education. The level of education significantly determined the response of the participants. Most of the respondents knew about the hypertensive heart disease 88% compared to the other heart diseases, valvular heart disease 21.6%, congenital heart disease 19% and ischaemic heart disease 11.1%. 55.6% of the respondents know the risk factors for heart disease while 44.6% don't know. Two percent were unsure. Only 43.8% think heart disease can be prevented. 71.2% know that heart diseases can be treated successfully. 33.3% have a family member with heart disease. CONCLUSION: There is a lot of room in educating and empowering the community on the heart, heart diseases, risk factors for heart diseases and prevention of heart disease in both rural and urban Kenya. The designed program should take into consideration the level of education of the respondents.