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KNOWLEDGE AND AWARENESS ABOUT THE SYMPTOMS AND CAUSE OF DYSPEPSIA

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ABSTRACT

Dyspepsia is defined as indigestion. It is a recurrent pain or discomfort in the upper abdomen. It is not a disease but is a group of symptoms, which includes abdominal pain, nausea, vomiting, bloating, etc. Causes of dyspepsia can be because of intake of excessive food, intake of pills on an empty stomach, consuming spicy food, etc. There is no exact solution found to solve this problem but a solution to reduce the symptoms has been found. So the main aim of this study is to assess the awareness about the cause and symptoms of dyspepsia. Questionnaire was prepared and administered to 100 participants through survey monkeys – an online survey. The study participants included people belonging to the 18 -23 age group. Data was collected from the link and was represented in the Bar chart form. 25% were aware of dyspepsia, 60% consume spicy food often which is a major cause of dyspepsia. 54% of them consume a healthy diet which is just half the population and healthy intake must include carbohydrates, fats, protein, vitamin, mineral, etc. This study concludes that not many people are aware of dyspepsia and its causes but it is important to gain

knowledge on this because it is a common problem in the present generation as there is not much involvement in physical activities because of improvement in technologies.

INTRODUCTION

Dyspepsia is defined as persistent or recurrent pain or discomfort in the upper abdomen. It is basically poor digestion or indigestion (Wallander *et al.*, 2007). One of the common functional disorders is functional dyspepsia, which affects gastrointestinal tract (Madischet *et al.*, 2018). For minimum 3 months to 6 months maximum symptoms are present in functional dyspepsia. Dyspepsia is a common problem which is diagnosed by primary care physicians and gastroenterologists (Harmon and Peura, 2010). The symptoms of dyspepsia include peptic ulcer disease, gastro esophageal reflux disease and malignancy (Jones, 2003). People with alarm symptoms of dyspepsia like melena or anorexia can be diagnosed by endoscopy (Randall, 2014).

Eradication of helicobacter pylori can help us in managing dyspepsia (Koduru, Irani and Quigley, 2018). In order to distinguish between functional dyspepsia and reflux disease, diagnostic testing such as PH impedance manometry of the distal esophagus is useful (Yarandi and Christie, 2013). Intensity and consistency of symptoms determines the severity of the problem. By eating small portions of food, frequent meals and avoiding food with high fat content can reduce the symptoms (Jaber *et al.*, 2016). Causes of dyspepsia can include intake of excess food, mainly spicy and junk food, taking pills on empty stomachs, frequent meals, etc. Dyspepsia can be classified into organic, functional or non ulcer, drug related dyspepsia (Moayyedi, 2012). Ulcer is one of the major symptoms of dyspepsia which is less common in adolescents when compared to adults and also the prevalence of ulcer differs with respect to age and location. Ulcers are mainly caused due to bacterium helicobacter pylori which also causes dyspepsia (Jagadesan *et al.*, 2014). By changing lifestyle by modification of diet, exercise habits and other such factors may help in preventing dyspepsia. External factors such as obesity, lack of physical exercise due to technology improvement and tobacco consumption also majorly affect gastrointestinal tract (Balaji, Vishnu Priya and Gayathri, 2017). A healthy diet is the one that contains carbohydrates, fats, protein, vitamins and minerals. So these intake will help in preventing obesity and in turn various chronic diseases (Uma *et al.*, 2018).

There has been no exact solution found to cure dyspepsia completely, only solution has been found to reduce the symptoms like by changing lifestyle and eradication of helicobacter pylori, etc. The aim of the study is to create awareness and knowledge towards symptoms and cause of dyspepsia.

MATERIALS AND METHOD

Self-administered questionnaire was designed based on awareness. The questionnaire was distributed through an online survey monkey link. The study population included people belonging to the 18-23 age group. Data was collected from the link and was represented in the bar chart form. The participants were explained about the purpose of study in detail. The questions were carefully studied and the participants marked the corresponding answers. The data was collected and statistically analyzed.

