

**PREVENTIVE BEHAVIOR AMONG DOCTORS WITH RESPECT
TO HEPATITIS-B IN BOLAN MEDICAL COMPLEX HOSPITAL
QUETTA, PAKISTAN**



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THESIS ADVISORY COMMITTEE: NONGLAK PANCHARUNITI, Dr.P.H
JEFFREY M. ROSEMAN, Ph.D.**ABSTRACT**

Acquiring the Hepatitis-B (HB) infection is an occupational hazard for doctors and other Health Care Workers (HCWs). The aim of this study was to describe preventive behavior among doctors with respect to Hepatitis-B as well as the association of socio-demographic factors, knowledge, cues to action and perception with their behavior. A cross-sectional survey was conducted among doctors with respect to Hepatitis-B in the Bolan Medical Complex Hospital located in Quetta, Pakistan. Questionnaires were distributed to 384 doctors; 322 (84 %) were returned.

The majority of the respondents were male, between the ages of 31-40 years, and were medical officers working in a medical unit, from 1 to 10 years worth of experience. Almost 97 % of the respondents had a high level of knowledge concerning HB infection. Respondent's perception on severity of HB was low while susceptibility perception on HB was high. The serological test for HBsAg was negative among 94.7% of respondents. Preventive behavior was dichotomized into high and low from the mean of the responses to 21 questions about specific recommended practices consistent with Universal Precautions. Chi-square analysis showed there was an association between work department ($\chi^2 = 22.09$, P-value =0.00) as well as perception of severity ($\chi^2 = 9.26$, P-value =0.00) and HB preventive behavior.

Respondents with low accuracy in their perception on the severity of HB were 2 times more likely to have low HB preventive behavior as compared to those with a high level of accuracy in their perception of severity: OR (95% CI) = 2.11(1.26, 3.51). Respondents working in surgery departments were 54 % less likely to have low HB preventive behavior as compared to those working in medicine departments: OR (95% CI) = 0.46 (0.04,1.00).

Although their level of knowledge was high, the accuracy of the doctor's perception on the severity of HB was low. Therefore to increase preventive behaviors, further interventions are needed to promote the perception on severity of HB.

**KEY WORDS : HEPATITIS-B PREVENTIVE BEHAVIOR / DOCTORS /
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