

Self-health attitudes and practices of obstetrics and gynecology nurses in Israel

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Summary

Objective: To assess the attitude of obstetrics and gynecology nurses towards their own health and their health-related behaviors.

Methods: Two hundred and ninety community obstetrics and gynecology nurses in Israel were asked to complete a questionnaire on attitude to self-health, way of life, smoking habits, and regular breast, blood and PAP smear examinations.

Results: The average body mass index of the responders was 25.2 kg/m². However, more than half the nurses (163/287, 56.8%) considered themselves as being above-average in weight, and only 41.1% as being appropriate in weight; 55% were on weight-loss diets. Smoking was reported by 44.8%. Blood tests, PAP smears and breast evaluations were regularly done by 72.5%, 83.0% and 55.7%, respectively.

Conclusion: Obstetrics and Gynecology nurses in Israel are aware of the importance of their own health and have good health habits, except for cigarette smoking, which remains a problem among this group.

Key words: Obstetrics nurses; Gynecologic nurses.

Introduction

The best salespersons are those who are genuinely committed to their product and model its benefits [1]. Nurses are major health providers and are in a unique position that allows them to assess people's lifestyle behaviors and promote those that protect and maintain good health [2]. As such, they are an important educational point of reference for the large public they serve. Of all the medical professionals, nurses in particular are perceived as role models, and their health habits may be imitated by patients, family and friends [3]. Several studies have addressed the issue of nurses' self-health attitudes and practices, but the results are conflicting [1, 3-5]. In the present study, we examine the health practices of obstetrics and gynecology nurses serving in the community in Israel.

Materials and Methods

Three hundred and fifty questionnaires were distributed to obstetrics and gynecology nurses practicing throughout Israel in outpatient clinics run by the General Health Fund, the largest health management organization in the country. The questionnaire covered demographic data (age, years of education), height and weight, self-perception of body image (normal, fat, slim), cigarette smoking, engagement in sports activities and adherence to routine medical check-ups: mammography, PAP smear, complete blood count (CBC), and blood chemistry tests, as well as annual physical examination by a physician.

Statistical analysis

The results are given as means \pm standard deviations. The Pearson correlation coefficient (r) and its significance (p) were calculated between the variables. The Student's t -test was

performed to determine statistically significant differences in mean continuous parameters between two groups of categorical variables (i.e., performance or not of mammography, PAP smear, blood tests). Analysis of variance with the Duncan multiple comparison option was performed to determine statistically significant differences in mean continuous variables between three groups of self-image (i.e. normal weight, above-average weight, below-average weight); p values less than or equal to 0.05 were considered statistically significant.

Results

Two hundred and ninety responses were received, for a response rate of 82.8%. Mean age of the responders was 47.2 ± 10.1 years, and mean level of education, 15.2 ± 2.2 years. Average height, weight and body mass index (BMI) was 25.2 ± 4.6 . Table 1 shows the distribution of the responders' self-perception of their body weight. Fifty-five percent of the responders stated that they were currently on some kind of weight-loss diet. Cigarette smoking was reported by 44.8% of the responders, with an average of 4.5 ± 8.1 cigarettes per day. Forty-four percent of the responders engaged in regular sports activities. Walking was the most popular (36.4%), followed by gymnastics (28%), swimming (19%), and other types of sports (16.7%). Fifty-five percent of the responders

Table 1. — Self-perception of weight by mean body mass index.

Perception of own weight	Number %	Body mass index (mean \pm SD)	p value
Normal	118 (41.4)	22.2 ± 23.1	p = 0.001
Above average	163 (57.2)	27.8 ± 20.0	
Below average	4 (1.4)	19.0 ± 13.8	

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had had a breast examination by a physician during the last year, and 71.7% also regularly performed self-breast examinations. Eighty-three percent had had at least one PAP smear, and 72.5% had undergone blood tests during the previous year.

Statistically significant differences in age of the nurses between nurses who perform breast examination by a physician, PAP test and blood test examination ($p = 0.001, 0.005, 0.03$) respectively, is shown in Table 2.

Table 2. — Mean age by examination performances.

Examination	Age Mean \pm SD	p value
Breast	50.2 \pm 8.6	0.001
	43.4 \pm 10.4	
PAP	48.0 \pm 9.7	0.005
	43.4 \pm 11.3	
Blood	47.9 \pm 10.7	0.03
	45.3 \pm 8.0	

Discussion

Surveys of nurses' lifestyles have found that nurses act as anticipated with regard to their profession⁵ but they lack proper routine health practices, and therefore fail to implement them [6]. A high BMI, for example, can lead to hypertension [7], ischemic stroke [8], breast cancer in the menopause [9], and non-insulin-dependent diabetes mellitus [10]. The incidence of smoking among different groups of nurses has been reported by Rowe and Clark [11], and its underlying causes investigated [12]. In Israel, the rate of cigarette smoking in hospital-employed nurses is 23%, which is lower than the rate in the general population [13]. We failed to find any studies of sports activities among nurses, though in general, a sedentary lifestyle is prevalent in most industrialized countries. Regular physical activity is known to protect against the development and progression of many chronic diseases [14].