RESULT AND DISCUSSION

In the present study, a minority 25% of them responded were aware of dyspepsia which shows that more awareness must be created to gain knowledge on dyspepsia as it is a common problem among teenagers [Figure 1]. 41% of them feel a sensation of abdominal fullness without visible bloating which is one of the symptoms of dyspepsia [Figure 2]. 31% of their stomach gets upset often which can be caused due to intake of unhealthy food, skipping meals, etc [Figure 3]. 42% feel full after eating only a small amount of food [Figure 4]. 54% of them consume a healthy diet which is just half the population and healthy intake must include carbohydrates, fats, protein, vitamin, mineral, etc [Figure 5]. 14% of them take meals more than 4 times a day which is very less population and this does not majorly influence the cause of dyspepsia [Figure 6]. 60% consume spicy food often which is the major cause of dyspepsia [Figure 7]. 52% of them sleep for a minimum of 7hrs [Figure 8]. 45% of them have loss of appetite, which eventually causes ulcer, which is also a major problem [Figure 9]. 58% of them consume junk food often and this habit is very common among teenagers and also is a major cause for dyspepsia [Figure 10].

In other research, it is found that 30 to 40% experience symptoms of upper abdominal pain or discomfort (Talley, 2002). Functional dyspepsia is a common functional disorder with prevalence of 10 to 20% (Agreus, 2002). Gastric cancers are a serious cause but account for fewer than 2% (Encket *al.*, 2017). 37% were diagnosed with dyspepsia symptoms (Dent, 2002). 31% of them Consume restaurant food often. only 18% were aware of the terms related to GI disorder (Bytzer, 2002). When we compare with the previous research, in the current study 25% were aware of the term dyspepsia whereas only 18% were aware in the previous study. Similarly 58% consume junk food whereas 31% consume restaurant food often. It is important to know about dyspepsia as it is a major problem of the present generation and also avoiding junk and spicy food can help in eradicating dyspepsia as it is a major cause of it. These were the following results obtained through this survey.

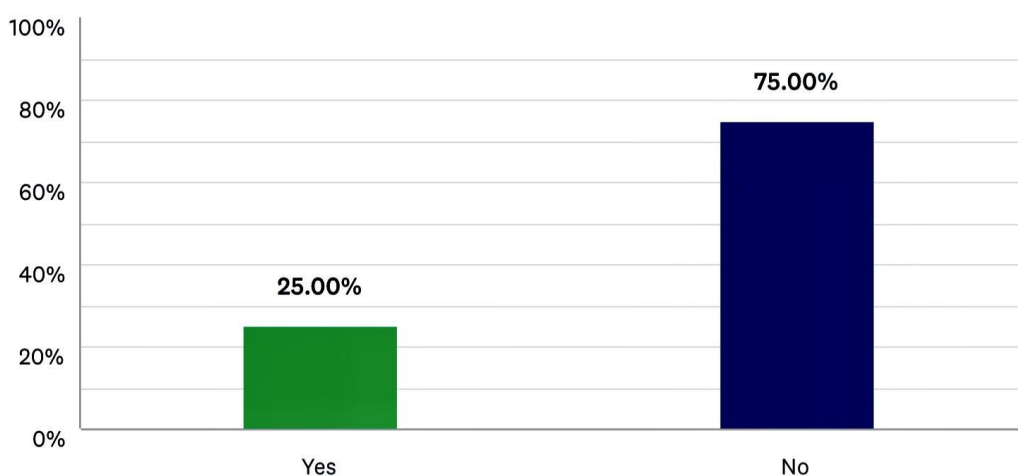


Figure 1: Bar chart represents the awareness of dyspepsia which shows response for the question on whether they were aware of dyspepsia. X axis represents the options provided (yes or no) and Y axis represents the

percentage of participants. 25% (Green) responded 'yes' and 75% (Blue) responded 'no'.

