



## ASSESSMENT OF HEALTH STATUS WITH DIETARY HABITS AND LIFESTYLE AMONG THE LEGAL STUDENTS OF DISTRICT MEERUT, UP, INDIA

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### ABSTRACT

The study was aimed to assessment of health status with dietary habits and lifestyle among the legal students of district Meerut, UP, India. A Pre-designed, Pre-tested, self-administered questionnaire related to health status with dietary habits and lifestyle was used. Data were entered in Microsoft Excel and analyzed with proportional percentage. In this study, consumption of non-vegetarian diet (29.56 %) and fast food intake everyday (23.47 %) was found among students. Current smokers in the form of Smoking and tobacco chewing (19.13 %) were seen in students. Sedentary life (26.08 %), overweight (04.34 %), pre hypertension (03.14 %) and hypertension (01.73 %) were also found in students. Students were not much conscious to make extra effort to choose a healthier lifestyle. Healthy lifestyle awareness and practice is very important.

**Keywords:** Law students, Lifestyle, Dietary habits, Addictions, Physical activity

### INTRODUCTION

Health is very essential for every individual. Basis of good health care such as physical cleanness, mental balance and physical activity can keep balance of all the systems of organs and mind. A high prevalence of life style risk factors is seen in modern students. Our food and lifestyle are slowly pushing towards ill health. The life of students in college poses many new challenging and potentially threatening situational demands for the incoming student, requiring major adjustments to novel and distinctive experiences. Psychological stress has long been regarded as having influence on learning and performance. The life of legal students is stressful throughout the whole course of their study. Types of food intake, lack of exercise, psychological depression due to study burden, pressure of examination, discrepancies between expectation and reality all can be anticipated of bring psychological stress. An increase in body weight and sedentary life style shows strong. Association with hypertension disease and other lifestyle diseases among the youth; non-communicable diseases have been strongly associated with unhealthy life style habits, including inappropriate diet, lack of exercise, smoking, and alcohol consumption.<sup>1</sup> Although behaviours of students are considered a temporary part of college life, however, unhealthy habits picked up at this level generally persist in adult life. College life is an important stage for individuals as at this time their behaviours are conducive to change.<sup>2</sup> The study was aimed to assessment of health status with dietary habits and lifestyle among the legal students of district Meerut, UP, India.

### MATERIALS AND METHODS

A cross- sectional study was carried out with randomly selected 115 students of legal education of Sardar Patel Subharti Law college of SVSU, Meerut, UP, India between the periods of March 2014 to June 2014. A predesigned

pretested questionnaire was given to the students to fill up which contained questions pertaining to their socio-demographic profile. Physical examination was carried out which included anthropometric measurements and vital signs. Assessed by using body mass index (BMI); defined as the weight in kilograms divided by the square of the height in meters (Kg/m<sup>2</sup>). Weight was measured by using an adult portable weighing machine after adjustment of zero mark. Height was measured by using vertical wall chart for all the subjects without shoes. Body Mass Index (BMI) was calculated and categorized according to CDC growth chart developed by the National Center for Health Statistics in collaboration with the National Centre for Chronic Disease Prevention and Health Promotion.<sup>3</sup> According to JNC-7 criteria, the blood pressure was recorded with the help of Sphygmomanometer by using a standard cuff of 12.5 cm wide and sufficiently long to surround at least 2/3<sup>rd</sup> of upper arm in sitting position. Sphygmomanometer was placed on a horizontal surface at a level of heart. Systolic blood pressure and Diastolic blood pressure were recorded at the brachial artery in the left arm. Higher BP readings were considered as Pre-hypertensive or Hypertension stage-I or II according to JNC-7 classification for High BP.<sup>4</sup> Those who were found to be on higher side, their BP measurement was repeated after 15 minutes rest. Prior informed consent was taken from the ethical committee of college. Verbal consent was obtained from all participants. Confidentiality was strictly ensured. Data were entered in Microsoft Excel and analyzed with proportional percentage.

### RESULTS

In this study a total of 115 students were studied. Out of them 77 (66.95 %) were males and 38 (33.05 %) were females. Maximum 95 (82.60 %) of the respondents were between 17-21 years of age group. 63 (54.7 %) of students were vegetarian, 34(29.56 %) were non-vegetarian.

