

**The Life Style Disorder Among The Area of Rural and Urban**

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**Abstract**

*Lifestyle diseases is called diseases of longevity all diseases of civilization. In my opinion all because of modern development in which a lifestyle has changed which results in different kind of diseases. The diseases include Alzheimer’s diseases, arthritis, atherosclerosis, and asthma, some kinds of cancer, chronic liver disease, type 2 diabetes, heart disease, metabolic syndrome, osteoporosis, stroke, depression, and obesity.*

*Some noble scientists maintain a distinction between diseases of longevity and diseases of civilization. Certain diseases, such as diabetes, asthma appear at greater rates in young populations living in the “western” way; their increased incidence is not related to age, so the terms cannot accurately be used interchangeably for all diseases.*

*Data for the routine checkup or consultancies concludes that consultancy with doctors in diseases Patient suffering from different lifestyle disorder diseases (diabetes, obesity, arthritis, and hypertension). In urban areas consults doctor in a day at the rate of 4.0% and in rural areas 1%. Increasingly for months combined percentage was 16.5% and for yearly it was 42%.*

**1.0 CLINICAL AND HEALTH STATUS OF RESPONDENT**

**Table 1.0: BMI category of the respondents**

BMI		Locality		Total
		Urban	Rural	
Under Weight	Count	2	6	8
	% within Locality	1%	3%	2%
Normal	Count	58	74	132
	% within Locality	29%	37%	33%
Over Weight	Count	37	53	90
	% within Locality	18.5%	26.5%	22.5%
Obese grade 1	Count	74	51	125

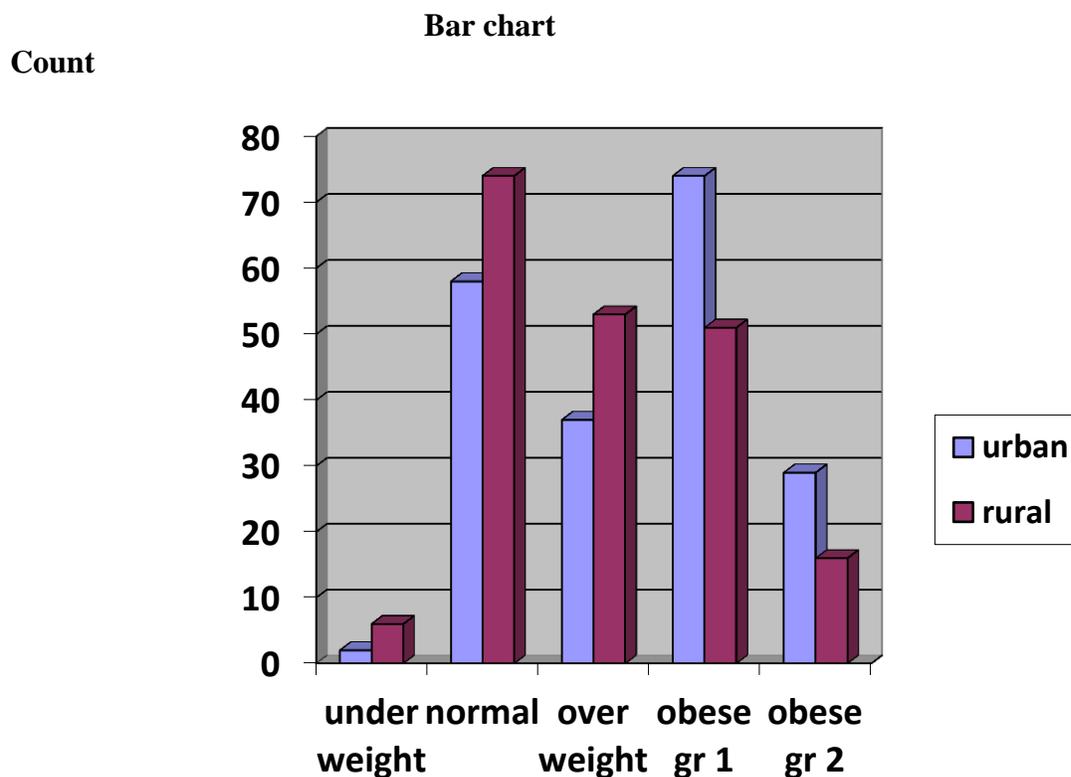
	% within Locality	37%	25.5%	31.3%
<b>Obese grade 2</b>	Count	29	16	45
	% within Locality	14.5%	8%	11.3%
<b>Total</b>	<b>Count</b>	<b>200</b>	<b>200</b>	<b>400</b>
	<b>% within Locality</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

### 1.1 Chi-Square Test

	Value	Df	Asymp. Sig. (2-sided)
<b>Pearson Chi-Square</b>	13.881 <sup>a</sup>	4	.008
<b>Likelihood Ratio</b>	14.020	4	.007
<b>Linear-by-Linear Association</b>	13.094	1	.000
<b>N of Valid Cases</b>	<b>400</b>		

To test the null hypothesis that BMI is independent to the locality, applied chi-square test and the chi-square value is 13.881 (refer Table 4.2.1 and corresponding figure 4.2.1.) for which 'p' value is 0.008 which is less than 0.05 (level of significance).

