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ORIGINAL RESEARCH

Assessment of back pain patients' knowledge and compliance about their disease at Azadi teaching hospital

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ABSTRACT

Background: Back discomfort can be quite unpleasant, but it is seldom serious. Back pain may afflict anybody, regardless of age, although it is more frequent in persons who are 35 to 55 years old.

Objectives: The aims of this study are to analyze the knowledge and compliance of back pain patients with their condition, as well as to determine the link between patient knowledge and various socio-demographic characteristics such as age and gender in Kirkuk city.

Methodology: descriptive research with a quantitative design was conducted for back pain patients at Azadi Teaching Hospital (rehabilitation unit) in Kirkuk from Jun 2, 2023 to February 6, 2024. A non-probability (purposive) test of (100) grown-up patients with back torment were conceded to the Azadi Instructing Healing center (restoration unit) in Kirkuk. The created survey was built for the reason of the think about and comprised of four parts: the primary portion included (6) things of statistic information, the moment portion contained (5) things of patients' restorative dates, the third portion contained (40) questions evaluating the information of back torment patients, and the fourth portion contained (10) questions around back torment compliance. Information were assembled through interviews. They were inspected utilizing clear measurable examination (recurrence and rate) and inferential measurable information investigation (chi-square T-test and ANOVA) with the factual bundle for social science (SPSS) adaptation (22).

Results: The study's findings revealed that the majority of back pain patients (32%) were between the ages of 35 and 44, with a female to male ratio of 57.0 percent for females and 43.5 percent for men.

Conclusion: The study find that back pain patients had insufficient knowledge about (general information, causes of back pain, signs and symptoms), as well as enough compliance with the item.

Keywords: Assessment, back pain, knowledge, compliance.

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INTRODUCTION

Musculoskeletal issues are common, and their affect is far reaching. They are the foremost predominant cause of extreme persistent torment and physical impedance, influencing hundreds of millions of people around the world. They have a major effect on the mental well-being of those influenced, as well as their family and caregivers Woolf and Akesson (2019). Musculoskeletal problems are a heterogeneous category in terms of pathophysiology, yet they are related physically and by their relationship with pain and reduced physical performance. They cover a wide range of illnesses, from acute onset and brief duration to chronic problems such as osteoarthritis, rheumatoid arthritis, osteoporosis, and lower back pain. Many of these disorders become more common as people become older, and many are influenced by lifestyle factors including obesity and a lack of physical activity (Meucci et al ,2015).

Low back pain (LBP) is the most common musculoskeletal condition affecting quality of life, especially if persistent. Although the term LBP defines a symptom, it is also used to represent a complex clinical condition that, depending on its duration and intensity, can have negative implications of disability and absence from work (Hartvigsen et al ,2018). The growing number of elderly people, as well as changes in lifestyle throughout the world, will place a significant strain on individuals and society alike. The United Nations and WHO recognized this by endorsing the Bone and Joint Decade 2000-2010 (Woolf and Pflege,2020). Moo back torment is the driving cause of action restriction and work nonappearance all through much of the world, forcing a tall financial burden on people, families, communities, industry, and governments. A few considers have been performed in Europe to assess the social and financial effect of low back torment(Jin et al ,2019). Within the United Kingdom, moo back torment was distinguished as the foremost common cause of inability in youthful grown-ups, with more than 100 million workdays misplaced per year. In Sweden, a study proposed that moo back torment accounted for a quadrupling of the number of work days misplaced from 7 million in 1980 to 28 million by 1987 (Brinjikji et al 2015). Relationship between low vitamin D levels and the severity of pain experienced by people with lower back pain. Therefore, since vitamin-D level screening may be an affordable, safe, and logical form of the indications for physicians, it must be taken into consideration in patients with lower (Mahmood Hussein et al ,2023).Back pain.

In any case, the creators propose that the presence of social stipend plans in Sweden may clarify for portion of the growth. Within the Joined together States, an assessed 149 million work days are missed each year since of moo back pain,6 with add up to costs evaluated to be US$ 100 to 200 billion per year (of which two-thirds is due to misplaced pay and poorer efficiency (Katz ,2020). The LBP has a significant association with multiple factors such as; age, marital status, weight level, hospital and the unit or department they work in (Mehammed-Ameen et al ,2019).

AIMS OF THE STUDY

The aims of this study are to analyze the knowledge and compliance of back pain patients with their condition, as well as to determine the link between patient knowledge and various socio-demographic characteristics such as age and gender in Kirkuk city.

