Original Research Article

Morbidity pattern in patients attending an OPD clinic at a health subcenter in Srinagar, Jammu and Kashmir

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	International Archives of Integrated Medicine, Vol. 9, Issue 6, June, 2022.			
	Available online at <u>http://iaimjournal.com/</u>			
	ISSN: 2394-0026 (P)	ISSN: 2394-0034 (O)		
	Received on: 12-6-2022	Accepted on: 21-6-2022		
	Source of support: Nil	Conflict of interest: None declared.		
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How to cite this article: Shahroz Nabi, S. Muhammad Salim Khan, Inaamul Haq, Mariya Ourieshi,				

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Abstract

A retrospective descriptive study was carried out at subcenter Abidal, Srinagar to assess morbidity pattern among the population who visited this center. Secondary data was taken and analyzed using Microsoft excel. Results showed female population more often visited the center. Among the majority of recorded cases acute infections and fevers, hypertension, musculoskeletal disorders and anemia were a major contributing ailment.

Key words

Primary care, Subcenter, Morbidity.

Introduction

Subcenter is the peripheral part of health system and first line of contact between the community and the health service sector [1]. It is a place where people get primary treatment for common ailments and basic health care. In most places in rural areas a sub center caters to the important health needs of people. As per national standards, each subcenter caters to a population of 5000 in rural or urban areas and 3000 in hilly tribal population [1].

As part of nationwide Ayushman Bharat Program launch, many subcenters are destined to get upgraded into health and wellness centers [2]. Shahroz Nabi, S. Muhammad Salim Khan, Inaamul Haq, Mariya Qurieshi. Morbidity pattern in patients attending an OPD clinic at a health subcenter in Srinagar, Jammu and Kashmir. IAIM, 2022; 9(6): 1-4.

In Kashmir region of Union territory of Jammu and Kashmir, there are 878 subcenters in 10 districts [3]. District Srinagar is divided into three medical zones and one block namely Batmaloo, Zadibal, SR Gunj and Hazratbal respectively. Block Hazratbal is field practice area of Department of Community Medicine Government Medical College, Srinagar.

This retrospective study was carried out to observe morbidity pattern in the community in the Subcenter area, and to observe pattern among males and females and different age group for accessing primary health care services at sub center level.

Aim

To assess the morbidity pattern among patients attending subcenter Abidal, Srinagar district of Jammu and Kashmir for health care services.

Objective

To observe the pattern and distribution of diseases in patients receiving primary care at subcenter Abidal in Srinagar.

Materials and methods

A retrospective descriptive record-based study was carried out among patients attending OPD at Subcenter Abidal of Srinagar district in Jammu and Kashmir between May 2019 to March 2021. This Subcenter caters to a population of around 5600, its nearest PHC is UPHC Hazratbal which is 9 kms away. Data in OPD register records which was managed by doctors who organize OPD clinic at the subcenter, two days a week, 10 am to 4 pm with an average patient attendance of 9-10 was collected and analyzed. Information about reported cases of diseases was taken and analyzed by frequency tables and percentage.

Statistical analysis

Data was entered into excel and summarized as frequency and percentage.

Results

Number of OPD visits was as per **Table** – **1**. Frequency of visits according to gender and age was as per **Table** – **2**. Age-wise distribution of patients visiting in general was as per **Table** – **3**. Distribution of reported cases of diseases excluding ante natal visits was as per **Table** - **4**. Distribution of conditions/ ailments for which consultation was sought excluding ANC visits was as per **Table** – **5**. Distribution of frequency of OPD visits according to sign/ symptoms/ diagnosis/ check-up was as per **Table** – **6**.

Table - 1: Distribution of number of OPD visits.

Total number of recorded cases in OPD	437		
from May 2019- May 2020			
Total number of days doctor was present			
at subcenter for consultation			
Average number of patients seen each day			

<u>**Table - 2**</u>: Frequency of visits according to gender and age.

Sex	No of visits	%	
Male	106	24.25	
<5 years	11	10.4	
6-18 years	10	9.4	
>18 years	85	80.2	
Female	331	75.75	
<5 years	14	4.2	
6-18 years	39	11.8	
>18 years	278	84	

<u>**Table** – 3</u>: Age-wise distribution of patients visiting in general.

Age	No. of visits	%
Less than 5 years	25	5.7
6-18 years	49	11.3
Adult	363	83

<u>**Table** – 4</u>: Distribution of reported cases of diseases excluding ante natal visits.

Gender	No. of visits	%	
Male	106	24.2	
Female	331	75.8	

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Discussion

The results of the study showed that most of the patients who reported at subcentre were adults majority of them being females. and Communicable disease related reported cases were around 40% while 35% of reported cases were mainly non-communicable in nature. ARI and fever were reported among 20% of patients which were mainly non covid related. Hypertension, Migraine, Musculoskeletal disorders, Diabetes and Anemia together contributed to around 33% of all reported cases Urinary tract infections at the subcenter. contributed with around 5 % of total reported cases. Significant number of upper respiratory infections was common among the patients. There appeared to be a significant rise in number non-communicable diseases in this of community. Further research is needed to draw any conclusion from these details. This study indicated a trend that female population were utilizing subcenter services more than their opposite gender. This may be attributed to fact that the area has farming and fishing as major occupation and mostly young and middle-aged males are on work during subcenter working hours in this subcenter area. Similar studies are needed at different subcenters of Hazratbal block which may help in identifying morbidity pattern at various areas.

<u>**Table – 5**</u>: Distribution of conditions/ ailments for which consultation was sought excluding ANC visits.

Morbidity	No of visits	%	
Non communicable diseases	156	35.7	
Communicable diseases	183	41.8	
Injuries and dressings	16	3.7	
General checkups	30	6.9	
Others	52	11.9	
Total	437	100	

<u>**Table – 6**</u>: Distribution of frequency of OPD visits according to sign/ symptoms/ diagnosis/ check-up.

Common ailments	Frequency	% In	Frequency	% In	Total	Total
	males	males	in females	females	frequency	%
Hypertension	21	19.8	32	9.7	53	12.1
Acute respiratory illness	16	15	45	13.6	61	14
Fever	18	17	17	5.1	35	8
Musculoskeletal disorder	10	9.5	44	13.3	54	12.4
Headaches/ migraine	8	7.5	36	10.9	44	10
Skin infections/ eruptions	8	7.5	18	5.4	26	6
Menstrual problems	0	0	13	4	13	3
Urinary tract infection	3	2.9	20	6	23	5.4
Injuries/dressings	8	7.5	14	4.2	22	5
Anemia	3	2.9	52	15.7	55	12.5
T2dm/COPD	3	2.9	12	3.6	15	3.4
Others	8	7.5	28	8.5	36	8.2
Total	106	100	100	100	437	100

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Conclusion

From the findings of this study, a significant burden of communicable as well as noncommunicable disease is seen at our study area. ARI and fever remain most commonly reported cases at primary care levels. Hypertension, Musculoskeletal disorders and Anemia were also reported in significant numbers. These findings point to the increasing trend of noncommunicable disease pattern at subcenter levels. Similar studies at various other parts of country may help in identifying actual picture regarding disease burden at subcenter level.

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