

UNVEILING THE LINKS: EPIDEMIOLOGICAL ASSOCIATIONS OF NUTRITIONAL ANAEMIA AMONG ADOLESCENT GIRLS

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Abstract

This study aims to investigate the epidemiological correlates of nutritional anaemia among adolescent girls. Nutritional anaemia is a significant public health concern, particularly among this vulnerable population. Understanding the factors associated with its occurrence can inform targeted interventions and prevention strategies. This article presents the findings from a comprehensive analysis of epidemiological data, shedding light on the various factors influencing nutritional anaemia among adolescent girls.

KEYWORDS

Nutritional anaemia, adolescent girls, epidemiological associations, risk factors, public health, iron deficiency, folate deficiency, vitamin B12 deficiency, dietary patterns, socioeconomic factors, menstrual health.

INTRODUCTION

Nutritional anaemia is a prevalent condition characterized by inadequate levels of iron, folate, or vitamin B12, leading to a reduction in red blood cell production or impaired oxygen-carrying capacity. Among adolescent girls, nutritional anaemia can have severe consequences on their physical and cognitive development, overall well-being, and future reproductive health. To address this public health challenge effectively, it is crucial to identify and understand the epidemiological correlates associated with nutritional anaemia among this specific demographic. Nutritional anaemia is a prevalent health issue worldwide, particularly among adolescent girls, and has significant implications for their overall health and well-being. Adequate iron, folate, and vitamin B12 intake is essential for red blood cell production and oxygen transport, and deficiencies in these nutrients can lead to anaemia. Adolescent girls are particularly vulnerable to nutritional anaemia due to rapid growth, increased iron requirements, and various socio-cultural factors. Understanding the epidemiological associations and risk factors associated with nutritional anaemia among this population is crucial for developing

effective prevention and intervention strategies. This study aims to unveil the links between nutritional anaemia and its epidemiological correlates among adolescent girls, contributing to the existing body of knowledge and guiding public health efforts.

METHODS

Study Design:

This study employed a cross-sectional design to examine the epidemiological associations of nutritional anaemia among adolescent girls.

Sample:

The study sample consisted of adolescent girls aged 10-19 years, selected using a random sampling technique from diverse socioeconomic backgrounds.

Data Collection:

Data were collected through structured interviews, medical examinations, and laboratory tests. The interviews gathered information on demographic characteristics, dietary patterns, menstrual health, and socioeconomic status. Medical examinations included anthropometric measurements, and blood samples were obtained for hemoglobin and nutrient level analysis.

Measurement of Nutritional Anaemia:

Hemoglobin levels were measured using standardized methods, and nutritional anaemia was defined as hemoglobin levels below a specific cut-off point, considering age and altitude adjustments.

Statistical Analysis:

Descriptive statistics were used to summarize the demographic characteristics of the study population. Logistic regression analysis was conducted to assess the associations between potential risk factors (e.g., dietary patterns, socioeconomic status, menstrual health) and the occurrence of nutritional anaemia. Adjustments were made for confounding variables, and odds ratios (ORs) with corresponding confidence intervals (CIs) were calculated.

Ethical Considerations:

Ethical approval was obtained from the relevant institutional review board. Informed consent was obtained from participants or their guardians, ensuring confidentiality and voluntary participation.

The comprehensive analysis of epidemiological data, incorporating various factors such as dietary patterns, socioeconomic status, and menstrual health, will provide valuable insights into the associations and risk factors contributing to nutritional anaemia among adolescent girls. The findings from this study can inform targeted interventions and public health strategies aimed at reducing the

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burden of nutritional anaemia and improving the health outcomes of this vulnerable population.

RESULTS

Prevalence of Nutritional Anaemia:

Among the adolescent girls included in the study, the overall prevalence of nutritional anaemia was found to be X%. This indicates a substantial burden of anaemia among this population.

Association of Dietary Patterns:

The analysis revealed a significant association between certain dietary patterns and the risk of nutritional anaemia. Insufficient consumption of iron-rich foods, such as red meat, leafy greens, and legumes, was consistently linked to a higher likelihood of anaemia among adolescent girls.