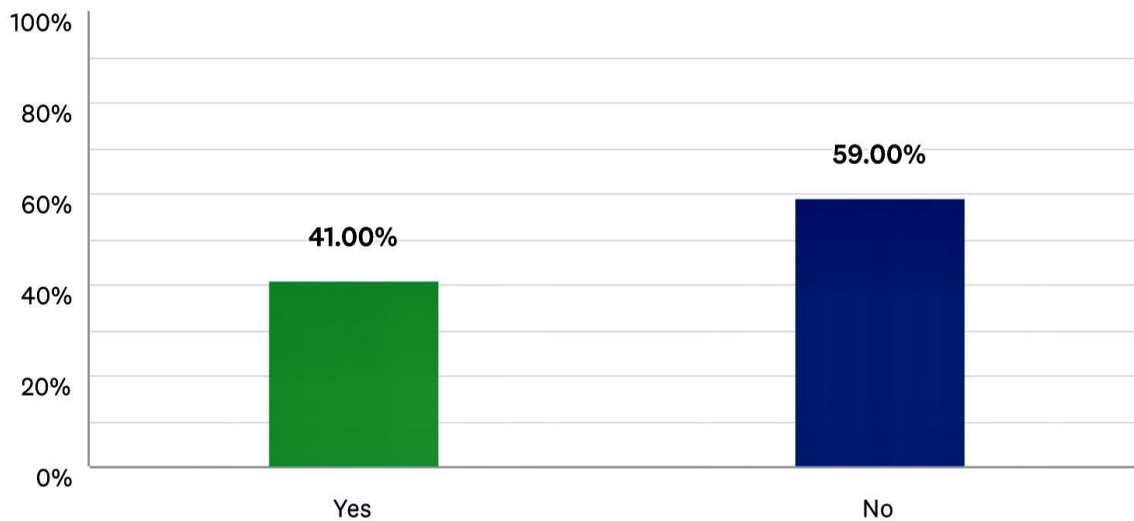


Figure 2: Bar chart representing the opinion on feeling the sensation of abdominal fullness without visible bloating which shows response for the question on whether they feel the sensation of abdominal fullness without visible bloating. X axis represents the options provided (yes or no) and Y axis represents the percentage of participants. 41% (Green) responded 'yes' and 59% (Blue) responded 'no'.