METHODOLOGY

Prior to data collection, the Kirkuk Department of Health provided official administrative clearance for the project. A quantitative design (descriptive research) quantitative plan (clear research) was embraced for back sufferers from Jun 2, 2023 to February 6, 2024. To examine patients' knowledge and compliance with their condition in Kirkuk city. The study was carried out at Azadi Teaching Hospital in

Kirkuk City (rehabilitation and physiotherapy unit). Patients were interviewed in a rheumatology consultation clinic (rehabilitation and physiotherapy section), which sees a significant number of back torment patients from Kirkuk. A non-probability (purposive) test of (100) clearly analyzed with back distress, Grown-up patients treated at Kirkuk's Azadi Instructing Healing center were chosen.

A questionnaire using an interview method was created after a comprehensive evaluation of relevant literature. The questionnaire had a total of fifty items. All things were appraised on a three-point scale: yes (3), dubious (2), and no (1). The survey is composed of three parts:

Part One: Statistic Information This area included six components that centered on the client's statistic data, such as age, sexual orientation, residence, conjugal status, work, and level of instruction.

Part Two: Medical Data This section includes (5) items that focus on medical information such as (length of complaint, treatment duration, concurrent chronic condition, smoking, family history of back pain, and degree of related).

part three: Knowledge of Patients This section contains four domains: the first is general knowledge, which has ten sub-items, the second is causes of back pain, which has fourteen sub-items, the third is signs and symptoms, which has seven sub-items, and the fourth is prevention, which has nine sub-items.

The overall questions comprise 40 elements, The rating scale for knowledge employed a three-likert scale alternative, as takes after: (3) for I know, and (2) for dubious., (1) for I do not know and a 3-likert scale alternative were utilized within the rating scale for compliance, as (3) for Yes, (2) for Questionable, and (1) for No.,

Part four: Compliance of the patients this area contains (10) spaces. The questionnaire's substance legitimacy was evaluated by displaying it to a board of (9) specialists from different areas.

Data were obtained using a prepared questionnaire and an interview approach; the study ran from July 10 , 2023 to December 6 2023. The data was evaluated in numerous phases. First, descriptive statistics, such as frequency and percentages, were calculated. In the second phase, information is ready, organized, and entered into a computer record utilizing inferential measurements (chi-square test, T test, and anova). Data analysis is performed using Statistical Package for Social Science (SPSS) version (22) at a significance level of (P. value < 0.05).

RESULTS

Table (1): Demographic features of the research sample (No=100)

Variables		Frequency	Percentage
Age	15-24	2	2.0
	25-34	27	27.0
	35-44	32	32.0
	45-54	14	14.0
	55-64	11	11.0
	65-74	11	11.0
	75and more	3	3.0
	Total	**100**	**100.0**
Gender	Male	43	43.0
	Female	57	57.0
	Total	**100**	**100.0**
Home	Urban	70	70.0
	Rustic	30	30.0
	Total	**100**	**100.0**
Conjugal status	Single	31	31.0
	Hitched	61	61.0
	Separated	5	5.0
	Dowager	3	3.0
	Total	**100**	**100.0**
Work	Resigned	9	9.0
	Free work	43	43.0
	Utilize	38	38.0
	Housewife	9	9.0
	Workless	1	1.0
	Total	**100**	**100.0**
Instructive levels	Incapable to examined and compose	12	12.0
	examined and compose	24	24.0
	Essential school	25	25.0
	Middle school	25	25.0
	Auxiliary school	12	12.0
	Institution	2	2.0
	Total	**100**	**100.0**

Table 1 shows the sociodemographic property of the entire research group. The data suggest a significant percentage of patients between the ages of 35 and 44, accounting for 32%. Also, the data suggest that back discomfort is frequent in females, accounting for (57.0%). In terms of domicile, 70.0 percent of the patients lived in cities, the majority of the patients were married (61.0 percent), and 43.0% of the sample worked for free. In terms of instructive level, 25.0 percent of the cross section attended primary and intermediate schools.

