

SOME HYGIENIC FEATURES OF THE LIFESTYLE OF MEDICAL STUDENTS

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Systematic and purposeful campaigns designed to promote a healthy lifestyle among the youth are a strategic task for the healthcare system and the state in general. This study aimed to explore the hygienic features of the lifestyle of medical students. It involved 109 students of medical faculties aged 18-26 years, who participated in an anonymous online survey created in Yandex Forms in accordance with MR (methodical recommendations) 2.1.10.0033-11. We calculated the relative values and their confidence intervals, and the significance of the differences was assessed using the chi-square test (χ^2) at $p < 0.05$. It was found that active smoking remains a significant behavioral risk among medical students, particularly males (27.3%). The majority of medical students do not engage in adequate levels of physical activity (64.2%) and do not get sufficient sleep at night (77.9%). As for the patterns of behavior in the context of medical assistance, those rather common among medical students are categorized as irresponsible: many visit a doctor only in case of serious symptoms of the disease (54.1%), undergo medical checkups in an untimely fashion (31.5%), do not follow doctor's instructions and stop course treatments early (37.6%), practice self-medication (85.3%), resort to traditional medicine (55.1%). Every fifth respondent did not follow the rules of hand washing, and 17.4% did not take daily care of their body. Unsafe forms of sexual behavior are typical for every fifth medical student. Thus, prevention and correction of the identified lifestyle risk factors hold significant potential for preserving the health of medical students.

Keywords: lifestyle, risk factors, medical students, addictive behavior, medical activity

Author contribution: Dementiev AA — study design and conceptualization, article editing; Tsurgan AM — statistical processing and analysis of data, article editing; Soloviev DA — article authoring; Kopaev IV — collection and primary processing of data; Osadets AYU — preparation of the sociological study.

Compliance with ethical standards: all students submitted the informed consent to participation in the study.

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НЕКОТОРЫЕ ГИГИЕНИЧЕСКИЕ ОСОБЕННОСТИ ОБРАЗА ЖИЗНИ СТУДЕНТОВ-МЕДИКОВ

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Системная целенаправленная работа по формированию установок здорового образа жизни среди молодежи является одной из стратегических задач государства и здравоохранения. Целью исследования было изучить гигиенические особенности образа жизни студентов-медиков. Объектом исследования стали 109 студентов медицинских факультетов в возрасте 18–26 лет. Анонимное онлайн-анкетирование с использованием сервиса Yandex Forms проведено в соответствии с МР 2.1.10.0033-11. Выполнен расчет относительных величин, их доверительных интервалов, значимость различий оценивали по критерию хи-квадрат (χ^2) при $p < 0,05$. Установлено, что активное курение продолжает оставаться актуальным поведенческим риском студентов-медиков, особенно студентов мужского пола (27,3%). Для большинства студентов-медиков характерны недостаточные двигательная активность (64,2%) и продолжительность ночного сна (77,9%). Среди студентов-медиков достаточно распространены рискованные формы безответственного медицинского поведения, такие как обращение к врачу только в случае серьезных симптомов заболевания (54,1%), несвоевременное прохождение медосмотров (31,5%), прерывание курса назначенного врачом лечения (37,6%), самолечение (85,3%), обращение к средствам народной медицины (55,1%). Каждый пятый респондент не соблюдал правила мытья рук, а 17,4% не осуществляли ежедневный уход за своим телом. Для каждого пятого студента-медика характерны небезопасные формы сексуального поведения. Таким образом, существенный потенциал сохранения здоровья студентов-медиков содержится в оптимизации профилактической работы по коррекции выявленных факторов риска образа жизни.

Ключевые слова: образ жизни, факторы риска, студенты-медики, аддитивное поведение, медицинская активность

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Соблюдение этических стандартов: все студенты подписали добровольное информированное согласие на участие в исследовании.

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Systematic and purposeful campaigns designed to promote a healthy lifestyle among the youth are a strategic task for the healthcare system and the state in general: this work supports replenishment of the country's labor force with healthy and able-bodied generations ready for the current challenges [1–5]. In this context, special attention should

be paid to the development of sound lifestyle values among students of medical universities. A conscious commitment to rational nutrition, regular physical activity, avoidance of smoking, excessive alcohol use, and other addictive behaviors, along with a responsible attitude toward medical checkups and self-preserving behavior, should be regarded as an essential

prerequisite for effective preventive work with patients [6, 7]. Despite being well aware of the impact of lifestyle on health, most medical students consider it acceptable to have bad habits, eat irregularly, disregard work–rest balance, and engage in physical activity at suboptimal levels [8–13]. The most common causes of risky behaviors among medical university students are lack of time and fatigue after classes due to high academic loads [8, 9, 14–18]. The trends registered often among them reveal the growing prevalence of bad habits (alcohol and tobacco use) that have a negative effect on their quality of life [19]. Intense studying, an imbalanced work–rest schedule, insufficient sleep, and poor nutrition lead to a significant deterioration in the health of medical students from their first to sixth years of university [20, 21].

Researchers are actively exploring the outlined problems, yet the study of the hygienic aspects of medical students' lifestyles remains an urgent issue. It is necessary to continue the search for the effective ways of elimination of the identified health risks, which supports the relevancy of this work.

