



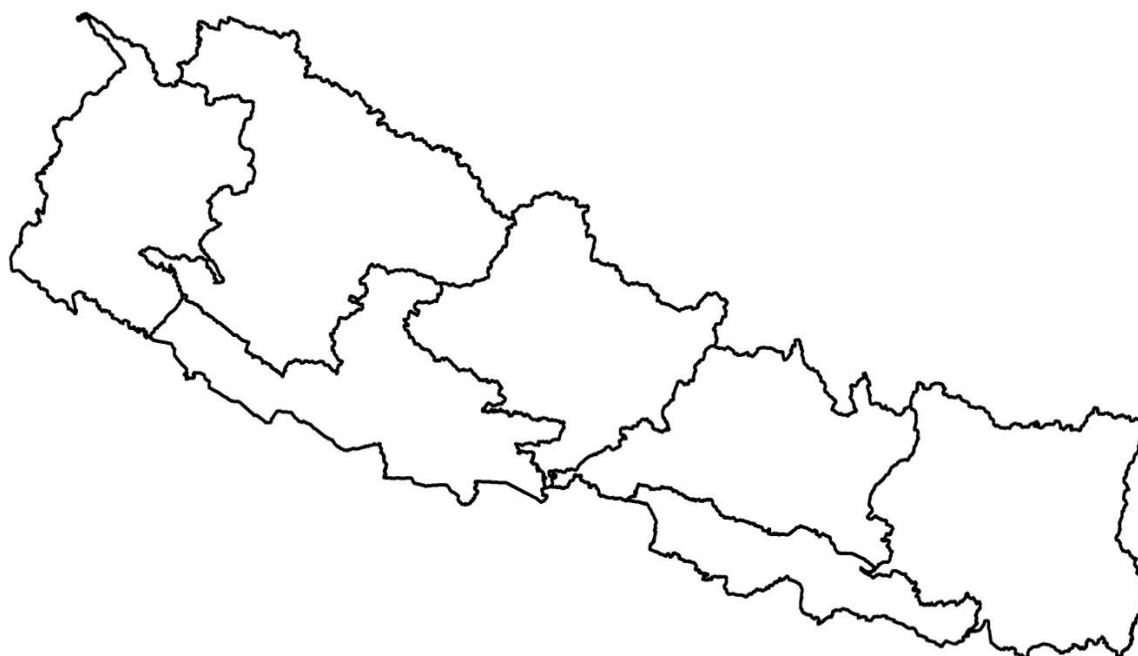
# Non-communicable Diseases in Nepal

Research Roundup October 2022

*Making non-communicable diseases a national priority*

# Non-communicable Diseases in Nepal-Research Roundup

October 2022



**VOLUME III**

**ISSUE 10**

Suggested Citation:

NCD Watch Nepal: Non-communicable Diseases in Nepal-Research Roundup October 2022. Adhikari TB, Paudel K, Bhusal S, Neupane D. vol. III, issue 10 Kathmandu Nepal: 2022: 11.15.

<b>Roundup Summary .....</b>	<b>4</b>
<i>Stakeholder engagement in a hypertension and diabetes prevention research program: Description and lessons learned .....</i>	<i>4</i>
<i>Association of childhood trauma, and resilience, with quality of life in patients seeking treatment at a psychiatry outpatient: A cross-sectional study from Nepal .....</i>	<i>4</i>
<i>Adherence to Dietary Recommendation and Its Associated Factors among People with Type 2 Diabetes: A Cross-Sectional Study in Nepal .....</i>	<i>5</i>
<i>Community perspectives on the implementation of a group psychological intervention for adolescents with depression: A qualitative study in rural Nepal.....</i>	<i>5</i>
<i>Cost-effectiveness of psychological intervention within services for depression delivered by primary care workers in Nepal: economic evaluation of a randomized control trial.....</i>	<i>6</i>
<i>The distinct experience of supportive care needs among cervical cancer patients: A qualitative study.....</i>	<i>6</i>
<i>Quality Of Life of Cancer Patients Attending a Cancer Hospital, Lumbini Province, Nepal .....</i>	<i>7</i>
<i>Blindness among Patients with Type II Diabetes Mellitus Presenting to the Outpatient Department of Ophthalmology of a Tertiary Care Centre: A Descriptive Cross-sectional Study .....</i>	<i>7</i>
<i>Mental disorders and suicidality among Opioid Agonist Treatment service users in Nepal: A cross-sectional study .....</i>	<i>8</i>
<i>Clinical Profile and Short-term Outcome of Heart Failure Patients in a Tertiary Hospital in Kaski, Nepal: A Cross-sectional Study.....</i>	<i>9</i>
<i>Prevalence and Management of the Panic Disorder in Nepal .....</i>	<i>9</i>
<i>Particulate air pollution and metabolic risk factors: Which are more prone to cardiac mortality .....</i>	<i>10</i>
<i>An Overview of Colorectal Cancer in Tertiary care Cancer Center of Nepal .....</i>	<i>10</i>