Table (2): Cruel scores for common information questions with recurrence, extent, seriousness, and Chi-square

No	Common information	know		Uncertain		Don't know		MS	Seriousness
		F	%	F	%	F	%		
1	Back discomfort means pain in the spinal cord, muscles, and tendons.	34	34.0	22	22.0	44	44.0	1.96	MS
2	Pack pain handicaps most sufferers.	61	61.0	22	22.0	17	17.0	2.43	HS
3	Pack pain limits most patients' capacity to engage in personal activities.	51	51.0	25	25.0	24	24.0	2.26	MS
4	Pack pain is commonly experienced in the lumber vertebra and lower back.	22	22.0	22	22.0	56	56.0	1.60	LS
5	It might worsen patients' psychological well-being.	48	48.0	28	28.0	24	24.0	2.24	MS
6	Back discomfort is considered the major cause of sleeplessness.	38	38.0	35	35.0	27	27.0	2.11	MS
7	Back pain is a prevalent condition that affects all ages.	24	24.0	17	17.0	59	59.0	1.65	LS
8	Back discomfort causes decreased social communication.	21	21.0	48	48.0	31	31.0	1.90	MS
9	Back discomfort leads to decreased appetite.	23	23.0	57	57.0	20	20.0	2.30	MS
10	Back discomfort led to a long-term stay in bed.	59	59.0	30	30.0	11	11.0	2.48	HS

This table appears that the cruel score was low critical in things (4,7), tolerably critical in things (1,3,5,6,8,9), and exceedingly noteworthy in (2,10).

Table (3): Cruel of Scores for Causes of Back Torment Things, counting recurrence, extent, seriousness, and Chi-square.

No	Causes of Back pain	I know		Un certain		I don't know		MS	Severity
		F	%	F	%	F	%		
1	Impact on the Lumbar vertebra	20	20.0	57	57.0	23	23.0	1.97	MS
2	Narrowing of spinal cord	58	58.0	28	28.0	14	14.0	2.44	HS
3	Impaired muscles	23	23.0	64	64.0	13	13.0	2.1	MS
4	osteoarthritis of the lumber vertebra	14	14.0	36	36.0	50	50.0	1.64	LS
5	Disorder of the disk between vertebrae.	11	11.0	43	43.0	46	46.0	1.65	LS
6	Pelvic problems	53	53.0	30	30.0	17	17.0	2.36	MS
7	Osteoporosis in the back and obesity.	40	40.0	38	38.0	22	22.0	2.18	MS
8	Old age.	10	10.0	25	25.0	65	65.0	1.45	LS
9	Hereditary causes	8	8.0	29	29.0	63	63.0	1.45	LS
10	Diabetes mellitus	24	24.0	56	56.0	20	20.0	2.04	MS
11	Pregnancy	66	66.0	27	27.0	7	7.0	2.59	HS
12	Heavy work.	20	20.0	62	62.0	18	18.0	2.02	MS
13	Strength shock	10	10.0	35	35.0	55	55.0	1.55	LS
14	**Impact on the Lumbar vertebra**	**15**	**15.0**	**42**	**42.0**	**43**	**43.0**	**1.72**	MS

F=frequency % = percentage, MS=mean of score, Obs.X2 = 407.365, DF = 26, Crit. X2 = 38.89

This table appears that the cruel score was moo critical in things (4,5,8,9,13), tolerably noteworthy in things (1,3,6,7,10,12,14), and tall critical (2,11).

Table (4): One-way investigation of change to compare the contrasts in common data, causes, signs and indications, back torment anticipation, persistent compliance, and age.

Categories	S.O.V	S S	M S	F. Obs
Common information	Between Bunch	210.012	35.002	3.74
	Inside bunch	868.948	9.342	S
	Total	**1078.960**		
Causes	Between Groups	335.442	55.907	3.6
	Within Groups	1469.998	15.312	S
	Total	**1805.440**		
Signs and Symptoms	Between Groups	275.22	45.872	11.681
	Within Groups	377.022	3.927	S
	Total	**652.240**		
prevention of back pain	Between Groups	92.442	53.721	3.79
	Within Groups	559.798	14.165	S
	Total	**652.240**		
Compliance	Between Groups	92.442	23.110	3.922
	Within Groups	559.798	5.893	S
	Total	**652.240**		

S.O.V= Source of variance, S S = Sum of square, MS= Mean squar, F critical = 2.99, Degree of freedom = 99.

Table (4) The table indicates significant differences in general information, causes, signs and symptoms, back pain prevention, patient compliance, and age at P esteemed < 0.05.