This study aimed to explore the hygienic features of the lifestyle of medical students.

METHODS

The study was conducted in Pavlov Ryazan State Medical University. The sample included 109 students from all faculties aged 18–26 years; they participated in an anonymous online survey built in Yandex Forms. The survey questions were grouped into blocks as suggested in MR (methodological recommendations) 2.1.10.0033-11: addictive and forced behavior, physical activity insufficiency, irresponsible medical and hygienic behavior, non-compliance with personal hygiene rules, unsafe sexual behavior [22]. To be included, the participant had to be a student of Ryazan State Medical University and submit the answered survey. Failure to answer the questions in full or the provision of inadequate answers constitutes grounds for exclusion.

The statistical processing of the collected data included calculation of the relative values and their 95% confidence intervals (95% CI) using the Wilson CI method. The significance of differences was assessed using the chi-squared test (χ^2), the target level was $p < 0.05$. The data were prepared and processed in MS Excel 19 (Microsoft, USA).

RESULTS

The study showed that 12.8% of the surveyed medical students actively smoke, while 7.3% of respondents periodically resort to this bad habit (Table). Smoking was more common among male students: 27.3% versus 9.2% of female participants ($\chi^2 = 5.1$; $p = 0.024$). At the level of study years, though, we failed to identify significant differences in the prevalence of smoking within the considered cohort. It was found that 63.6% of smokers usually smoke up to five cigarettes a day, while the rest smoke 15 or more. For regular smokers, the median

intake of nicotine was 1.5 [0.0; 3.5] mg/day, which was slightly higher than that among students who smoked occasionally (0.0 [0.0; 0.15] mg/day; $p = 0.06$). On average, 64.9% [53.5; 74.8] of medical students regularly stay in smoking rooms.

As for alcohol, 62.4% [53.0; 70.9] of the surveyed medical students consume it, with the proportion of drinkers among male participants slightly higher than among females: 72.7% [51.9; 86.9] versus 59.8% [49.3; 69.5], respectively ($\chi^2 = 1.3$; $p = 0.263$). Year-wise, we did not reveal significant differences, but it was established that the share of medical students who drink alcohol was the lowest among freshmen and sophomores (59.2% [45.3; 71.8]), and highest among the third-year students (67.5% [52.0; 79.9]; $\chi^2 = 0.7$; $p = 0.702$). A retrospection of weekly alcohol consumption revealed that beer, preferred by 28.0% of the respondents, is the most popular drink among them, followed by wine and strong alcoholic beverages, which were consumed by 20.8 and 13.6% of the participating students, respectively. The median daily consumption of pure alcohol 0.7 [0.0; 4.9] g, and the maximum daily dose reached 29.9 g.

The survey revealed that 3.7% [1.4; 9.1] of the respondents had at least once taken narcotics without a prescription, although currently none of the respondents use them. However, a few students (2.7%) noted that they take non-narcotic psychoactive substances.

More than half of the surveyed medical students (64.2% [54.9; 72.6]) engaged in insufficient physical activity, defined as performing less than 150 minutes of moderate-intensity exercise per week. We uncovered a respective trend: from junior to senior years, the students to be physically active less and less (Fig.).

We have also revealed that a certain portion of participating medical students approaches medical checkups and assistance irresponsibly. For example, 54.1% [44.8; 63.2] them indicated that they consult a doctor only if serious symptoms of the disease appear. Only 68.5% [59.3; 76.5] of the participants underwent a medical examination once a year, while the rest took it less frequently. On average, 37.6% [29.1; 46.9] of medical students interrupted the course of treatment prescribed by a doctor, 85.3% [77.5; 90.8] resorted to self-medication, and 55.1% [45.7; 64.1] turned to traditional medicine. Gender and study year did not have a significant effect on the prevalence of such irresponsible medical behavior among the respondents.

The majority of medical students, regardless of gender and study year, habitually lacked proper sleep: 77.9% [69.3; 84.7] of the participants mentioned that they slept less than 7 hours per day. At the same time, 96.3% [90.9; 98.6] of the respondents followed the recommended routines of ventilation (once a day or more often) and wet cleaning of their homes (at least once a week). Almost every fourth participant failed to comply with the rules of personal hygiene. In particular, 25.7% [18.4; 34.6] of students brushed their teeth less than twice a day, 22.7% [15.9; 31.4] did not follow handwashing recommendations, and 17.4% [11.5; 25.6] did not take daily care of their bodies. Gender had no significant effect in the prevalence of these deviant behavioral patterns.

