Health Problems in University Students - A Case Study

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ABSTRACT

Health problems are common among male and female students. The present study was aimed to examine the seasonal, allergy, Irritable Bowel Syndrome (IBS) and other health problems among the Arts and Science students of Acharya Nagarjuna University, Guntur, Andhra Pradesh, India. The study found that a high percent of Science students have health problems compared to Arts students. 13.71% of Science students have seasonal health problems, 5.65% have allergy, 6.05% have IBS and 9.27% have other than these problems. In the case of Arts students the percentages are 3.75, 1.50, 1.22 and 1.50 respectively. It is also observed that seasonal problems are high among the university students compared to remaining problems. The study concluded that the health problems are high in female than male students.

Keywords: Health Problems, Seasonal, Allergy, IBS, Arts, Science, Male, Female

I. INTRODUCTION

Health problems have a direct impact on academic achievement. Seasonally, different persons suffer from different health problems. Allergy are common in our society. For example, allergy of Dust, Cool climate, Metals, Scents, Paper, Sent, Chemicals, Flowers, Cloth smell, Fritz inside smell, etc. Similarly, a considerable number of students are facing Irritable Bowel Syndrome (IBS).

The present study assessed the extent of these health problems among Acharya Nagarjuna University students in relation to gender and faculty (Arts and Science).

II. METHODOLOGY

A total of 515 University students was selected for the study, out of them 248 (male: 144, female 104) were studying Science courses, namely, Chemistry, Biotechnology, Environmental Science, Biochemistry, Mathematics, Physics, Geology, MCA and 267 (male: 231, female 36) were studying Arts courses - Economics and Applied Economics, History and Archaeology, Telugu, English, Sanskrit, M.Ed., Travel and Tourism, Political Science and Public Administration, Sociology. The details are shown in Tables 1 and 2. Students were asked them to give their response to a question - "Whether they have Seasonal/ allergy/ digestion/other health problems?"

The purpose of the study and the details regarding the phobia were explained in their mother tongue. The data were analyzed using statistical analysis. Percent variation was observed and presented under results and discussion.

III. RESULTS AND DISCUSSION

The student’s strength, no. of male and female students suffering from various health problems were shown in table 1. Percentages are shown in table 2.
TABLE 1
GENDER AND FACULTY WISE STUDENT’S STRENGTH

<table>
<thead>
<tr>
<th>Faculty</th>
<th>Arts</th>
<th>Science</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Problems</td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>Seasonal</td>
<td>29</td>
<td>10</td>
</tr>
<tr>
<td>Allergy</td>
<td>18</td>
<td>4</td>
</tr>
<tr>
<td>Digestion</td>
<td>8</td>
<td>3</td>
</tr>
<tr>
<td>Others</td>
<td>30</td>
<td>4</td>
</tr>
</tbody>
</table>

Arts
Highest percent of male students from Arts courses are suffering from seasonal health problems (26.85), followed by Allergy (16.67) and IBS (7.41). 27.78% are marked other than these three problems (Table 2 and Fig. 1).

TABLE 2
GENDER AND FACULTY WISE HEALTH PROBLEMS (%)

<table>
<thead>
<tr>
<th>Faculty</th>
<th>Arts</th>
<th>Science</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Problems</td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>Seasonal</td>
<td>26.85</td>
<td>27.78</td>
</tr>
<tr>
<td>Allergy</td>
<td>16.67</td>
<td>11.11</td>
</tr>
<tr>
<td>Digestion</td>
<td>7.41</td>
<td>8.33</td>
</tr>
<tr>
<td>Others</td>
<td>27.78</td>
<td>11.11</td>
</tr>
</tbody>
</table>

In the case of female students also, seasonal problems are high (27.78%), followed by 11.11% allergy and 8.33% IBS problem. High percent of male students marked allergy (16.67) and other (27.78) problems compared to female (11.11%).

Science
Among male students of Science courses, high percent was suffering from seasonal health problems (26.13), followed by other problems (18.02), IBS(15.32) and allergy (14.41) (Table 2 and Fig.2).

Similar to Arts, seasonal problems are high (32.69%) in female students, followed by 22.12% other and 14.42% and IBS problem (8.33%). High percent of male students marked allergy problems (14.41) compared to female (13.46).

Comparative Study
Male – Arts and Science
Comparison of Health problems in Arts and Science male students was shown in table 2 and figure 3. Seasonal health problems and allergy are more or less similar between male Arts and Science students. Significant differences were noticed in relation to IBS, i.e., high percent of Science students (15.12) had the problem compared to arts (7.41). Other health
problems were more in Arts male (27.78%) than Science (18.02%).

