

## Study of smoking pattern in intern doctors and perception

Anuradha Lyer<sup>1</sup>, Kirti Sharma<sup>2,\*</sup>, Sibadatta Das<sup>3</sup>, Sandeep Garg<sup>4</sup>, Sakshi<sup>5</sup>

<sup>1</sup>Professor and Head, <sup>2,4</sup>Demonstrator, <sup>3</sup>Associate Professor, <sup>4</sup>Senior Resident, <sup>1-4</sup>Dept. of Physiology, <sup>5</sup>Dept. of Dentistry, Shaheed Hasan Khan Mewati Government Medical College Nuh, Haryana, India

\*Corresponding Author:

Email: kirti75kirti@gmail.com

### Abstract

**Introduction:** Substance abuse is very common among medical intern students and smoking is found to be the single greatest preventable cause of premature death and disability. It may affect their leaning abilities and can also deteriorate the quality of health care offered to the patients. This study was conducted in order to assess the knowledge and attitude of interns towards smoking and to study their perception towards internship.

**Materials and Methods:** This study was conducted at SHKM Govt. Medical College, Nuh, Haryana, India. Interns were provided with a pretested, anonymous, semi open-ended questionnaire. All passed out final year MBBS students were included in the study. Response rate of the study was 78.2% as 61 out of 78 passed out students returned duly filled questionnaire after one month of internship period.

**Results:** Smoking emerged as a major factor of substance abuse among medical interns. Most of them started smoking under pressure of peer group and 44.26% were having one of their family members as a regular smoker. Most of the intern doctors wanted to prepare for PG entrance examinations (39.34%) and choice of PG branch was clinical (86.88%). Most of the interns wanted to serve in urban settings after doing PG (78.69%).

**Conclusion:** Smoking was found to be very common among intern doctors precipitated by stress or due to pressure of the peer group. The perception of the intern doctors was to prepare for PG entrance examinations during internship.

**Keywords:** Perception, Smoking, Intern Doctors, Internship.

### Introduction

Internship is a tenure of one year after passing final year MBBS where a candidate (intern) actually practices Medicine & Surgery and gains requisite skills under the supervision to become capable of dealing with patients independently.<sup>1</sup> This one year tenure of internship is mandatory and in this period, the intern performs clinical duties in different branches of medicine and surgery rotation wise. The grey side of this internship period is that the intern's undergo stress because of heavy work load in hospital, sleep deprivation, preparation of PG entrance exam. Because of this stress, interns get dissatisfied, ultimately leading to depression and anxiety.<sup>2</sup> This situation can deteriorate the quality of healthcare given to patients.<sup>3,2</sup> Also to cope up with this stress, interns might fall victims of substance abuse mainly smoking. Though knowing the fact, that use of tobacco is the leading preventable cause of death worldwide, the future doctors (interns) continue to develop habit of smoking, despite knowing the fact of involved risks.<sup>4,1,8,9</sup> In many developing countries, physicians earn the respect of society as a credible source of health information in the fight against tobacco use, but this message is contradicted by their own tobacco use practices leading to the message of quit smoking at conflict with their own behavior.<sup>4,3,7</sup> As smoking habit is formed early in life, it is interesting to see the development of this habit among interns and the impact of their education on their beliefs and practices. Despite of the knowledge of involved risks, tobacco use is very common among medical students.<sup>4,8,9</sup> This study is aimed at

development of smoking habit among interns and their perception towards internship tenure.

### Material and Methods

A questionnaire based descriptive study was conducted in Shaheed Hasan Khan Mewati Government Medical College situated in Nuh, Haryana, India. A semi open ended questionnaire was given to medical students who had just passed out final MBBS examination and joined their mandatory internship tenure. Questionnaire was divided into two groups addressing smoking and perception towards internship. For this study we had included all passed out medical students. In a batch of 100 students, 78 students passed examination in first attempt. Out of them 73 were males and 5 students were females. Female students refused to participate in this study. So response rate was 78.2% as 61 out of 78 passed students returned duly filled questionnaire after one month of internship period. Participants were assured about anonymity. Participation in this study was purely on voluntary basis and informed consent was talent from all participants. They were asked not to discuss questions among themselves in order to avoid peer influence.

### Results

Results of the study was shown in Table 1 & 2. The study variables libel ever smoked, first exposure of smoking, no of cigarettes smoked daily etc. and their corresponding responses are shown in Table 1. Out of total 78 intern doctors (n=78), 73 were males and 5

interns were females. Mean age was  $22.5 \pm 0.9$  years with standard deviation of 0.7.