So, null hypothesis is rejected and it can be concluded that BMI value is significantly depends on locality. It has been reported in above table that (58%) of urban respondents BMI is in obese category and only (33.3%) of the total rural respondents lie in this category. Further, (37%) of rural respondents BMI are normal and only (29%) of the total urban lie in this category.



**BMI**

**Figure 1.0: BMI category of the respondents**

**Table 1.2: Relation between Diabetes and Locality**

			Locality		Total
			Urban	Rural	
<b>Diabetes</b>	<b>Present</b>	Count	118	39	157
		% within Locality	59%	19.55%	39.3%
	<b>Absent</b>	Count	82	161	243
		% within Locality	41%	80.5%	60.8%
<b>Total</b>		<b>Count</b>	<b>200</b>	<b>200</b>	<b>400</b>
		<b>% within Locality</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

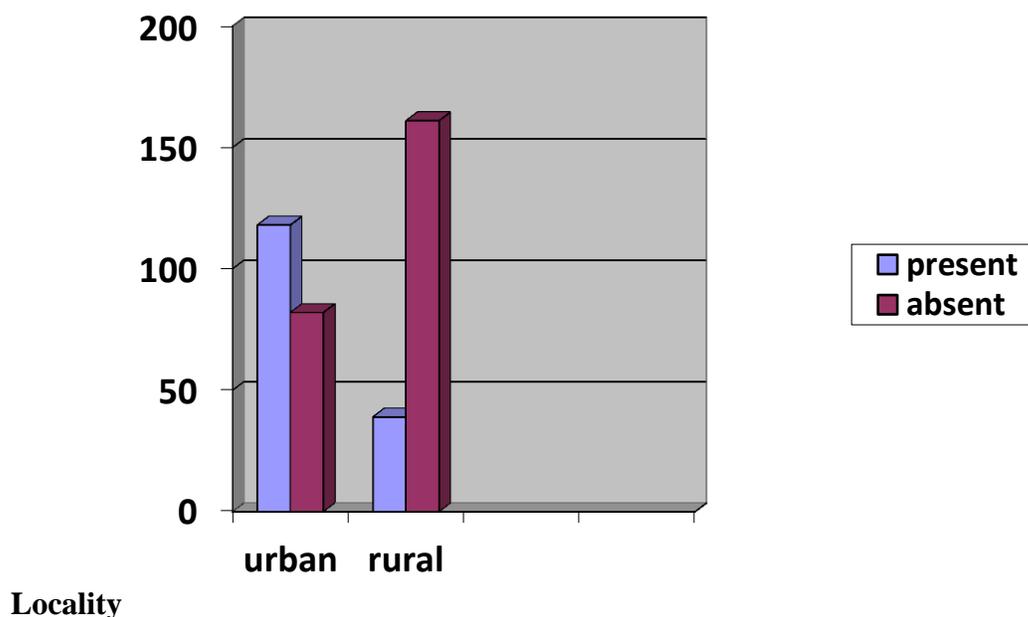
**1 (2.1.) Chi-Square Test**

	Value	df	Asymp. Sig. (2-sided)
<b>Pearson Chi-Square</b>	77.039 <sup>a</sup>	1	.000
<b>Continuity Correction<sup>b</sup></b>	75.216	1	.000

<b>Likelihood Ratio</b>	80.945	1	.000
<b>Fisher's Exact Test</b>			
<b>Linear-by-Linear Association</b>	76.846	1	.000
<b>N of Valid Cases</b>	<b>400</b>		

To test the null hypothesis that the number of citizens suffering by Diabetes are independent to the locality, applied chi-square test and the chi-square value is 77.039 (refer Table 4.2.3.B and corresponding figure 4.2.3.B) for which ‘p’ value is 0.000 which is less than 0.05 (level of significance).

So, null hypothesis is rejected and it can be concluded that that the number of citizens suffering by Diabetes is significantly depends on the locality. It has been reported in above table that (59%) of urban respondents are suffering by Diabetes and only (19.5%) of the total rural respondents are suffering by Diabetes.



**Figure 4.2.3(B): Relation between Diabetes and Locality**

**Conclusion**

The present investigation is conducted in Bijnor City. It is confined to the lifestyle disorders in rural and urban areas as studied under. It was found that 68% of urban respondents activity pattern was sedentary and only 51% of the total rural follow this pattern. Further 39% of rural respondents follow heavy activity pattern and only 2.5% of the total urban follow this pattern.

Workshops, Seminars and Debate can be arranged at school, college and university levels as awareness program regarding these lifestyle disorder disease diabetes, rheumatoid arthritis, obesity and hypertension

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