Table 1: Socio-demographic status and Lifestyle of respondents

S. No.	Participants	Number and percentage
1	<b>Gender wise Distribution</b>	
	Male	77 (66.95 %)
	Female	38 (33.05 %)
2	<b>Sex wise Distribution</b>	
	17-21	95 (82.60 %)
	21-25	20 (17.40 %)
3	<b>Dietary habit</b>	
	Vegetarian	63 (54.78 %)
	Non- vegetarian	34 (29.56 %)
	Ova vegetarian	18 (15.65 %)
4	<b>Commercial Food intake</b>	
	Fast Food intake everyday	27 (23.47 %)
	Occasionally	66 (52.17 %)
	No Fast Food intake	22 (19.13 %)
5	<b>Soft drink intake</b>	
	Soft drink intake everyday	44 (38.26 %)
	Occasionally	71 (61.74 %)
	No soft drink intake usually intake	22 (19.13 %)
6	<b>Addictions</b>	
	Current smokers	22 (19.13 %)
	Indulging in drinking alcohol occasionally	02 (01.73 %)
7	<b>Physical Activity</b>	
	Running	22 (19.13 %)
	Brisk walking,	20 (17.4 %)
	Aerobic exercises,	15 (13.04 %)
	Gym,	10 (08.70 %)
	Yoga and Meditation	06 (05.21 %)
	Different sports activities,	08 (06.95 %)
	Not indulging in any physical activity. Sedentary life	30 (26.08 %)

27 (23.47 %) of the respondents consumed fast food everyday although 66 (52.17 %) consumed fast food occasionally. 44 (38.26 %) of the study subjects used soft drinks every day, although 71 (61.74 %); used soft drinks occasionally. 22 (19.13 %) of the students were found to be exposed to currently smoking, they were reported to be smoking and tobacco chewers in the form of Pan Masala or gutkha chewing etc. 02. (01.73 %) students admitted that they occasionally indulged in drinking alcohol. Types of Various physical activities were found by the students. 22 (19.13 %) in running, 20 (17.40 %) in brisk walking, and 15 (13.04 %) practiced aerobic exercises, 10 (08.70 %) regularly goes to gym, 06 (05.21 %) yoga and 08 (06.95 %) engaged in different sports activities, although 30 (26.08 %) of students were not indulged in any physical activity.

Table 2: Health status of respondents

S. No.	Participants	Number and percentage
1	<b>Oral hygiene</b>	
	Dirty teeth	15 (13.04 %)
	Stains	20 (17.40 %)
	Cavity	08 (06.95 %)
	Normal teeth	72 (62.60 %)
2	<b>Body Weight (BMI)</b>	
	Under weight	25 (21.73 %)
	Normal weight	83 (72.17 %)
	Over weight	05 (04.34 %)
	Obese.	02 (01.73 %)
3	<b>Blood Pressure</b>	
	Blood pressure was normal	105 (92.30 %)
	Pre- Hypertension was observed	04 (03.47 %)
	Hypertension was observed	02 (01.73 %)

Table 2 revealed in the reference of oral hygiene, dirty teeth 15 (13.04 %), stains 20 (17.40 %) and cavity 08 (06.95 %) was found. Proportion of Body weight was seen in students as 25 (21.73 %) underweight, 83 (72.17 %) normal weight, 05 (04.34 %) over weight and 02 (01.73 %) were obese. Proportion of pre-hypertension 04 (03.47 %) and hypertension 02 (01.73 %) was observed among the students although blood pressure was recorded normal in 109 (94.78 %) students.

## DISCUSSION

In this study, (54.78 %) of students vegetarian, (29.56 %) were non-vegetarian. (23.47 %) of the respondents consumed fast food everyday although (52.17 %) consumed fast food occasionally. (38.36 %) of the respondents used soft drinks. Every day, although (71.74 %); used soft drinks occasionally. According to the oration delivered by NS; Deodhar on Lifestyle, Fertility and population on 3rd December, 2008, at the National Institute of Health and Family Welfare told that good nutrition through proper diet is the foundation of good health. Diet should not only be adequate but also be balanced. A nutritional balanced and high dietary fibre should bring about a reduction in body weight.<sup>5</sup> In our study, current smoking rate was observed (19.13 %) and (01.73 %) students consumed alcohol occasionally. Similarly an another study conducted by Lasker A *et al* (2010) suggested that current smoking rate was observed 17.06 % and 02.45 % students consumed alcohol occasionally among the students.<sup>6</sup> In the reference of oral hygiene, dirty teeth (32.46 %), stains (19.48 %) and cavity (12.98 %) was observed in this study. The main reason of the problem because 19.13 % of the students were found to be exposed to currently smoking and tobacco chewers in the form of Pan Masala or gutkha chewing etc. It was observed that (22.60 %) of students were not indulged in any physical activity. This findings match with the study of Sebo P *et al*. (2007). This study suggested that there is a tendency towards sedentary lifestyle the young people. Inappropriate dietary habits, addictions and physical inactivity contribute to risk of non-communicable diseases.<sup>7</sup> A study done by Stiegler P, *et al*. (2000) revealed that the role of diet and exercise for the maintenance of fat free mass and resting metabolic rate during weight loss<sup>8</sup>. In this study, an overall proportion of overweight among our students was (04.34 %) over weight .An another study done by Gupta S *et al*. (2014) opined that an overall prevalence of overweight among undergraduate students was (03.04 %).<sup>9</sup> A study conducted by Banarjee A *et al*. (2010) revealed that more than 20 % of the students were overweight and 06.04 % were underweight.<sup>10</sup> In our study, pre-hypertension (03.47 %) and 02 (01.73 %) hypertension was observed among the students. An increase in sedentary life style (26.08 %) and over body weight (04.34 %) shows strong association with pre-hypertension and hypertension among the youth. A study conducted by Ignarro LJ, *et al* (2007) suggested that unhealthy life style habits, including inappropriate diet, lack of exercise, smoking and alcohol consumption have been strongly associated with non-communicable diseases.<sup>11</sup> An another study conducted by Wong ND *et al*. (2000) have shown sedentary lifestyles to be associated with an increased risk of cardiovascular diseases.<sup>12</sup>

