



Attitudes and Behaviors toward Dyslipidemia Prevention

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Received: 05 December 2024

Published: 28 December 2024

DOI: <https://doi.org/10.5281/zenodo.14857799>

Abstract

This study evaluates the attitudes and behaviors of postal employees toward dyslipidemia prevention, focusing on their willingness to adopt lifestyle changes. It identifies the gaps between positive attitudes and actual behaviors, emphasizing the need for workplace-based interventions.

Introduction

Dyslipidemia, a significant risk factor for cardiovascular diseases, requires comprehensive prevention strategies. Behavioral modifications such as adopting a healthy diet, regular physical activity, smoking cessation, and limiting alcohol consumption are proven to manage this condition effectively. Despite awareness, the transition from positive attitudes to actionable behaviors remains a challenge. This article examines the attitudes and behaviors of postal employees, a demographic exposed to occupational stress and sedentary work environments.

Methodology

- **Study Design:** A cross-sectional survey conducted among postal employees.
- **Participants:** 508 employees aged 40–60 years.
- **Assessment Tools:**
 - Attitudes: Assessed using a 5-point Likert scale, measuring willingness to adopt lifestyle changes.
 - Behaviors: Self-reported practices on diet, exercise, smoking, and alcohol consumption.
- **Data Analysis:** Statistical comparisons by demographics (age, gender).

Results**1. Attitudes Toward Preventive Behaviors:**

- 89.1% expressed a willingness to modify unhealthy lifestyles.
- 80.2% agreed on the need to take prescribed medication if diagnosed.
- 1.2% felt no changes were necessary despite risks.

2. Self-Reported Behaviors:

- Physical Activity: Only 67.1% engaged in regular exercise.
- Dietary Changes: 59.8% followed a healthy diet, including fruits and vegetables.
- Alcohol Limitation: 24.6% reported limiting alcohol intake.
- Smoking: 65.1% reported being non-smokers, but 27.4% admitted difficulty quitting.

3. Behavioral Discrepancies by Demographic:

- Women were more likely to engage in healthy eating (72%) than men (48%).
- Younger employees (<50 years) showed greater adherence to exercise routines.

Tables and Figures

Attitudes Toward Preventive Measures	Percentage (%)
Willing to change unhealthy lifestyle	89.1
Willing to take prescribed medication	80.2
No changes necessary	1.2

Preventive Behaviors	Percentage (%)
Engaged in regular physical activity	67.1
Followed a healthy diet	59.8
Limited alcohol consumption	24.6
Non-smokers	65.1
Struggled to quit smoking	27.4