## Roundup Summary

For the month of October 2022, our scoping on non-communicable diseases in Nepal found 13 published articles. The majority of the studies were cross-sectional studies and, covering the topic of mental health, diabetes and cancer.

### Stakeholder engagement in a hypertension and diabetes prevention research program: Description and lessons learned

**DOI:** <https://doi.org/10.1371/journal.pone.0276478>

**Context:** Despite considerable attention to stakeholder engagement, there is limited information on how stakeholders are engaged.

**Methodology:** Stakeholders identified based on the 7P framework were engaged through focus group discussions, in-depth interviews, participatory workshops, individual consultation, information sessions, and representation in study team and implementation committees.

**Key message:** Stakeholder engagement helped in data collection and enhanced adherence to the intervention, mutual learning, and smooth intervention adoption. The study concluded that it was beneficial to have stakeholder engagement in the design, implementation, and monitoring of workplace-based hypertension and diabetes management research program in Nepal.

NCD Watch Nepal

### Association of childhood trauma, and resilience, with quality of life in patients seeking treatment at a psychiatry outpatient: A cross-sectional study from Nepal

**DOI:** <https://doi.org/10.1371/journal.pone.0275637>

**Context:** Childhood maltreatment is a determinant of poor mental health and quality of life.

**Methodology:** This was a descriptive cross-sectional study conducted among 99 patients with trauma and visiting psychiatry outpatient of Tribhuvan University Teaching hospital, Kathmandu, Nepal.

**Key message:** The study found poor quality of life among almost one-third of the patients. Emotional neglect during childhood and low resilience had independent associations with poor quality of life. Efforts should be made to minimize childhood maltreatment and explore strategies to build resilience suited to the cultural context to improve quality of life.

## Adherence to Dietary Recommendation and Its Associated Factors among People with Type 2 Diabetes: A Cross-Sectional Study in Nepal

**DOI:** <https://doi.org/10.1155/2022/6136059>

**Context:** Diet quality and quantity over the longer term are relevant to the prevention and management of diabetes and its complications.

**Methodology:** A cross-sectional descriptive study was conducted among 204 type 2 diabetic patients in Gandaki Medical College Teaching Hospital and Diabetes, Thyroid, and Endocrinology Care Center, Pokhara, Nepal. The Perceived Dietary Adherence Questionnaire was used to assess dietary adherence.

**Key message:** Among the total participants, only 15.7% had good dietary adherence. Factors such as family type, affordability of recommended diet, self-control on food, physical activity, and medication adherence were significantly associated with adherence to dietary recommendations.

## Community perspectives on the implementation of a group psychological intervention for adolescents with depression: A qualitative study in rural Nepal

**DOI:** <https://doi.org/10.3389/fpsy.2022.949251>

**Context:** Adolescents are more reluctant than any other age group to seek help with their mental health due to difficulties accessing services, concerns about confidentiality, and trust in the provider-patient relationship.

**Methodology:** This was a qualitative study that involved 126 interviews with the population of adolescents with depression, organization workers, non-depressed adolescents, parents/guardians, and teachers.

**Key message:** This study concluded that school-based psychological interventions facilitated by local people could be an acceptable option in rural Nepal.

## Cost-effectiveness of psychological intervention within services for depression delivered by primary care workers in Nepal: economic evaluation of a randomized control trial

**DOI:** <https://doi.org/10.1017/gmh.2022.54>

**Context:** Integrating services for depression into primary care is key to reducing the treatment gap in low- and middle-income countries.

**Methodology:** This is a randomized controlled trial conducted in primary care facilities in Chitwan, Nepal. People diagnosed with depression were randomized to receive either standard treatment (ST) or standard treatment plus psychological intervention (T + P).

**Key message:** This study concluded that providing a Healthy Activity Programme (HAP) within integrated depression services in Chitwan was cost-effective.