Our results show that cigarette smoking is quite prevalent among Israeli nurses working in outpatient clinics. Our rate of 44.8% is even higher than that in the general Israeli population. It is also higher than reported in nurses in North America, but lower than in Italy or Japan [13]. Except for smoking, the results for the other parameters studied were satisfactory. Israeli nurses maintain an average normal BMI, nearly half of them regard themselves as fat and maintain weight-loss diets. They find time to practice different types of sports despite their multiple duties as career women, wives, and mothers. Finally, they are aware of the need for a general periodic medical check-up, including mammography, PAP smear, breast examination, and blood tests.

To the best of our knowledge, the lifestyle and health practices of Israeli nurses have never been studied, and the data gathered in the present survey are encouraging. Their high health consciousness can be explained by their pro-

fession itself, their easy access to physicians and medical facilities, their high rate of interaction with other medical professionals - themselves aware of the importance of maintaining self-health, and the provision of medical services to nurses free-of-charge by the HMOS in Israel. Unfortunately, the high rate of smoking is worrisome. The only explanation we can suggest is that many of the nurses surveyed were veterans with many years of experience (average age 53.7 years), and they acquired this hard-to-kick habit long before its true dangers were publicized and it became unpopular in the Israeli population in general and among medical professionals in particular.

In summary, this is the first study of the lifestyle and self-health attitudes among practicing Israeli nurses. The results show that Israeli nurses are aware of and actively maintain their health. However, cigarette smoking remains a problem among this group.

References

- [1] Connolly M.A., Gulanick, M., Keough, V., Holm, K.: "Health practices of critical care nurses: are these nurses good role models for patients?". *Am. J. Crit. Care*, 1997, 6, 261.
- [2] Tanner, E.K.: "Assessment of a health-promotive lifestyle". *Nurse. Clin. North Am.*, 1991, 26, 845.
- [3] Aristizabal Castano I., San Martin Rodriguez L.: "Health habits of health professionals". *Rev. Enferm.*, 1998, 21, 15.
- [4] Haughey B. P., Kuhn M. A., Dittmar S. S., Wu Y. W.: "Health practices of critical care nurses". *Heart Lung*, 1999, 21, 203.
- [5] Guidry M. L., Wilson A. M.: "Health promoting behaviors of African-American registered nurses". *ABNF J.*, 1999, 10, 37.
- [6] Arillo-Santillan E., Lazcano-Ponce E., Peris M., Salazar-Martinez E., Salmeron-Castro J., Alonso-De-Ruiz P.: "Knowledge of health professionals about the prevention of cancer of the cervix. Alternative to medical education". *Salud Publica Mex.*, 2000, 42, 34.
- [7] Huang Z., Willett W. C., Manson J. E., Rosner B., Stampfer M. J., Speizer P. E., Colditz G. A.: "Body weight, weight change, and risk for hypertension in women". *Ann. Intern. Med.*, 1998, 128, 81.
- [8] Rexrode K. M., Hennekens C. H., Willett W. C., Colditz G. A., Stampfer M. J., Rich Edwards J. W. *et al.*: "A prospective study of body mass index, weight change, and risk of stroke in women". *JAMA*, 277, 1539.
- [9] Hung Z., Hankinson S. E., Colditz G. A., Stampfer M. J., Hunter D. J., Manson J. E. *et al.*: "Dual effects of weight and weight gain on breast cancer risk". *JAMA*, 1997, 278, 1407.
- [10] Carey V. J., Walters E. E., Colditz G. A., Solomon C. G., Willett W. C., Rosner B. A. *et al.*: "Body fat distribution and risk of non-insulin-dependent diabetes mellitus in women. The Nurses Health Study". *Am. J. Epidemiol.*, 1997, 145, 614.
- [11] Rowe K., Clark J. M.: "The incidence of smoking amongst nurses: a review of the literature". *J. Adv. Nurs.*, 2000, 31, 1046.
- [12] Rowe K., Macleod Clark J.: "Why nurses smoke: a review of the literature". *Int. J. Nurs. Stud.*, 2000, 37, 173.
- [13] Varsano S., Havion G., Garenkin M.: "Smoking by an Israeli general hospital staff, and attitude to smoking in hospitals. Are we in Israel ready to institute 'smoke-free hospitals'?" *Harefuah*, 2000, 138, 335.
- [14] King C. N., Senn M. D.: "Exercise testing and prescription. Practical recommendations for the sedentary". *Sport Med.*, 1996, 21, 326.

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