



Survey on some disease conditions of school going student in Sundarban area (Sandeshkhali-II), North 24 PGS, West Bengal, India

Jajati Pramanik¹, Swapnanil Ray¹, Indrajit Giri², Pinaki Paira²,
Suparna Ghosh², Tanbir Ahmad Molla³, Milan Kumar Maiti³,
Partha Pratim Mahata^{*1}

^[1,2]BCDA College of Pharmacy & Technology (Department of Pharmacy)

*Corresponding author: **Partha Pratim Mahata** (Assistant Professor),
BCDA College of Pharmacy & Technology

*Corresponding author: parthapratimmahata@gmail.com

Abstract

The modern approaches of the survey is to check with prove the data on various disease, Otitis Media – OM, Reactive airway disease – RAD, Vision Impairment – VI, Scabies – Sc, Learning disorder – LD, Thalassemia – Th, Attention deficit hyperactivity disorder – ADHD, Hearing Impairment – HI, Autism – At. Sundarban is a mangrove forest area where the village sandeshkhali is located. The main survey is to create awareness of country villages on this type of disease. If anyone people follow the table and create self awareness then the purpose of the survey will full fill. This disease are not generally diagnosed every health rural health camp so the awareness is necessary. Many disease in child are important to diagnosed for life saving purposes. Some new knowledge's are gathered from such study has played most significant role in the discovery of quantity of disease.

Keywords: Survey, disease, Sundarban student, sandeshkhali-II, awareness

1. Introduction

Today's lifestyle in rural areas always associated with the physical activities such as vision impairment, learning disorder, hearing impairment etc.

In this survey, we select the Sundarban and Sandeshkhali area from their poor life style and they are not so much careful about their student. For this reason, we placed our survey on different schools of this areas. The common diseases are found on those student are –

1.Reactive airway (RAD) disease – In this disease, the conditions which are in between this group include asthma, chronic obstructive pulmonary disease (COPD), and viral upper respiratory infections. These conditions occurs by reversible airway narrowing due to external stimulation. In 1982, Pullan and Hey, confirmed that, some student be more susceptible to severe infectionble of pre existing changes in airways.^[1]

2. Otitis media – this is an infection of the air filled space behind the air drum (the middle ear). there are two types of otitis media-

- a. Acute otitis media
- b. Otitis media with effusion.

This infections are occurs due to virus of bacterial attack. When symptoms persist or worsen, antimicrobial agents be held in subgroups of children with acute otitis media.^[2]

To reduce the risk of antimicrobial resistance, a potential strategy has been evolved that limit the duration of antimicrobial treatment.^[3]

3. Vision Impairment – This is a decreased ability to see to a degree that causes problems by glasses.

4. Scabies – This is a skin disease that occurs by intensely itchy skin condition caused by a tiny burrowing mite.

It is more prevalent among young children and remains frequent in olders due to absence of immunity and in young adults due to cross infection between student.^{[4][5]}

5. Learning disorders – Learning disorders mainly occurs by auditory processing disorder, dyslexia, language processing disorder, non-verbal learning disabilities.^[6]

6. Thalassemia- Thalassemia are inherited blood disorder characterized by involving lower then normal amount of an oxygen carrying protein and by abnormal hemoglobin production.^[7]

In the year 1960, a genetically basis of thalassemia disease was introduced, by linking them the synthesis of unbalanced globin chain is possible.^[8]

7. Attention deficit hyperactivity disorder – This is a chronic condition including attention deficit hyperactivity impulsiveness.

Hearing Impairment – This is partial and total inability to hear. This can vary widely from person to person. Hearing impairment may occurs one or both ears. Hearing loss can be categorized as mild, moderate, moderate severs, severe or profound.^[9]

9. Autism – Autism is a serious development disorder that impaires the ability to interact. Autism can be characterized by troubles with social interaction and communication by restricted behavior.

Now, it is recommended that to perform comparative genomic hybridization microarray studies to determine gene microduplication that moderately associated with autism.^[10]

2. Study Area

Sundarbans

The Sundarban is a natural region in the Bengal region comprising Eastern India and Bangladesh. It is the largest single block of tidal halophytic mangrove forest in the world. The Sundarbans covers approximately 10,000 square kilometers (3,900 sq mi) of which 60 percent is in Bangladesh with the remainder in India.

Etymology

The name Sundarban can be literally translated as "beautiful forest" in the Bengali language (Shundor, "beautiful" and bon, "forest"). The name may have been derived from the Sundari trees (the mangrove species *Heritiera fomes*) that are found in Sundarbans in large numbers. Alternatively, it has been proposed that the name is a corruption of Samudraban, Shomudrobôn ("Sea Forest"), or Chandra-bandhe (name of a primitive tribe). However, the generally accepted view is the one associated with Sundari trees.