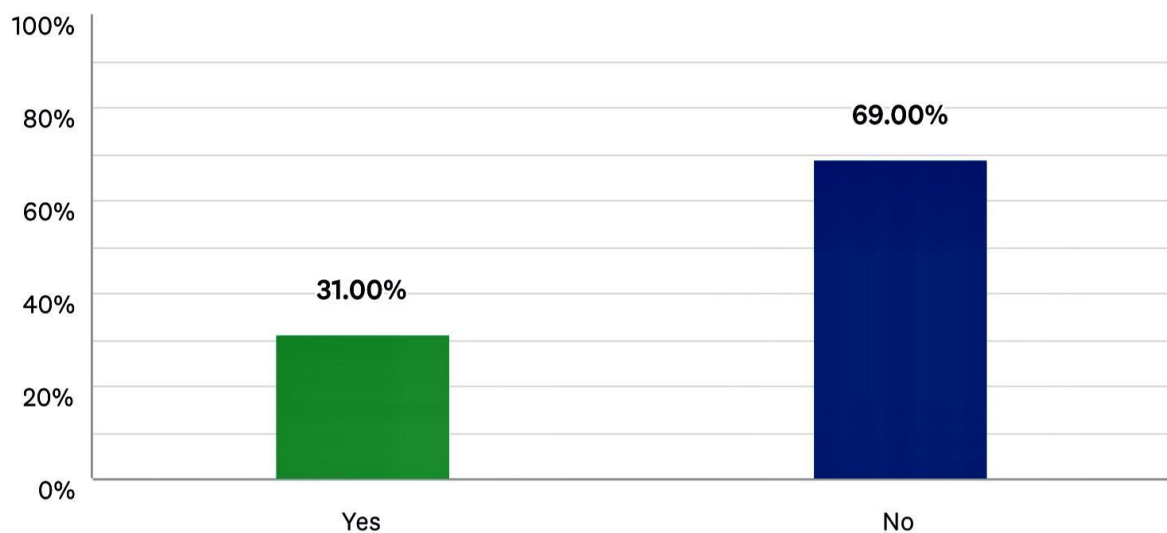


Figure 3: Bar chart representing the opinion on stomach getting upset often which shows response for the question on whether their stomach gets upset often. X axis represents the options provided (yes or no) and Y axis represents the percentage of participants. 31% (Green) responded 'yes' and 69% (Blue) responded 'no'.

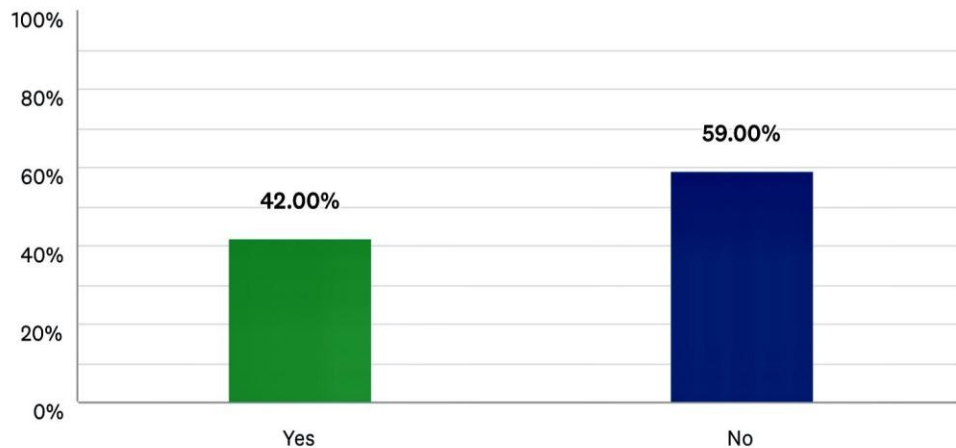


Figure 4: Bar chart representing the opinion on feeling full after eating only a small amount of food which shows response for the question on whether they feel full after eating only a small amount of food. X axis represents the options provided (yes or no) and Y axis represents the percentage of participants. 42% (Green) responded 'yes' and 58% (Blue) responded 'no'.

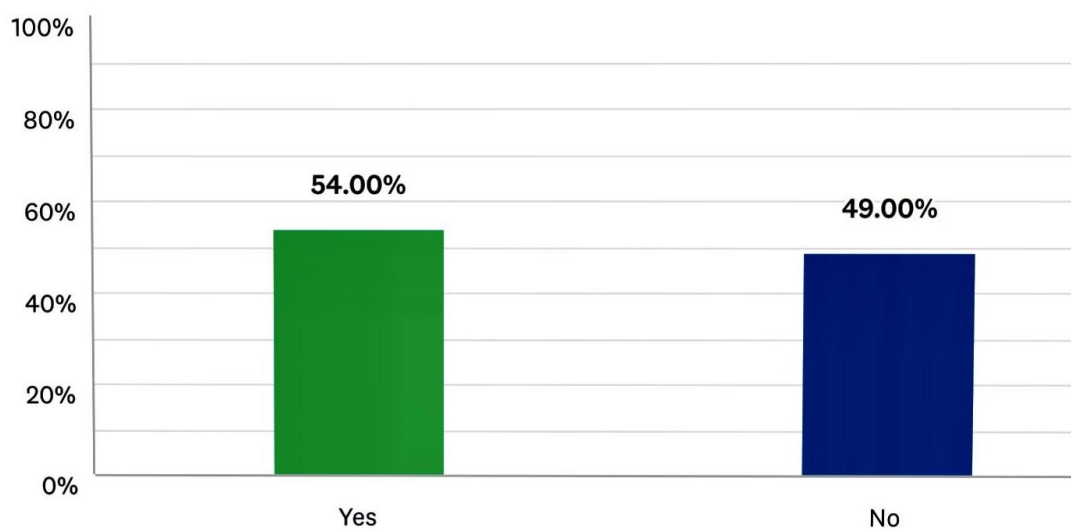


Figure 5: Bar chart representing the opinion on consumption of a healthy diet which shows response for the question on whether they consume a healthy diet. X axis represents the options provided (yes or no) and Y axis represents the percentage of participants. 54% (Green) responded 'yes' and 46% (Blue) responded 'no'.

