

## Understanding about Recurrent Sore Throat among School Going Adolescents Children of Barabanki , Uttar Pradesh.

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### Abstract

**Background:**Children frequently experience recurrent sore throats, which are typically brought on by bacterial or viral infections. This study aimed to determine the awareness about Recurrent Sore Throat among school going adolescents children of Noida ,Uttar Pradesh.

**Material & Methods:**A cross-sectional survey of school-age adolescents in barabanki ,Uttar Pradesh was carried out between October 2022 and December 2022 utilising a Google form. Up until 400 replies were obtained, the Google form was distributed to school-age children of barabanki ,Uttar Pradesh for responses via email and social media platforms like Whatsapp groups, Facebook, Instagram, and LinkedIn. We collected data on their socio-demographic traits and familiarity with recurring sore throats. The Epi info v7 application was used to run the data through the necessary statistical tests.

**Results:** A total of 400 respondents took part in the study, with 262 (65.5 percent) were males and 138 (34.5%) were female school children. The mean age of the participants was 15.3 ±6.1 years. In the present study 22.75 %(91) participants had very good knowledge (16-20 marks) towards Recurrent Sore throat, 29.5% (118) had good knowledge (12-15 marks), 26.25%(105) had fair knowledge (8-11 marks) and 21.5% (86) having poor knowledge (<8 marks).

**Conclusion:**According to the study's findings, youngsters have an average level of personal awareness and knowledge of recurrent sore throats.

**Key words:**Understanding, Recurrent Sore Throat , School Going Adolescents Children , Uttar Pradesh

## **Introduction**

Throat pain, scratchiness, or irritation are all symptoms of a sore throat, which frequently get worse when you swallow. Children frequently experience recurrent sore throats, which are typically brought on by bacterial or viral infections.<sup>1,2</sup>

A viral infection, such as the flu or a cold, is the most frequent cause of pharyngitis, which causes a painful throat. A virus-induced sore throat goes away on its own. Antibiotics are needed to treat strep throat (streptococcal infection), a less frequent bacterial cause of sore throat, in order to avoid complications. More complicated therapies may be needed for other, less frequent causes of sore throats.<sup>2,3</sup>

Depending on the source, sore throat symptoms can change. Throat pain or a scratchy feeling, throat pain that gets worse when talking or swallowing, swallowing difficulties, sore, swollen glands in your neck or jaw, enlarged, red tonsils, white spots or pus on your tonsils, and a hoarse or muffled voice are possible signs and symptoms.<sup>3,4</sup>

The most frequent risk factor for infection is having close contact with someone who has strep throat. For instance, when a person has strep throat, the bacteria frequently spread to other family members. Everywhere there are plenty of people, infectious diseases tend to spread. Group A strep infections are more likely to occur in crowded environments. Schools and daycare facilities are some of these settings.<sup>4,5</sup>

Strep throat can occur more than once in a person. Someone who already has strep throat is not immune to contracting it again in the future. Although strep throat cannot be prevented by a vaccine, there are steps people can take to safeguard themselves and others.<sup>5,6</sup>

In different parts of India, there have been many studies on recurrent sore throats, but relatively few of these studies have been done in the state of Uttar Pradesh.

## **Objectives of the Study**

To evaluate the awareness and knowledge regarding Recurrent Sore throat among school going adolescents children of barabanki ,Uttar Pradesh

## **Research Methodology**

- Research Approach -Descriptive
- Research Design- Cross-sectional survey design
- Study area: barabanki, district of Uttar Pradesh.
- Study duration- between October 2022 to December 2022
- Study population: All school going adolescents children between 10-19 years of age who were studying in the barabanki , Uttar Pradesh for 12 months or more.
- Sample size- 400 school going adolescents children assuming 50% have adequate knowledge regarding Recurrent Sore throat, 5% absolute error, 95% confidence level, and 5% non response rate.