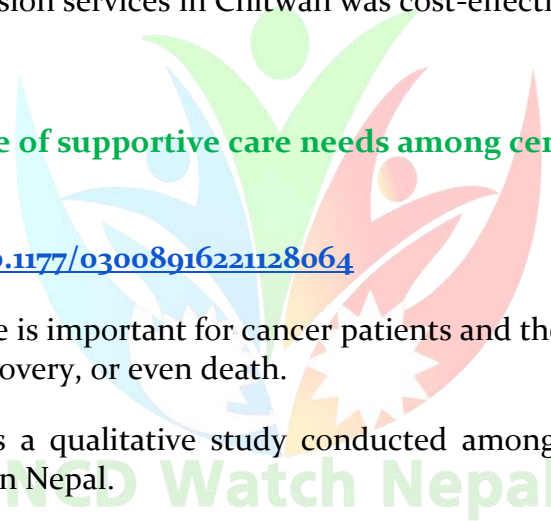
## The distinct experience of supportive care needs among cervical cancer patients: A qualitative study

**DOI:** <https://doi.org/10.1177/03008916221128064>

**Context:** Supportive care is important for cancer patients and their families to cope with a diagnosis, treatment, recovery, or even death.

**Methodology:** This was a qualitative study conducted among 30 cancer patients at a cancer-specific hospital in Nepal.

**Key message:** This study suggested that recognizing the supportive care needs of patients with cervical cancer during treatment by healthcare professionals and family members is vital to facilitate optimal care.





## Quality Of Life of Cancer Patients Attending a Cancer Hospital, Lumbini Province, Nepal

**Link:** <https://www.nepjol.info/index.php/JAAR/article/view/48841>

**Context:** Quality of life is an important aspect and high priority of cancer patient care.

**Methodology:** This was a cross-sectional study conducted among cancer patients in a cancer hospital in Lumbini province, Nepal. European Organization for Research and Treatment of Cancer Quality of Life Questionnaire – C30 (EORTC QLQ- C30) was used to measure the quality of life.

**Key message:** The transformed mean (SD) score of Global Health/QoL was 35.84 (16.87), the functional scale was 36.35(15.54), and the symptoms scale was 53.02 (14.61). Occupation and site of cancer were significantly associated with quality of life.

## Blindness among Patients with Type II Diabetes Mellitus Presenting to the Outpatient Department of Ophthalmology of a Tertiary Care Centre: A Descriptive Cross-sectional Study

**Link:** <https://www.jnma.com.np/jnma/index.php/jnma/article/view/7702/4359>

**Context:** Diabetic retinopathy is a major microvascular complication of diabetes and may progress to sight-threatening stages causing blindness.

**Methodology:** A descriptive cross-sectional study was conducted among 449 patients with type II diabetes mellitus presenting to the Outpatient Department of Ophthalmology of Dhulikhel Hospital, Kavre, Nepal.

**Key message:** Among the total 449 type II diabetic patients, blindness was seen in 17 (3.79%). Screening and timely management of diabetic retinopathy could reduce the prevalence of blindness due to diabetic retinopathy.

**'The broker also told me that I will not have problems after selling because we have two and we can survive on one kidney': Findings from an ethnographic study of a village with one kidney in Central Nepal**

**DOI:** <https://doi.org/10.1371/journal.pgph.0000585>

**Context:** Kidney selling is associated with a growing burden of End-Stage Renal Diseases (ESRD) globally. The growing burden of ESRD and demand for transplantation have fueled kidney selling in low-income countries.

**Methodology:** This study employed an ethnographic approach in which the researcher lived and observed the residents' life and carried out formal and informal interactions including in-depth interviews with key informants, community members, and kidney sellers in Hokse village, Kavrepalanchok district, Nepal.

**Key message:** This study found that kidney selling was a result of a complex interaction of vulnerability and contextual factors at the individual and community level. Brokers exploited the vulnerabilities of the community members and were able to lure them into kidney selling. An expanding network and influence of kidney brokers require urgent restrictive actions by the legal authority.

**Mental disorders and suicidality among Opioid Agonist Treatment service users in Nepal: A cross-sectional study**

**DOI:** <https://doi.org/10.1016/j.ssmmh.2022.100165>

**Context:** Mental disorders and suicidality are common among Opioid Agonist Treatment (OAT) service users and impact the outcomes of OAT programs.