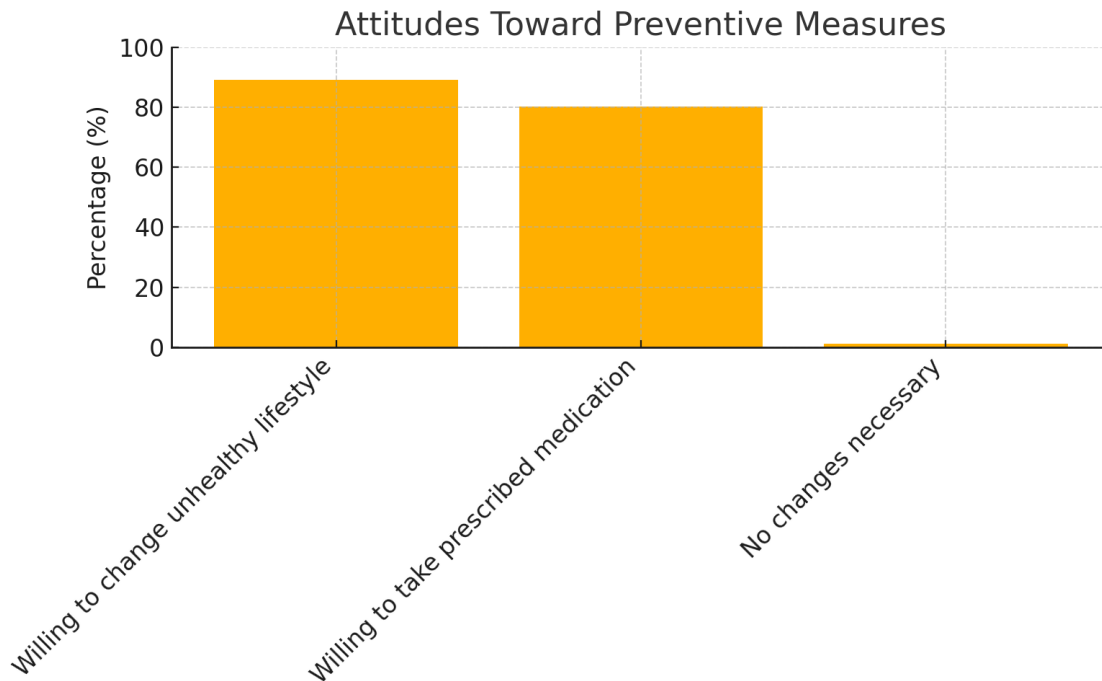


Figure 1

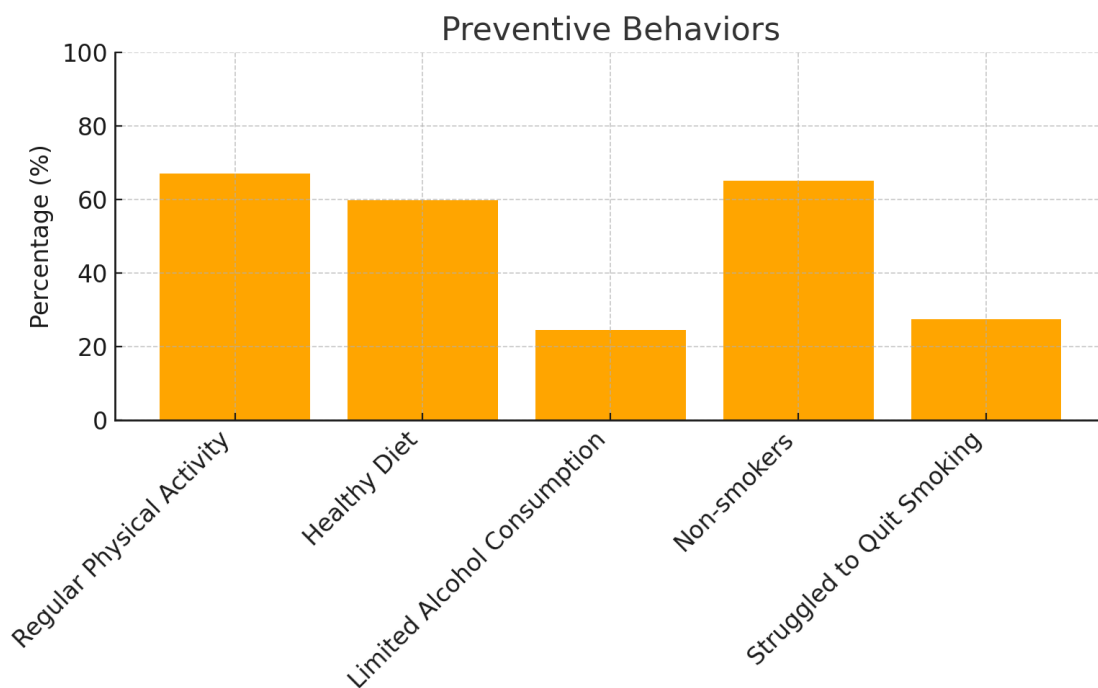


Figure 2

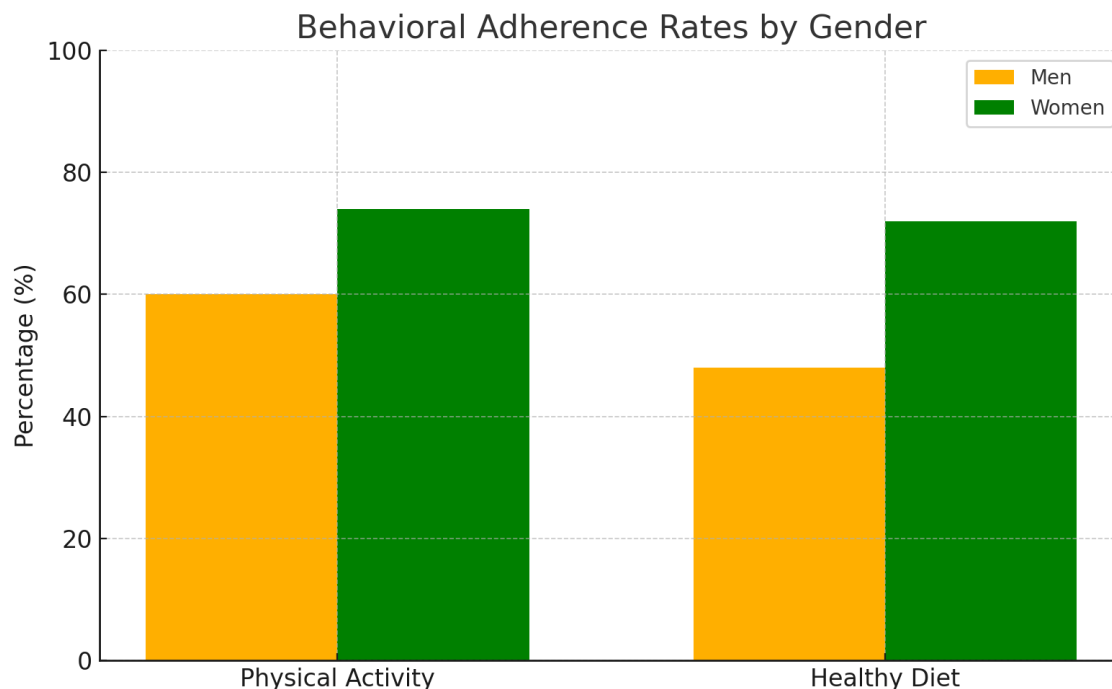


Figure 3: Behavioral Adherence Rates by Gender

- **Physical activity: Men (60%), Women (74%)**
- **Healthy diet: Men (48%), Women (72%)**

Discussion

This study highlights a discrepancy between positive attitudes and preventive behaviors. Although most employees recognize the importance of lifestyle changes, behavioral adherence remains suboptimal. Key barriers include:

- **Workplace Stress:** High workloads may hinder regular physical activity and healthy eating habits.
 - **Access to Resources:** Limited availability of wellness programs or counseling services in workplace settings.
- To bridge the gap, tailored interventions must address these barriers. Workplace wellness programs, nutritional counseling, and stress management workshops can play a pivotal role.

Conclusion

While postal employees exhibit positive attitudes toward dyslipidemia prevention, gaps in behavioral adherence are evident. Workplace interventions should focus on:

1. Addressing workplace stress through flexible work hours and mental health resources.
2. Enhancing access to fitness and dietary counseling programs.
3. Providing smoking cessation support and stress-relief workshops.

Implementing these measures will promote sustainable behavior changes and mitigate dyslipidemia risks effectively.

References

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