History

The history of the area can be traced back to 200–300AD. Systematic management Of this forest tract started in the 1860s after the establishment of a Forest Department in the Province of Bengal, in British India. The total area (including water) was estimated at 16,900 square kilometers (6,526 sq mi). It was a waterlogged jungle, in which tigers and other wild beasts abounded. Attempts at reclamation had not been ver successful. The Sundarbans was everywhere intersected by river channels and creeks, some of which afforded water communication throughout the Bengal region both for steamers and for native ships.

Geography

The Sundarban forest lies in the vast delta on the Bay of Bengal formed by the super confluence of the Ganges, Padma, Brahmaputra and Meghna rivers across southern Bangladesh. The seasonally flooded Sundarbans freshwater swamp forests lie inland from the mangrove forests on the coastal fringe. The forest covers 10,000 square kilometers (3,900 sq mi) of which about 6,000 square kilometers (2,300 sq mi) are in Bangladesh. The Indian part of Sundarbans is estimated to be about 4,110 square kilometers

(1,590 sq mi), of which about 1,700 square kilometers (660 sq mi) is occupied by water bodies in the forms of river, canals and creeks of width varying from a few meters to several kilometers.

Sandeshkhali-II Block

Sandeshkhali-II block is an administrative division in Basirhat subdivision, in Sundarban, North 24 parganas district of west Bengal state, India. Sandeshkhali-II block Head Quarters in Sandeshkhali town. It belongs to presidency Division. It is located 70 KM towards East from District head quarters Barasat. 72 KM from State Capital Kolkata towards west. Sandeshkhali-II Block is Bounded by Hingalganj Block towards North, Sandeshkhali-I Block towards North, Go Saba Block towards South, Hasnabad Block towards North. Taki city, Rajpur sonarpur city, Bidhan Nagar city, South Dum Dum city are the nearby cities to Sandeshkhali-II. Sandeshkhali-II community Development Block has an area of 197.27 km.

Demographics

As per 2001 census, Sandeshkhali-II block has a total population of 136,247 out of which 70,114 were males and 66,133 were females.

3. Methods

1. Study Setting: The study was carried out in different Schools, some upper primary schools from Barasat and one high school from sandeshkhali block-II, District North 24 PGS, W.B.

2. Study Design: It was a prospective type of study where boys and girls of different age groups are involved.

3. Study Period: This Study was initiated from June 2017 to August 2017 (Three months)

4. The checking and data introducing is done by direct observation of students and collected.

Results

Month: June 2017.

Sl No	School	Category	OM		HI		RAD		Sc		Th		ADHD		VI		LD		At	
			B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G		
1	Sitalia Khoitala SSK	U P	01	00	-	-	02	02	-	-	-	-	-	-	-	-	-	-	-	-
2	Sitalia Balirkhal Para SSK	U P	00	01	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3	Bowthakurani F.P. School	U P	-	-	-	-	-	-	03	02	-	-	-	-	02	01	-	-	-	-
4	North Bowthakurani F.P. School	U P	00	02	-	-	-	-	01	00	-	-	-	-	00	01	00	01	-	-
5	Purba Atapur F.P. School	U P	01	00	-	-	-	-	04	01	00	01	-	-	-	-	-	-	-	-
6	Sitalia High School	H	03	03	01	00	03	03	07	07	02	01	01	01	14	14	00	01	-	-
7	Purba Jhupkhali Ajrapara SSK	U P	03	02	-	-	-	-	02	08	-	-	-	-	-	-	-	-	-	-
8	Dhulia Jhupkhali FP School	U P	01	02	-	-	-	-	02	09	00	01	-	-	-	-	-	-	-	-

B – Boys, G – Girls

Otitis Media – OM, Reactive airway disease – RAD, VISION IMPAIRMENT – VI, SCABIES – Sc, Learning disorder – LD, Thalassemia – Th, Attention deficit hyperactivity disorder – ADHD, Hearing Impairment – HI, Autism – At

Category - UPPER PRIMARY – UP, HIGH SCHOOL – H, PRIMARY SCHOOL – Pr

Month: July 2017.

Sl No	School	Category	OM		HI		RAD		Sc		Th		ADHD		VI		LD		At	
			B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G
1	Dhuchnikhali Nilambar Vidyapith	H	00	01	00	01	-	-	05	03	-	-	-	-	07	05	-	-	-	-
2	Dwarikjungal Adi FP School	U P	-	-	-	-	-	-	-	-	-	-	-	-	02	00	-	-	-	-
3	Dakshin Dwarikjungal Adi FP School	U P	00	01	-	-	-	-	-	-	-	-	-	-	00	01	-	-	-	-
4	Dakshin korakati Ratan Chandra high school	H	00	04	-	-	02	04	05	02	00	01	-	-	04	15	-	-	01	01
5	Manipur F. P school	U P	01	01	-	-	02	05	03	05	-	-	01	01	07	10	00	01	-	-
6	D.T.B. Sahid Smriti Vidyalaya	H	-	-	-	-	-	-	00	01	-	-	-	-	01	05	-	-	-	-
7	Sodpur Upendra Bhounmic F.P. School	UP	01	01	-	-	02	05	03	05	-	-	01	01	07	10	00	01	-	-
8	South Dhusnikhali F.P. School	U P	-	-	-	-	-	-	00	01	-	-	-	-	-	-	-	-	-	-
9	Uttar Daudpur Churamani SSK	U P	01	00	-	-	-	-	-	-	01	00	-	-	-	-	-	-	-	-

Month: August 2017.