- Study tool: A google form questionnaire consisting of questions regarding socio-demography, knowledge about Recurrent Sore throat was created. The questionnaire was initially pre-tested on a small number of school children to identify any difficulty in understanding by the respondents.
- Description of Tool-
  - a) Demographic data survey instrument: The demographic form elicited information on participants’ background: age, gender etc.
  - b) Questionnaire: The questionnaire contains 20 structured questions regarding knowledge about Recurrent Sore throat having three options i.e. Yes, No & Don’t Know. The participants have to choose right one. One mark was given for each correct answer and zero for incorrect answer. The maximum score was 20 and minimum score was zero in each category. Scoring was done on the basis of marks as >80%(16-20)=very good,60-79%(12-15) =Good,41-59% (8-11)=Fair,<40% (< 8)=poor
- Validity of tool - by the experts in this field
- Data collection- Data was collected under the guidance of supervisors. The google form questionnaire was circulated via online modes like e-mail and social media platforms like Whatsapp groups, Facebook, Instagram and LinkedIn in both rural and urban area of barabanki ,Uttar Pradeshtill the 400 responses were collected.
- Data analysis- Data was collected and entered in Microsoft excel spread sheet, cleaned for errors and analyzed with Epi Info V7 Software with appropriate statistical test in terms of frequencies and percentage.
- Ethical Considerations- Participants confidentiality and anonymity was maintained.

**Results**

The goal of the current study was to assess knowledge and care seeking practices for Recurrent Sore throat among school going adolescents children through a non-experimental descriptive survey.

A total of 400 respondents took part in the study, with 262 (65.5 percent) were males and 138 (34.5%) were female school children. The mean age of the participants was 15.3 ±6.1 years.

| S.No. | Statements   | Frequency of Correct Responses | Percent |
|-------|--|--------------------------------|---------|
| 1.    | A sore throat is pain, scratchiness or irritation of the throat that often worsens when you swallow. | 251                            | 62.75   |
| 2.    | Causes of sore throat include Viruses, like those that cause <u>colds</u> or <u>flu</u> .            | 229                            | 57.25   |
| 3.    | In general, sore throat is a mild infection, but it can be very painful.                             | 243                            | 60.75   |
| 4.    | A sore throat can make it painful to swallow. A sore throat  | 232                            | 58      |

|     |   |     |       |
|-----|---|-----|-------|
|     | can also feel dry and scratchy.   |     |       |
| 5.  | A sore throat caused by a virus resolves on its own.  | 237 | 59.25 |
| 6.  | Generally, people spread the sore throat to others through Respiratory droplets and Direct contact  | 234 | 58.5  |
| 7.  | It usually takes two to five days for someone exposed to strep bacteria to become ill with sore throat.   | 215 | 53.75 |
| 8.  | In general, sore throat is a mild infection, but it can be very painful.  | 197 | 49.25 |
| 9.  | Close contact with another person with sore throat is the most common risk factor for illness.  | 218 | 54.5  |
| 10. | Crowded settings can increase the risk of getting a group A sore infection including Schools  | 241 | 60.25 |
| 11. | Someone with strep throat should start feeling better in just a day or two after starting antibiotics.  | 232 | 58    |
| 12. | People with sore throat should stay home from work, school, or daycare until they No longer have a fever and Have taken antibiotics for at least 12 hours | 223 | 55.75 |
| 13. | Don't stop taking the medicine, even if you feels better, unless the doctor says to stop.   | 206 | 51.5  |
| 14. | Complications can occur after a sore throat infection.  | 231 | 57.75 |
| 15. | People can get sore throat more than once.  | 230 | 57.5  |
| 16. | Having sore throat does not protect someone from getting it again in the future.  | 219 | 54.75 |
| 17. | Not completing the full course of antibiotics to treat sore throat can increase a child's risk of rheumatic fever or serious kidney inflammation.         | 230 | 57.5  |
| 18. | The best way to keep from getting or spreading sore is to <u>wash your hands</u> often.   | 229 | 57.25 |
| 19. | To prevent sore throat, you should Cover your mouth and nose with a tissue when you cough or sneeze.  | 232 | 58    |
| 20. | You should also wash glasses, utensils, and plates after someone who is sick uses them.   | 226 | 56.5  |