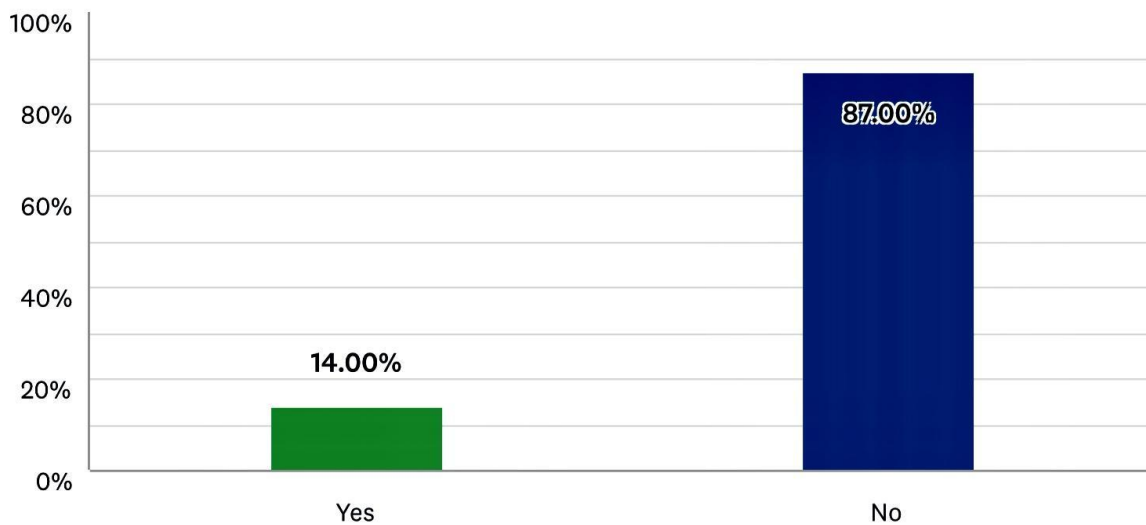
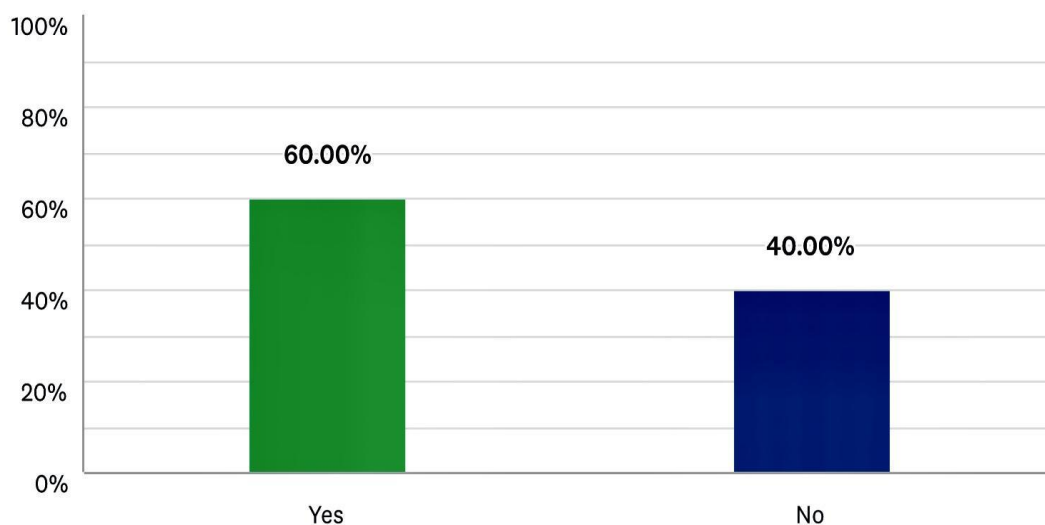


