Knowledge and Awareness of Dyslipidemia among Postal Employees

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Abstract

This study evaluates the knowledge and awareness levels regarding dyslipidemia and its associated risk factors among postal employees. By identifying gaps in health education and awareness, this research aims to highlight areas for targeted health interventions. Findings show a high level of general awareness (94.7%) among employees but reveal significant gaps in knowledge about preventive measures, particularly the role of smoking cessation in reducing risks.

Introduction

Dyslipidemia is a critical public health concern due to its strong association with cardiovascular diseases. Despite medical advancements, the prevalence of this condition continues to rise, partly due to a lack of public knowledge about preventive measures. Postal employees, who often experience occupational stress and sedentary work conditions, are particularly vulnerable. This study assesses their awareness and knowledge of dyslipidemia, focusing on causes, symptoms, and prevention.

Methodology

The study was conducted through structured questionnaires distributed to 508 postal employees aged 40–60 years. The questionnaire covered:

- Causes and symptoms of dyslipidemia.
- Awareness of risk factors, such as dietary habits and physical inactivity.
- Preventive measures, including lifestyle changes and medical interventions.

Responses were categorized into two groups:

- Aware: Participants who demonstrated knowledge of the questions.
- Unaware: Participants who lacked sufficient understanding.

Data analysis was performed to determine trends and gaps in knowledge across demographic subgroups, including gender and age.

Results

General Awareness:

- 94.7% of participants had heard about dyslipidemia and understood it as a condition linked to abnormal blood lipid levels.

Knowledge of Risk Factors:

- 98% correctly identified high-fat diets as a leading risk factor.
- 96% recognized the role of physical inactivity.
- 88% acknowledged the contribution of genetic predisposition.

Understanding of Preventive Measures:

- 84.3% were aware of the importance of smoking cessation in managing dyslipidemia.
- 93.9% understood the benefits of a balanced diet in preventing the condition.
- 92.9% identified regular exercise as a preventive strategy.

Table 1: Awareness Levels of Dyslipidemia Risk Factors and Preventive Measures

Risk Factor/Preventive Measure	Awareness (%)
High-fat diet	98.0
Physical inactivity	96.0
Genetic predisposition	88.0
Smoking cessation	84.3
Balanced diet	93.9
Regular exercise	92.9

Demographic Insights:

- Males exhibited marginally higher awareness of risk factors compared to females.
- Employees aged 50–60 demonstrated greater knowledge about preventive measures than their younger counterparts.
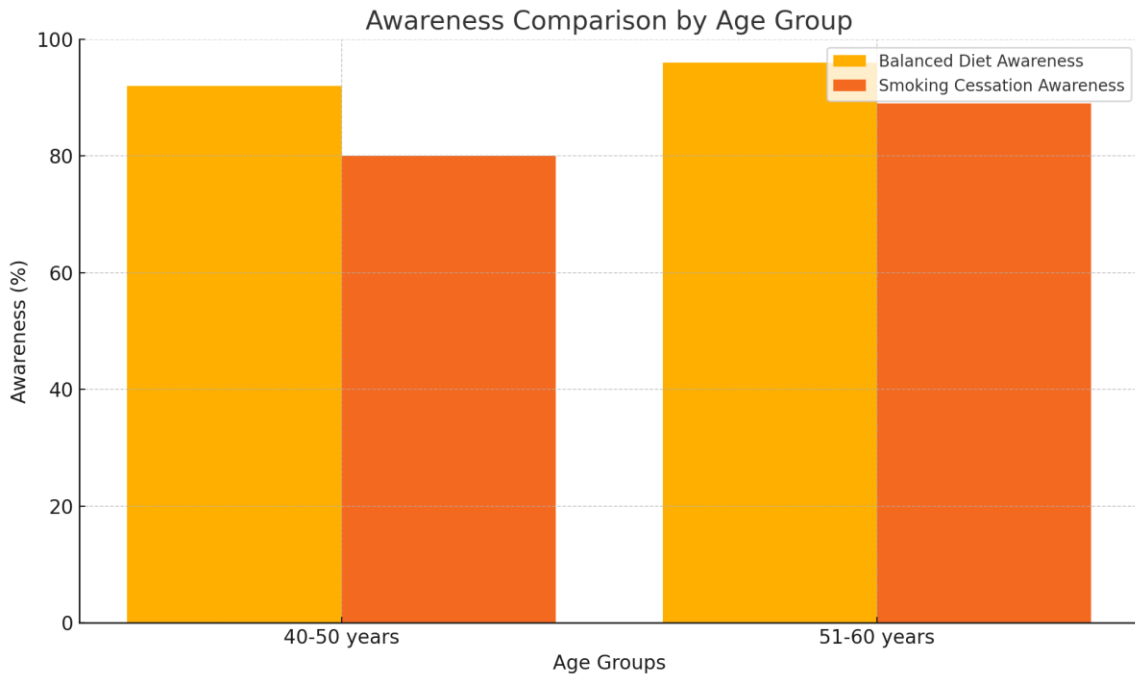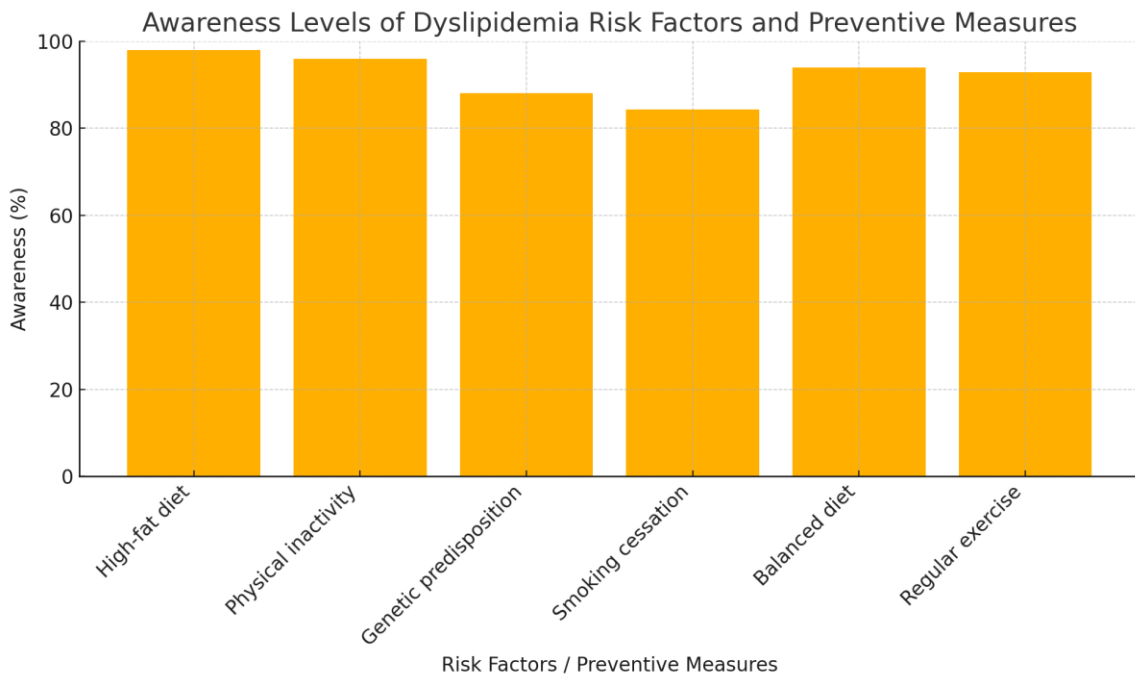
Figure 1