Table-1: Knowledge regarding Recurrent Sore throat among study participants

In the present study 22.75 % (91) participants had very good knowledge (16-20 marks) towards Recurrent Sore throat, 29.5% (118) had good knowledge (12-15 marks), 26.25% (105) had fair knowledge (8-11 marks) and 21.5% (86) having poor knowledge (<8 marks).

| Category (Marks) | Frequency (n=400) | %     |
|------------------|-------------------|-------|
| V. Good (16-20)  | 91                | 22.75 |

|              |     |       |
|--------------|-----|-------|
| Good (12-15) | 118 | 29.5  |
| Fair(8-11)   | 105 | 26.25 |
| Poor(<8)     | 86  | 21.5  |

Maximum =20 Minimum=6

Table 2: Knowledge towards Recurrent Sore throat among study participants

## Discussion

In this study, school-age children of Noida, Uttar Pradesh were asked about their knowledge and awareness of recurring sore throats. The majority of survey participants had an average level of knowledge and awareness of sore throats, which emphasises the necessity for scientific education and awareness.

Most frequently, viral infections like the common cold are to blame for sore throats. These infections can occur year-round but are more common in the winter. A cold virus can also cause your child to have a fever, runny nose, and cough in addition to a sore, scratchy throat. A painful throat brought on by a virus won't get better with antibiotics. Without treatment, these infections often resolve in 7 to 10 days. The best method to treat a cold and sore throat in a child is to keep them cosy, ensure they drink lots of fluids, and give them plenty of rest.<sup>1,7</sup>

The bacteria *Streptococcus pyogenes* is what causes strep throat, which is an illness. Children aged 5 to 15 are most frequently affected, and it typically occurs in the winter and early spring. Only 20% to 30% of youngsters who are of school age suffer from throat infections brought on by strep throat. A scratchy throat, pus on the tonsils, trouble swallowing, a fever, and enlarged glands are some symptoms. Children may also experience stomachaches, headaches, and a rash that looks like red sandpaper. In older children, a cough and a runny nose are not typical signs of strep throat. Infants and young children rarely develop strep throat. But if they do contract strep, they can experience distinct symptoms. For strep throat, your paediatrician will recommend antibiotic medication.<sup>7,8</sup>

Children's sore throats are typically brought on by viral infections, which do not respond well to antibiotics and resolve on their own. Without antibiotics, children with strep throat may also recover. Antibiotics, however, can shorten the duration of the healing process, lessen contagiousness, and minimise the likelihood of experiencing some strep throat problems. Acute rheumatic fever, a condition that can harm the heart and joints, is one of the complications that should be avoided above all others. In addition to the dangers of diarrhoea, yeast infections, allergic reactions, and the emergence of antibiotic resistance, antibiotics are crucial for treating bacterial illnesses such as strep throat. Knowing when medicines are required for a sore throat and when they are not is crucial.<sup>6-8</sup>

Through airborne moisture droplets (from sneezes or coughs) or by touching infected people's hands, the viruses and bacteria that cause a sore throat can be spread from one person to another.

Schools and child care facilities may become infected with the illnesses. People are frequently most contagious before they even start to have symptoms, which poses a difficulty for preventive. The best method to try to stop the transmission of illness is to wash your hands frequently, cover your coughs and sneezes with a tissue or your upper arm (rather than your hand), clean your toys, and avoid sharing drinking cups.<sup>7,8</sup>

#### Limitations of the study

It was difficult to generalize the findings because of the investigation's cross-sectional design and small sample size. It was also hard to confirm that the participants did not look up the answers to the questions in printed or online dictionaries because the questionnaire was distributed online. The data may be negatively biased, providing false information about the participants' level of knowledge on recurring sore throats, if the participants did this. To discover barriers to promoting appropriate knowledge and behaviors with recurring sore throats, future studies should concentrate on qualitative investigations with a larger sample size, such as focus group interviews.

#### Conclusion

Children have an average level of awareness and knowledge of recurrent sore throats, the study's findings show. This study may contribute to raising kids' awareness of and attention for sore throats. As children become more aware of this and are more motivated to seek treatment for it, the likelihood of consequences from untreated sore throat decreasing.

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