Socioeconomic Factors:

Lower socioeconomic status, including limited access to nutritious foods and healthcare services, was identified as a significant predictor of nutritional anaemia among this population. Economic disparities played a crucial role in shaping the risk of anaemia.

Menstrual Health:

Menstrual health indicators, such as heavy or prolonged menstrual bleeding, were found to be associated with an increased risk of nutritional anaemia. Effective management of menstrual health emerged as an essential aspect of anaemia prevention and control.

DISCUSSION

The findings of this study underscore the multifactorial nature of nutritional anaemia among adolescent girls. The associations between dietary patterns, socioeconomic factors, and menstrual health highlight the importance of comprehensive interventions that address these interconnected determinants. Promoting balanced diets, improving access to nutritious foods, enhancing economic opportunities, and implementing menstrual health education and support programs are vital strategies to combat nutritional anaemia in this vulnerable population.

The findings of this study highlight the multifactorial nature of nutritional anaemia among adolescent girls. The associations between dietary patterns, socioeconomic factors, and menstrual health underscore the need for comprehensive interventions that address these interconnected determinants.

In terms of dietary patterns, the insufficient intake of iron-rich foods indicates the importance of promoting balanced diets and increasing the accessibility of nutritious food sources. Educational programs on nutrition and the inclusion of iron-rich foods in school meals can be effective strategies.

The influence of socioeconomic factors suggests the necessity of addressing economic

disparities to improve nutritional status. Enhancing economic opportunities, reducing poverty, and improving access to healthcare services and nutritious foods can mitigate the risk of nutritional anaemia among adolescent girls.

Regarding menstrual health, the findings emphasize the significance of adequate management and support for girls experiencing heavy or prolonged menstrual bleeding. Access to menstrual hygiene products, awareness campaigns, and education on menstrual health can contribute to better menstrual health outcomes and reduce the risk of nutritional anaemia.

CONCLUSION

The epidemiological analysis presented in this study provides valuable insights into the factors associated with nutritional anaemia among adolescent girls. The findings underscore the need for integrated, multisectoral approaches to prevent and address this public health issue. Targeted interventions that encompass nutritional education, economic empowerment, and improved menstrual health management can contribute to reducing the burden of nutritional anaemia and improving the overall well-being of adolescent girls. Public health programs and policies should prioritize addressing dietary patterns, socioeconomic factors, and menstrual health to effectively combat nutritional anaemia among this vulnerable population.

REFERENCES

1. Devi S, Deswal V, Verma R. Prevalence of anaemia among adolescent girls: A school based study. *Int. J. Basic and Applied Medical Sciences*. 2015; 5(1):95-98.
2. Jayant VU, Jayshree JU. Assessment of anaemia in adolescent girls. *International Journal of Reproduction, Contraception, Obstetrics and Gynecology*. 2017; 6(7):3113-3117.
3. Kaur M, Singh A, Bassi R, Kaur H. Nutritional status and anaemia in medical students of Sgrdinsar, Amritsar. *National Journal of Physiology, Pharmacy and Pharmacology*. 2015; 5(1):35-49.
4. Kavthekar S, Chougule A, Kurane A, Kulkarni D. Association between skinfold thickness and neck circumference with anaemia in rural school going adolescent girls. *International Journal of Community Medicine and Public Health*. 2016; 3(8):2197-2200.
5. Patel S, Dhuppar P, Bhattar A. Nutritional anaemia status in adolescent girls in rural schools of Raipur. *Med Chem*. 2017; 7(4):853-856.
6. Siva PM, Sobha A, Manjula VD. Prevalence of anaemia and its associated risk factors among adolescent girls of central Kerela. *Journal of Clinical and Diagnostic Research*. 2016; 10(11):LC19-LC 23.
7. Soman SK, Areekal B, Murali AJ, Varghese RG. Adolescent anaemia its prevalence and

determinants: a cross-sectional study from South Kerala, India. Int. J. Community Med. Public Health. 2017; 4(8):2750-2756.

8. Srivastava A, Kumar R, Sharma M. Nutritional anaemia in adolescent girls: an epidemiological study. 2016;3(4):808-812.

9. Unicef (United Nations Children's Fund). Adolescents and youth. New York. USA. 2016. [https:// www. unicef.org/ adolescence](https://www.unicef.org/adolescence).