## Recommendations

Healthy lifestyle among students is even more important. Good nutrition through proper diet is the foundation of good

health. For good health, vegetarianism is positively superior to non-vegetarianism. Vegetarian diet should be encouraged and non-vegetarian food should be avoided. A nutritional balanced and high dietary fibre should not only bring about a reduction in body weight but also beneficial for a many diseases. Foods of animal origin increase the risk of development many diseases. Fast food and processed foods contain excess of salt, sugar fat and calories; all harmful to health. Addiction like smoking, smokeless tobacco and alcohol are injurious to health. These addictions should be strongly avoided. Physical activities should be increased.

### CONCLUSION

College life is also a period during which individuals are for the most part exposed to stress and lack of time, posing a barrier to adoption of healthy practices students were not much conscious make to extra efforts to choose a healthier lifestyle. Healthy lifestyle among students is even more important as they are future of the nation but students personally ignore healthy lifestyle. In this study, consumption of non-vegetarian diet and fast food was found among students. Smoking and tobacco chewing were seen in students. Sedentary life, overweight and high blood pressure was also found in students. A large percentage of students were found to be either underweight or over weight or hypertensive. Most students did not get any proper time to exercise and eat healthier food due to lack of time in their busy schedule of studies.

### REFERENCES

1. Ignarro LJ, Balestrieri ML, Napoli C. Nutrition, physical activity, and cardiovascular disease: an update. *Cardiovasc. Res* 2007; 73: 326-40. <http://dx.doi.org/10.1016/j.cardiores.2006.06.030>
2. Silliman K, Rodas Fortier K, Neyman M. A Survey of Dietary and Exercise Habits and Perceived Barriers to Following a Healthy Lifestyle in a college population. *Californian J. Health Promot* 2004; 18: 281.
3. Advance Data, From Vital and Health Statistics of the Centers for Disease control and Prevention/National Center for Health Statistics. *CDC Growth Charts: United States. Number 314; 2000.*
4. The Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure - JNC 7 Complete Report: The Science behind the New Guidelines
5. Deodhar NS. Lifestyle, Fertility and population. The 9<sup>th</sup> Veda Prakashan, at the National Institute of Health and Family Welfare; 2008. p. 22.
6. Laskar A, Sharma N, Bhagat N. Lifestyle disease risk factors in a North India Community in Delhi. *Ind. Jour. Community Medicine* 2010; 35(3).
7. Sebo P, Gallacchi M, Goehring C. Use of tobacco and alcohol by Swiss primary care Physician: A cross - sectional survey. *BMC Public Health* 2007; 7: 5. <http://dx.doi.org/10.1186/1471-2458-7-5>
8. Stiegler P, Cunliffe A. The role of diet and exercise for the maintenance of fat free mass and resting metabolic rate during weight loss. *Sports Med* 2006; 36: 239-62. <http://dx.doi.org/10.2165/00007256-200636030-00005>
9. Gupta S, Roy TG, Shah I. Overweight, obesity and influence of stress on body weight among students. *International Journal of Contemporary Medicine* 2014; 2(1) undergraduate medical students. *Ind J. Comm. Med* 2009; 34(3): 255-257. <http://dx.doi.org/10.4103/0970-0218.55296>
10. Banarjee A, Khatri S. A study of physical activity habits of young adults. *Ind Jour. of Community Medicine* 2010; 35(3): 450-451. <http://dx.doi.org/10.4103/0970-0218.69292>
11. Ignarro LJ, Balestrieri ML, Napoli C. Nutrition, physical activity, and cardiovascular disease: an update. *Cardiovasc. Res* 2007; 73: 326-40. <http://dx.doi.org/10.1016/j.cardiores.2006.06.030>
12. Wong ND, Bassin SL. Physical Activity: editor Preventive Cardiology. New York: McGraw Hill; 2000. p. 287-317.

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