Table. Prevalence of active smoking among medical students

Attitude towards smoking		Male	Female	Total
Smoke	% [Q1; Q3]	27.3 [13.2; 48.2]	9.2% [4.7; 17.1]	12.8 [6.6; 19.1]
Smoke occasionally	% [Q1; Q3]	9.1 [2.5; 27.8]	6.9 [3.2; 14.2]	7.3 [3.8; 13.8]
Don't smoke	% [Q1; Q3]	63.6 [42.9; 80.3]	83.9 [74.8; 90.2]	79.8 [71.3; 86.3]

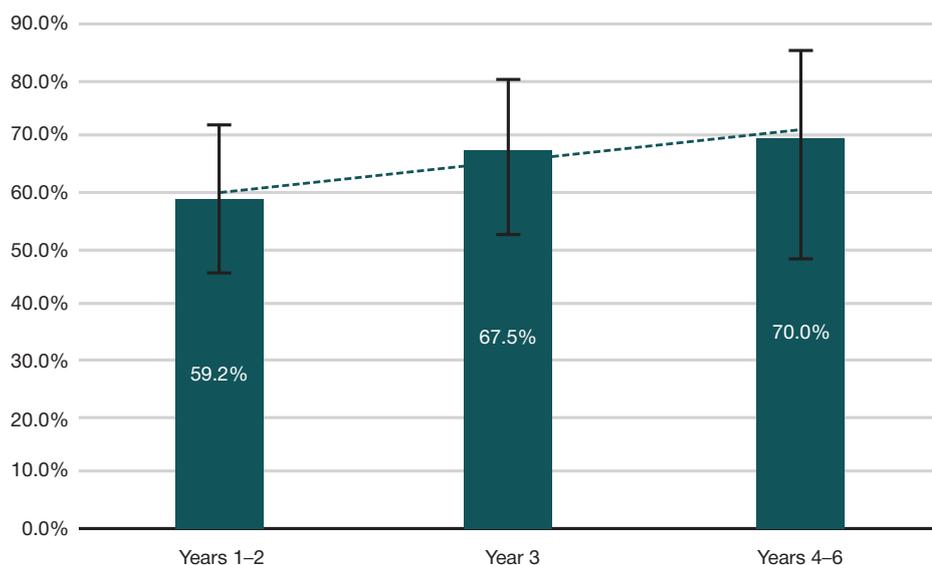


Fig. The proportion of students with insufficient physical activity, breakdown by study year, %

One in five medical students who participated in the study practiced unsafe sex. In particular, condoms or other means of contraception were not used by 22.9% [16.1; 31.7] and 19.4% [13.1; 27.9] of the respondents, respectively, when pregnancy was not a goal.

DISCUSSION

The study showed that among medical students, smoking remains an urgent problem associated with addictive behavior, and its prevalence even slightly exceeds the data reported by other authors [9]. At the same time, the discovered levels of alcohol consumption are generally consistent with the results of other studies [9, 23, 24]. None of the respondents had a daily dose of pure alcohol exceeding 30 g, which confirms lack of alcohol abuse patterns and allows disregarding drinking as a risk factor for the health of medical students [22].

We have found insufficient sleep and physical activity to be significant risk factors for the health of medical students; this is consistent with the findings of other authors [23, 24]. From 30 to 40% of the respondents were not satisfied with the quality of their sleep. The main reason behind it are the irrational mental work patterns [20]. According to some data, two thirds of students go to bed after midnight and lack sleep, which reduces the effectiveness of their mental activity and potentially underpins even greater disruption of the work–rest balance [25, 26].

Irresponsible attitude towards medical checkups and treatment may stem from the strong motivation to master a complex curriculum as well as professional overconfidence, especially in cases of self-medication and failure to fully comply with doctor's prescriptions. Researchers have reported previously that generally, medical students tend to neglect their health and disregard the need to follow the principles of health-saving behavior [27]. At the same time, the high prevalence of use of medications without prescriptions revealed in this study is confirmed by data from other authors [28].

The fact that nearly one in four students neglects personal hygiene rules calls for special efforts in hygiene education. In addition, special attention should be paid to the prevention

of unsafe forms of sexual behavior among students. The attitude of peers in the social environment has a significant impact on the motivation to follow the principles of a healthy living, which once again testifies to the importance of hygienic education [29]. According to the majority of students, the fundamental source of information on healthy lifestyle are the disciplines of the medical university's curriculum that systematically consider the elements thereof [18, 30].

The limitation of this study is the lack of assessment of the actual nutrition and nutritional status of the respondents as well as lack of the respective risk calculations.

CONCLUSIONS

Active smoking continues to be an urgent behavioral risk among medical students, especially male (27.3%). Alcohol consumption, while highly prevalent (62.4%), does not reach the abuse threshold. The use of drugs and non-narcotic psychoactive substances is generally uncommon for this cohort.

The majority of medical students (64.2%) do not engage in physical activity at an adequate level, and this problem worsens as they progress through their studies. Moreover, 77.9% report insufficient night sleep.

As for the patterns of behavior in the context of medical assistance, those rather common among medical students are categorized as irresponsible: many visit a doctor only in case of serious symptoms of the disease (54.1%), undergo medical checkups in an untimely fashion (31.5%), fail to follow doctor's instructions and stop course treatments early (37.6%), practice self-medication (85.3%), resort to traditional medicine (55.1%).

While most students observed home hygiene, one in four did not follow oral hygiene practices, one in five neglected proper handwashing, and 17.4% did not maintain daily body care.

Unsafe forms of sexual behavior — optional condom use during intercourse or neglecting contraception when pregnancy is not planned — remain relevant for every one in five medical students.

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