**Methodology:** This was a cross-sectional study conducted among 231 participants from five OAT centers in the Kathmandu valley. The Nepalese version of the Kessler 6 Psychological Distress Scale (K6), and the Mini International Neuropsychiatric Interview (M.I.N.I.) 7.0.2. were used in the study.

**Key message:** Lifetime suicidality and lifetime major depressive disorders were observed in 26.0% and 24.2% of the participants. Lifetime suicidality was significantly higher among participants with lifetime psychotic disorder, lifetime antisocial personality disorder, and having a Kessler-6 score  $\geq 13$ .



## Clinical Profile and Short-term Outcome of Heart Failure Patients in a Tertiary Hospital in Kaski, Nepal: A Cross-sectional Study

**DOI:** <https://www.jlmc.edu.np/index.php/JLMC/article/view/495>

**Context:** Heart failure is one of the leading causes of hospitalization.

**Methodology:** A descriptive cross-sectional study was conducted among 116 heart failure patients at Pokhara Academy of Health Sciences, Kaski, Nepal.

**Key message:** This study found that dilated cardiomyopathy was the most common etiology and heart failure with preserved ejection fraction was the predominant type of heart failure. The median duration of hospitalization was five days and the in-hospital mortality was 2.6%.

## Prevalence and Management of the Panic Disorder in Nepal

**DOI:** <https://www.intechopen.com/online-first/84265>

**Context:** Although panic attacks are not life-threatening, they can be terrifying and can have a substantial impact on quality of life.

**Key message:** Since the war, a significant earthquake, and the COVID-19 pandemic, there have been increased reports of mental health problems with panic disorder being one of the most prevalent. The mental health counseling situation in Nepal is largely poor. This article recommends that long-term treatment be built on academic training as part of national health policy. Also, more resources and attention should be devoted to mental health in Nepal.

## Particulate air pollution and metabolic risk factors: Which are more prone to cardiac mortality

**DOI:** <https://doi.org/10.3389%2Fpubh.2022.995987>

**Context:** Cardiovascular diseases (CVDs) have become a grave risk in LMICs, specifically in the densely packed South Asian region.

**Methodology:** The grey relational analysis (GRA) methodology was used to evaluate data from 2001 to 2018 using the database of Global Burden of Disease (GBD).

**Key message:** Study findings revealed that India and Nepal are the leading drivers of CVD mortality among all SAARC nations. It is also reported that CVD mortality is considerably impacted by household air pollution from the combustion of solid fuel.

## An Overview of Colorectal Cancer in Tertiary care Cancer Center of Nepal

**DOI:** <https://doi.org/10.3126/njc.v6i2.48766>

**Context:** The prevalence of colorectal cancer has been dramatically growing at an alarming rate globally in recent years.

**Methodology:** This is a retrospective study involving 56 colorectal cancer cases at the Department of Pathology in B P Koirala Memorial Cancer Hospital, Chitwan, Nepal.

**Key message:** The study found that the rectum was the commonest site and the commonest age group was 61-70 years for colorectal cancer. Among the total cases, 44.6% were diagnosed in the advanced stage either stage III or IV.

We thank you all for joining our initiative to promote evidence-informed policymaking and promote public awareness of the non-communicable disease (NCDs) and related issues in Nepal- we are committed to staying up to date with the latest NCD research in Nepal.

This issue covers a summary of scientific publications on NCDs in Nepal for the month of October 2022.

Should you have colleagues who'd like to receive these updates via email ([ncdwatchnepal@gmail.com](mailto:ncdwatchnepal@gmail.com))

Individual summary of the round-up is also available on our social media outlets:

- ⇒ Twitter: <https://twitter.com/NCDWatchNepal>
- ⇒ Facebook: <https://www.facebook.com/NCDWatchNepal>
- ⇒ LinkedIn: <https://www.linkedin.com/company/ncd-watch-nepal>

Please join us and share with relevant colleagues. As always, previous editions of the round-up are available in our archive here at <https://ncdwatchnepal.wordpress.com/research-round-up/>  
[https://nepalhealthfrontiers.org/publication\\_type/ncd-watch-nepal-research-roundup/](https://nepalhealthfrontiers.org/publication_type/ncd-watch-nepal-research-roundup/)

The logo for NCD Watch Nepal features a stylized sun or flower-like shape composed of several overlapping petals in shades of blue, green, yellow, and red. Below this graphic, the text "NCD Watch Nepal" is written in a bold, green, sans-serif font.

**NCD Watch Nepal**

**Let's unite to beat NCDs.**

*#actonNCDs #beatNCDs*