**Table 1: Questionnaire addressing Smoking**

S. No.	Question	Positive Response	Negative Response
1.	Have you ever smoked	19	42
2.	Number of cigarette smoked daily (3 or more)	8	53
3.	Consumption of cigarette for 6 months or more	8	53
4.	Did you get your first exposure at school	4	57
5.	Did anyone in your family smoke	27	34

In Table 2, questions regarding perception of interns towards internship were asked and their responses were evaluated.

**Table 2: Perception towards Internship**

S. No.	Character	N=61(%)	Test statistic	p value
<b>1.</b>	<b>Priority during Internship</b>			
	Want to do it sincerely	24 (39.34)	$X^2=5.54$ d.f.=1	P<0.05
	Prepare for PG entrance exam.	37 (60.66)		
<b>2.</b>	<b>Two months SPM Posting</b>			
	Relevant	36 (59.01)	$X^2=3.97$ d.f.=1	P<0.05
	Irrelevant	25 (40.99)		
<b>3.</b>	<b>Choice of PG branch</b>			
	Clinical	53 (86.88)	$X^2=66.39$ d.f.=1	P<0.001
	Pre/Para Clinical	8 (13.12)		
<b>4.</b>	<b>Choice of PG other than medical branch</b>			
	Civil services	52 (85.25)	$X^2=60.62$ d.f.=1	P<0.001
	MBA	9 (14.75)		
<b>5.</b>	<b>Where they want to serve after PG</b>			
	Rural Area	13 (21.31)	$X^2=40.16$ d.f.=1	P<0.001
	Urban Area	48 (78.69)		
<b>6.</b>	<b>Notice any change in Faculty Behaviour towards them</b>			
	Becomes Considerate	42 (68.85)	$X^2=17.34$ d.f.=1	P<0.001
	Becomes Harsh	19 (31.15)		

## Discussion

The response of interns towards development of smoking pattern was shown in Table No.1. Out of 61 intern doctors, who responded to questionnaire 31.15%, (19) admitted that they had smoking once in life. Out of this 19 intern doctors who admitted that they smoked once in life, 42.11 % (8) were consuming more than 3 cigarettes daily for the last six months. Only four intern doctors said that they got their first exposing of smoking at school level. Others who were smoking said that they got their first exposure elsewhere i.e. at college, during coaching for MBBS etc. Out of 61 intern doctors, 44.26% (27) were having positive family history of smoking, means someone in their family was a smoker.

In study done by Nidhi goel et al 3-1 it was reported that about 8% medical students had ever chewed tobacco. In study done by Oliveria et al 3-6 the prevalence of cigarette smoking was about 15.2%.

Jagney VK et al 3-10 reported in their study done on medical students of sion Medical college, Mumbai that prevalence of smoking was 40.85%. The difference in prevalence of smoking in our study and other studies could be explained on the basis of regional variation or person to person variation.

In our study, we also tried to know the perception of interns towards internship, Table 2. For this we asked them different questions. In response to priority doing internship, only 39.34 % (24) interns said that they would do it sincerely, rest 60.66% (37) replied that they would prepare for PG entrance examination side by side during internship ( $x^2$  value =5.54, p value <0.05). When they asked about mandatory two months SPM posting, 59.02% (36) interns replied that it was relevant while 40.98% (25) were in the opinion that this posting was irrelevant ( $x^2$ value =3.97, p value <0.05). In response to the question of choice of PG branch, 86.88% (53) interns opted for clinical branch, while

13.12% (8) preferred pre and para clinical branch ( $\chi^2$  value=66.39, p value <0.001). When they asked about choice of PG other than medical branch, 85.25% (52) interns choose civil services and 14.75% (9) interns choose MBA. ( $\chi^2$  value =60.62, p value <0.001). In response to the question where they want to serve after PG, 78.69% (48) preferred to work in urban settings, while only 21.31% (13) agreed to serve in rural areas. ( $\chi^2$  value= 40.16, p value <0.001). Most important question asked to them was whether they noticed any change in faculty behavior towards them after passing out their final MBBS examinations, 68.85% (42) interns responded that faculty became more considerate towards them while 31.15% (19) interns were of the opinion that it became more harsh. ( $\chi^2$  value = 17.34, p value <0.001).

### Conclusion

From this study we conclude that smoking was emerging as major factor of substance abuse among intern doctors. The percentage of intern doctors (6.56%) who got their first exposure of smoking at school level was very less; means they got their first exposure from somewhere else. Most of them started smoking in the pressure of their peer group. Most of them who indulged in smoking were having positive family history of smoking. Most of the interns wanted to prepare for PG entrance examinations during internship and choice of doing post graduation was towards clinical branches. Most of them preferred to serve in urban area and noticed that faculty behavior became considerate towards them after passing final MBBS examinations.

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