**Figure 3.** Faculty wise health problems in Male students

**Female –Arts and Science**

Comparison of Health problems in female students of Arts and Science faculties was shown in table 2 and figure 4. Among the female students, high percent of Science students (32.69) had seasonal problems compared to Arts (26.85). Significant difference was also found in relation to IBS and (14.42%) of Science students expressed IBS against (7.41%) of Arts students. In the case of other problems this percentage was (22.12) for Science and (11.11) for Arts.

**Male and Female**

High percent of female students had seasonal (31.43), allergy (12.86), IBS (12.86) and others (19.29) compared to male students, i.e., 15.47, 9.07, 6.67 and 13.33 respectively (Table 3 and Figure 5).

**TABLE 3.** COMPARISON OF HEALTH PROBLEMS BETWEEN MALE AND FEMALE

<table>
<thead>
<tr>
<th>Health Problems</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seasonal</td>
<td>15.47</td>
<td>31.43</td>
</tr>
<tr>
<td>Allergy</td>
<td>9.07</td>
<td>12.86</td>
</tr>
<tr>
<td>IBS</td>
<td>6.67</td>
<td>12.86</td>
</tr>
<tr>
<td>Others</td>
<td>13.33</td>
<td>19.29</td>
</tr>
</tbody>
</table>

**Figure 4.** Faculty wise health problems in Female students

Vlassoff (2007) developed analysis of non-communicable diseases and conditions in developing and industrialized countries (gender and tropical diseases). The framework illustrates that gender interacts with the social, economic and biological determinants and consequences of tropical diseases to create different health outcomes for males and females. Gender clearly plays a role in the determinants and consequences of poor health.

A huge study involving 14 million blood tests appearing to contradict previous studies which suggest women are more likely to have an allergy than men. This one showed that men exhibit a higher
sensitivity to 11 common allergens. The authors reported that the IgE allergen sensitization rate for the 11 allergens evaluated in the blood tests was about 10% higher for adult males than adult females overall (all age groups). (https://www.medicalnewstoday.com)

Food allergy are potentially fatal immune-mediated disorders that are growing globally. The relationship between sex and food allergy remains incompletely understood. Kelly and Gangur, (2009) tested the hypothesis that, should sex influence the clinical response to food allergens, this would be reflected by a sex disparity in published studies of food allergy. Whereas among children with food allergy, 64.35% were males and 35.65% were females (male/female ratio, 1.80), among adults 34.82% were males and 65.18% were females (male/female ratio, 0.53).

IBS is a common condition, affecting around 12 million people in the UK. The name is a blanket term for a collection of otherwise unexplained symptoms that relate to a disturbance in the bowels – abdominal pain, bloating, constipation, cramping or diarrhea. According to Dr Adam Farmer, adviser to the charity The IBS Network, the rates of IBS in women are between 1.5 and 3 times higher than those seen in men. "Internationally, the overall prevalence of IBS in women is 67% higher than in men, although there are some important geographical differences," (https://www.netdoctor.co.uk/).

Caine et al., (2008) found that more women than men seek health care services for symptoms of irritable bowel syndrome (IBS) in the United States. A number of explanations are given for this gender difference including higher rates of somatic non-gastrointestinal symptoms and increased psychological distress reported by women with IBS. The effect was stronger in postmenopausal women, whose somatic symptoms were also higher than menstruating women (p=.014). Fatigue and stress were higher in women than men but anxiety and depression were not. All three types of symptom were strongly correlated with self-rating of health, both across and within-person.

Men and women have biological differences, so they have separate health care needs. Most people don’t know that the digestive systems of men and women are quite dissimilar, and they require tailored care and distinct lifestyles to improve their GI health. Men have a lower incidence of IBS than women, but they tend to have a higher incidence of polyps at a younger age (https://www.centraltexasendoscopy.com/).

Acid is more likely to damage a man’s esophagus than women, but women get plenty of stomach worries. They are more at risk for dyspepsia, or pain in the upper abdomen, and the bloating and nausea that often come with it. In addition, we take more nonsteroidal anti-inflammatory drugs like ibuprofen, typically to soothe cramps and treat chronic pain. When you down them too often, the drugs can irritate the stomach lining, which may lead to ulcers (https://www.goodhousekeeping.com/).

IV. CONCLUSION

Health problem influence the moods and situations of student’s life. These problems also effect the efficiency of the students and their academic achievement. The results of the study support that a high percent of female students had seasonal (31.43), allergy (12.86), IBS (12.86) and others (19.29) compared to male students, i.e., 15.47, 9.07, 6.67 and 13.33 respectively. At the youth stage the body responds quickly to the treatment so the authors suggested not to neglect these health problems and to consult the doctor for the treatment at the earliest.
V. REFERENCES


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