DISCUSSION:

The current study found that a substantial number of patients (32%) were aged 35 to 44 years. According to Ehrlich and Burdorf's (2019) research, back discomfort is frequent in those under the age of 35 and 46 (48%). Prado and others (2018) said that back pain grows and peaks between the ages of 35 and 55. The data also suggest that back discomfort is frequent among females, accounting for 57.0%.

Ogunbode and other researchers discovered in their investigation There were 288 (59.4%) females and 197 (40.6%) male responses. The results suggest that (70.0%) were residing in urban areas. Our results can be explained by the fact that the Azadi Teaching Hospital receives a considerable number of patients from the urban region. Ehrlich and Khaltaev (2019) illustrate the most recent LBP information procured from distributions composed in English within the territory of China demonstrated that the 1-year predominance of LBP in rustic working populaces was 64%. Furthermore, the study found that the majority of the patients were married, accounting for 61.0 percent of the total. This finding is explained by our country's tradition of early marriage. Feldman and colleagues (2001) discovered that females had a greater prevalence of back pain rates than males. The results suggest that 43.0% of the sample was free work.

Barrero et al. (2006) discovered that 35-37% of laborers detailed back distress within the month going before their study, with a high frequency observed among those aged 49-59 years. Furthermore, the results suggest that (25.0%) of the sample were elementary and secondary school Kwon et al. (2006). People with a college degree or more prominent levels of instruction had a diminished hazard of creating LBP than those with as it were a tall school instruction or college dropouts.

Table (2) Cruel of Scores for Common Data Things with Recurrence, Rate, Seriousness, and Chi-square and appear that the cruel of score was moo noteworthy in things (4, The pain is most common in the lumber vertebra and in the lower side of the back, and item 7 Back pain is a common disease impact in

all age), direct critical in things (1,3,5,6,8,9), and tall noteworthy in (2,10). According to the research on the epidemiology of LBP in children and adolescents, prevalence rates rise with age, and girls have greater prevalence rates than boys (Skoffer, 2007).

People with chronic LBP have significant social, emotional, physical, and vocational difficulties. LBP has a mental impact of anxiety, sadness, and insomnia, as well as a physical impact of impaired physical performance and decline in health condition.1 LBP leads in an inadequacy to carry out social exercises and impedes the capability to embrace word related assignments since it for the most part influences people of working age (Tavafian et al ,2007)

Table (3) Cruel of Scores for Causes of Back Torment Things with recurrence, extent, seriousness, and Chi-square, and illustrate the cruel of score was moo critical in things (4,5,8,9,13). Items are moderately significant (1, 3, 6, 7, 10, 12, 14) and highly significant (2, 11).

Jin and others (2016) As already specified, there are a few common other potential sources and causes of back torment, counting spinal circle herniation and degenerative circle infection or isthmic spondylolisthesis, osteoarthritis (degenerative joint infection) and lumbar spinal stenosis, injury, cancer, disease, breaks, and incendiary illness. Concurring to Hollingworth and others (2020), generally 5-15% of moo back torment may be related to a specific cause such as osteoporotic break, threat, or disease. Within the remaining 85-95% of occurrences, the precise etiology of moo back torment is obscure.

Woolf and Pfleger(2003) A few thinks about have clearly demonstrated that patients with a tall BMI are more helpless to LBP. A meta-analysis of 33 ponders found that corpulence was related with an expanded predominance of LBP within the past 12 months. (pooled chances proportion, OR = 1.33 (95% CI: 1.14-1.54).

CONCLUSION

1. The majority of back pain patients (32%) were between 35 and 44 years old, with a female to male ratio of (57.0%) and (43.5%), respectively. The majority of back pain patients (70%) lived in metropolitan areas.
2. The majority of back pain patients (70.0%) were married, and 43.0% of the sample worked for free. In terms of instructive level (44%) of the samples, 25.0% were in elementary and secondary school.
3. The majority of back pain patients (44.0%) have had the condition for less than a year and (50.0%) have had therapy during the past 2-11 months.
4. Back pain patients were mostly non-smokers (75.0%), had heart disease (33.5%), and no family history of back pain (56%).
5. The study found that back pain patients lacked knowledge on general information, causes of back pain, and signs and symptoms. Additionally, there was evidence of good compliance.
6. The results demonstrate a highly substantial relationship between patients' knowledge, compliance, and their age.
7. The researchers recommended designed an instructive programs to extend individuals information almost back torment and Notices and a few wellbeing instruction activities on back torment ought to be advanced by means of mass media.

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