Self-diagnosis and health seeking behaviour of women for minor bowel ailments in a large representative United Kingdom sample population

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Background

The efficiency of healthcare delivery is an established element of healthcare in the 21st Century. A pharmacy white paper from the UK Department of Health (DH, 2008) emphasised the importance of public pharmacies and patient self-care in the management of minor ailments. If self-care is an important vehicle for the delivery of cost-effective care as the DH white paper suggests, then there is a need to understand individuals' health perceptions and treatment seeking behaviour for minor ailments. To assist policy development in this area we report the results of a study of self diagnosis, treatment behaviour and public perception regarding common, minor bowel ailments.

Methods: The survey evaluated female behaviour and attitudes towards a variety of sensitive health issues, including constipation. A sample of 2,220 women aged >18 yr were recruited from the UK to participate in an on-line survey. The sample was stratified by age, social grade and geographical region to be nationally representative. Data was presented using summary statistics. The survey was administered by YouGov Ltd.

RESULTS:

Demographics: Regions represented: London 19%; South England 23%; Midlands and Wales 21%; North England 28%; Scotland 8%. Age groups shown in Table 1.

Table 1	Age groups				
Total	18 to 24	25 to 34	35 to 44	45 to 54	55 plus
n=2220	176	571	439	284	750
%	8%	26%	20%	13%	33%

The age of symptom onset for subjects reporting constipation was 14-19 in 17%, 20-29 in 24%, 30-39 in 17%, and >40 in 23%. The three most common sources of information sought regarding their condition included doctors 68%, internet resources 48% and pharmacists 31% (Fig. 1).

Delays in seeking treatment up to 3 months were reported by 26% of participants, 3-6 months by 13% and >6 months by 24% of respondents (Fig 2).

When suffering constipation, 53% suggested dietary modification would be their first course of treatment and 40% suggested they would avoid medicines unless essential. Only 17% of subjects suggested they would commence medication at the first sign of symptoms (Fig. 3).

Secrecy regarding embarassing conditions was highest amongst family members and friends but only 18% with their doctor (Fig. 4).