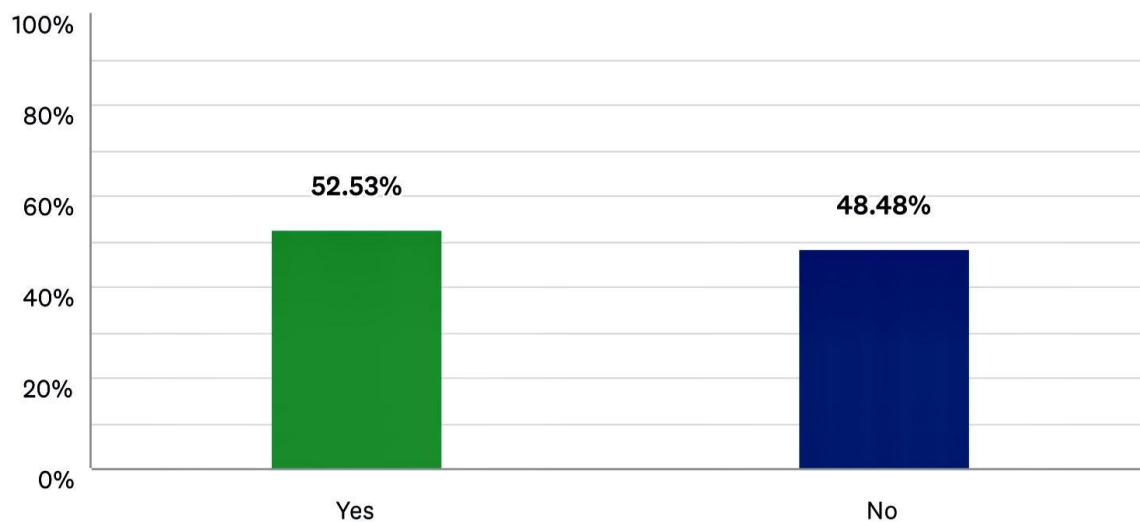
Figure 6: Bar chart representing the opinion on consumption of meals more than 4 times a day which shows response for the question on whether they consume meals more than 4 times a day. X axis represents the options provided (yes or no) and Y axis represents the percentage of participants. 14% (Green) responded ‘yes’ and 87% (Blue) responded ‘no’.



yes’ and 86% (Blue) responded ‘no’.

Figure 7: Bar chart representing the opinion on consumption of spicy food often which shows response for the question on whether they consume spicy food often. X axis represents the options provided (yes or no) and Y axis represents the percentage of participants. 60% (Green) responded ‘yes’ and 40% (Blue) responded ‘no’.

Figure 8: Bar chart representing the opinion on sleeping for a minimum of 7hrs which shows response for the question on whether they sleep for a



minimum of 7hrs. X axis represents the options provided (yes or no) and Y axis represents the percentage of participants. 52.53% (Green) responded 'yes' and 48% (Blue) responded 'no'.