Sl No	School	Category	OM		HI		RAD		Sc		Th		ADHD		VI		LD		At	
			B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G		
1	Purba Sitalia Adibasi FP School	U P	01	00	-	-	01	00	01	01	-	-	-	-	-	-	-	-	-	-
2	Paschim Manipur B.Das Smriti MSK	U P	01	01	-	-	-	-	00	01	-	-	-	-	-	-	-	-	-	-
3	Duchnikhali Jr Basic School	Pr	03	00	-	-	-	-	-	-	-	-	-	-	02	00	-	-	-	-
4	Duchnikhali South Adi F.P School	U P	-	-	-	-	-	-	00	01	-	-	-	-	00	01	01	00	-	-
5	Dawarirjangan Bhatku Sardar FP School	Pr	00	01	-	-	-	-	00	01	-	-	-	-	00	01	-	-	-	-
6	Uttardadi FP School	Pr	-	-	01	00	-	-	-	-	-	-	-	-	01	01	-	-	-	-
7	Sandeshkhali Bhagabati Balika Vidyalaya	H	00	02	-	-	00	01	00	17	-	-	-	-	00	11	-	-	-	-
8	Shitalia Hemanta Ghosal s. Primary school	Pr	-	-	-	-	-	-	02	01	-	-	-	-	02	02	-	-	00	01

Conclusion

In this study the modern approaches of various disease on school going student is observed. The significance of this result is highlighted in the specific area, where the disease are mainly out comes. By, this study we are creating awareness of many villages on this type of disease. The parents of this villages must be careful on the food of those students whose are suffering and hygiene should maintain. Some time they can use routine checkup of those student in rural health care, by this steps awareness can be taken.

Acknowledgments

We are very thankful to BCDA College of pharmacy & technology for their support on survey in any circumstances.

References

- [1] Pullan CR, Hey EN (1982) : Wheezing, asthma and pulmonary dysfunction 10 years after infection with respiratory syncytical virus. BMJ284:1665-1669.
- [2] Lieberthal AS, Carroll AE, Chonmaitree T, et al (2013) : The diagnoses and management of acute otitis media . Pediatrics;131:964-999.
- [3] Kozyrski A, Klassen TP et al (2010):- short course antibiotics for acute otitis media Cochrane Database Syst Rev: (CD001095-CD001095).
- [4] McCarthy Js, Kemp DJ, Walton SF, Currie BJ (2004) : Scabies; more than just an irritation. Postgrad Med J(80):382-387.s
- [5] Walton SF, Holt Dc, Currie BJ, Kemp DJ (2004). Adv. Parasitol(57): 309-376

- [6] Bidwell L, Willcutt E, De Fries J, Pennington B. (2007): Testing for neurophysio-logical endophenotypes in sibling discordant for ADHD. Biological Psychiatry (62): 991-998.
- [7] Nathan DG, Gunn RB (1966): The consequences of unbalanced Hemoglobin synthesis. Am J Med.41(5):815-830.
- [8] Ingram VM, Stretton AO(1959): Genetic basis of thalassemia diseases Nature (184):1903-1909.
- [9]Gopal H.S.(1992). Infant cry analysis: Clinical Applications and Research directions. Journal of All India Institute of Speech and Hearing(9), 15-25.
- [10]Beaudt AL(2013). The utility of Chromosomal microarray analysis in development and behavioral Pediatrics. Child Development . (84): 121-122.

Access this Article in Online	
	Website: www.ijarbs.com
	Subject: Survey report
Quick Response Code	
SDOI: 10.22192/ijarbs.2018.05.04.015	

How to cite this article:

Jajati Pramanik, Swapnanil Ray, Indrajit Giri, Pinaki Paira, Suparna Ghosh, Tanbir Ahmad Molla Milan Kumar Maiti, Partha Pratim Mahata. (2018). Survey on some disease conditions of school going student in Sundarban area (Sandeshkhali-II), North 24 PGS, West Bengal, India. Int. J. Adv. Res. Biol. Sci. 5(4): 146-151.

DOI: <http://dx.doi.org/10.22192/ijarbs.2018.05.04.015>