Figure 2

The graphs display insights into the awareness of dyslipidemia among employees:

1. Awareness Levels of Dyslipidemia Risk Factors and Preventive Measures:

  o   Shows the percentage of participants aware of various risk factors such as high-fat diets, physical inactivity, and preventive actions like regular exercise and smoking cessation.

2. Awareness Comparison by Age Group:

  o   Compares awareness of specific preventive measures like balanced diet and smoking cessation between different age groups (40–50 years and 51–60 years).

Awareness Of Dyslipidemia Preventive Measures

	Preventive Measure	Awareness (%)
1	Regular Exercise	88.6
2	Balanced Diet	93.8
3	Smoking Cessation	84.3
4	Routine Screening	91.0

Awareness By Age Group On Preventive Measures

	Age Group	Awareness (%) - Sm	Awareness (%) - Bal
1	40–50 years	85.0	94.2
2	51–60 years	83.5	93.5

Knowledge Levels On Dyslipidemia

	Category	Awareness (%)	
1	Overall Awareness	94.7	
2	Risk Factors Awareness	98.0	
3	Preventive Measures Awareness	84.3	

Awareness Of Dyslipidemia Risk Factors

	Risk Factor	Awareness (%)	
1	High-Fat Diet	98.0	
2	Physical Inactivity	96.0	
3	Smoking	84.3	
4	Genetics	20.6	

Discussion

While the general awareness levels were commendable, the findings revealed a gap in understanding key preventive measures, specifically the importance of smoking cessation. This gap suggests a need for workplace health programs tailored to address behavioral risks, such as smoking and sedentary lifestyles. Educational campaigns emphasizing the integration of lifestyle changes with routine medical check-ups can improve health outcomes.

Key Observations:

1. Strengths: High awareness of dietary and physical activity-related risk factors reflects existing health education efforts.

2. Gaps: Knowledge about the dangers of smoking and its link to dyslipidemia remains insufficient.

Tailored workplace interventions are critical for bridging these gaps and ensuring holistic awareness among employees.

Conclusion

Improving health literacy through targeted educational campaigns and workplace interventions is essential to promote preventive behaviors among postal employees. While overall awareness levels are high, addressing specific gaps in knowledge about smoking cessation and other lifestyle risks can significantly reduce the burden of dyslipidemia in this population. By prioritizing health education, organizations can foster a healthier workforce and mitigate the risks of chronic diseases.

References

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