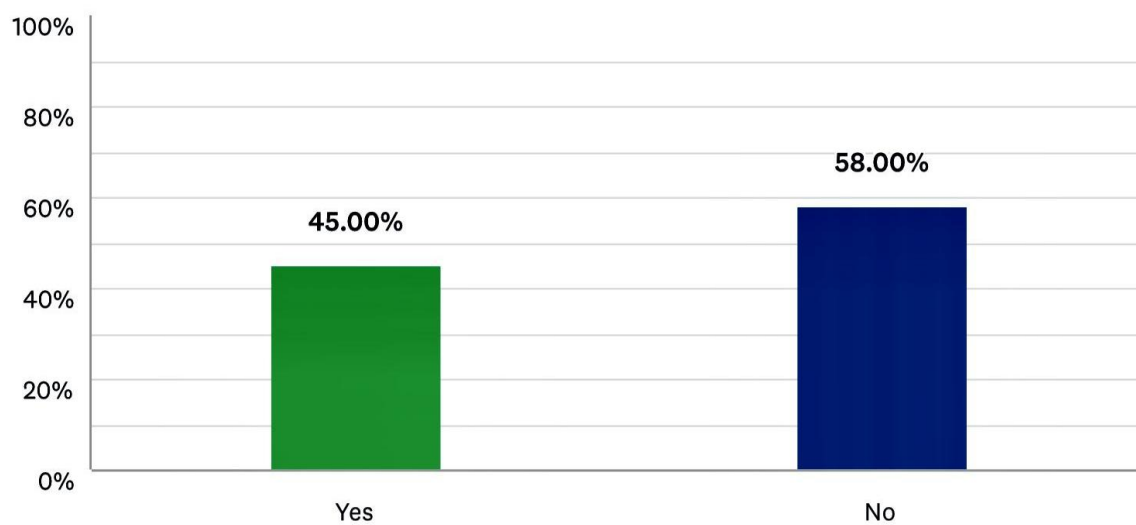


Figure 9: Bar chart representing the opinion on loss of appetite which shows response for the question on whether they have loss of appetite. X axis represents the options provided (yes or no) and Y axis represents the percentage of participants. 45% (Green) responded 'yes' and 55% (Blue) responded 'no'.

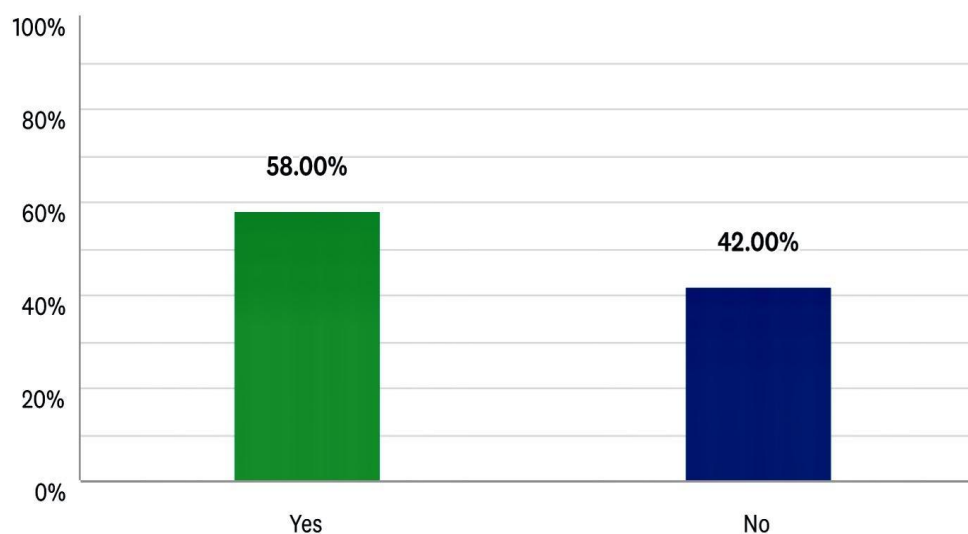


Figure 10: Bar chart representing the opinion on consumption of junk food often which shows response for the question on whether they consume junk food often. X axis represents the options provided (yes or no) and Y axis represents the percentage of participants. 58% (Green) responded 'yes' and 42% (Blue) responded 'no'.

CONCLUSION

This study concludes that only 25% are aware of dyspepsia. Since dyspepsia is a major problem in the present generation, as the lifestyles have changed, mainly food habits, which majorly includes spicy and junk food. Also there is not much involvement in physical activities because of technology improvement, which can also eventually lead to indigestion, more awareness has to be created for a better understanding.

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CONFLICT OF INTEREST:

All the authors in this study have none to declare.

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