Fig. 1 When suffering embarassing condition information sources consulted

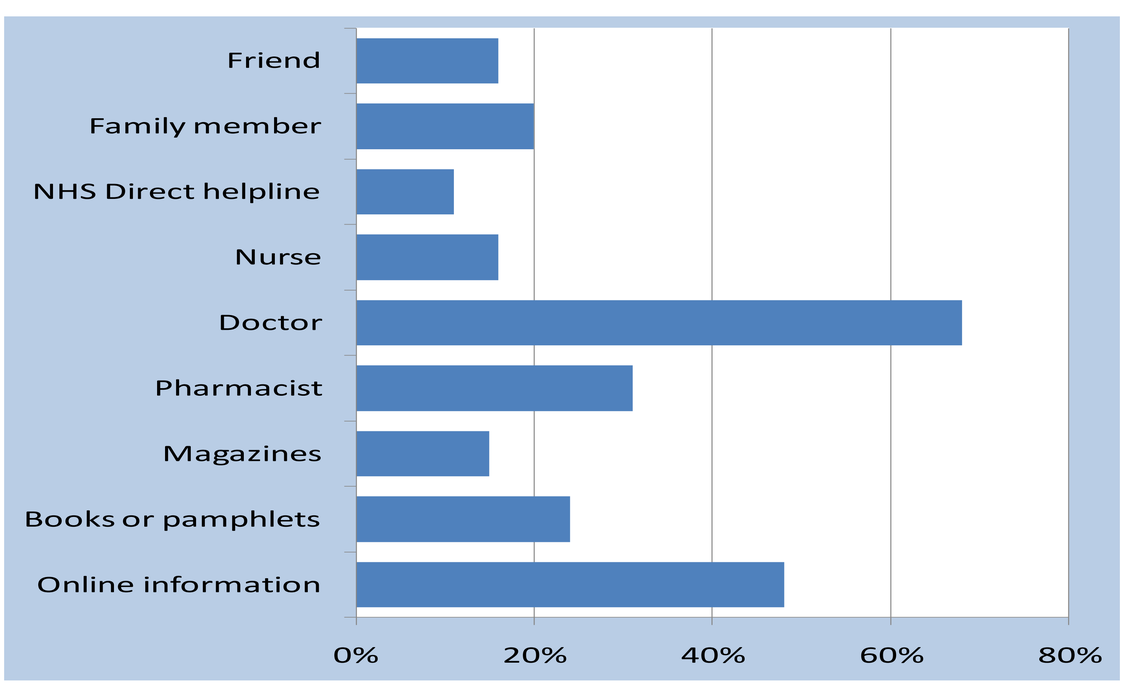


Fig. 2 Reported delay in seeking advice for embarassing health conditions

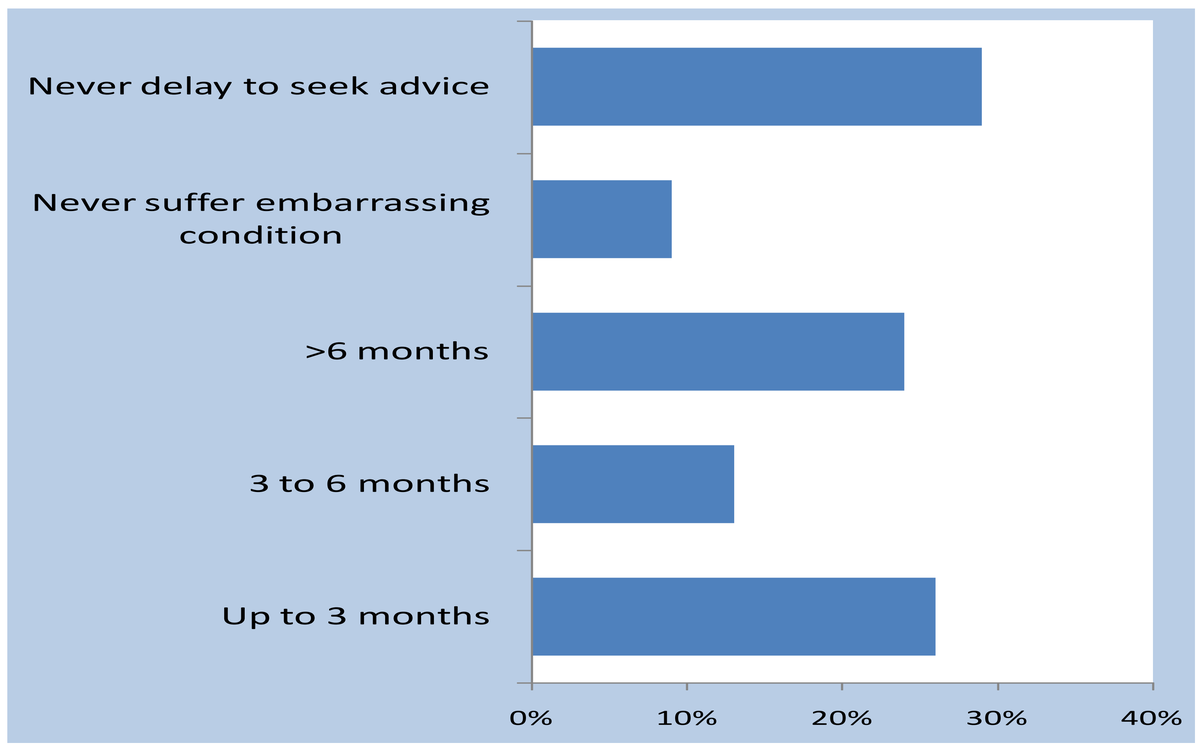


Fig. 3 Immediate action taken in response to constipation

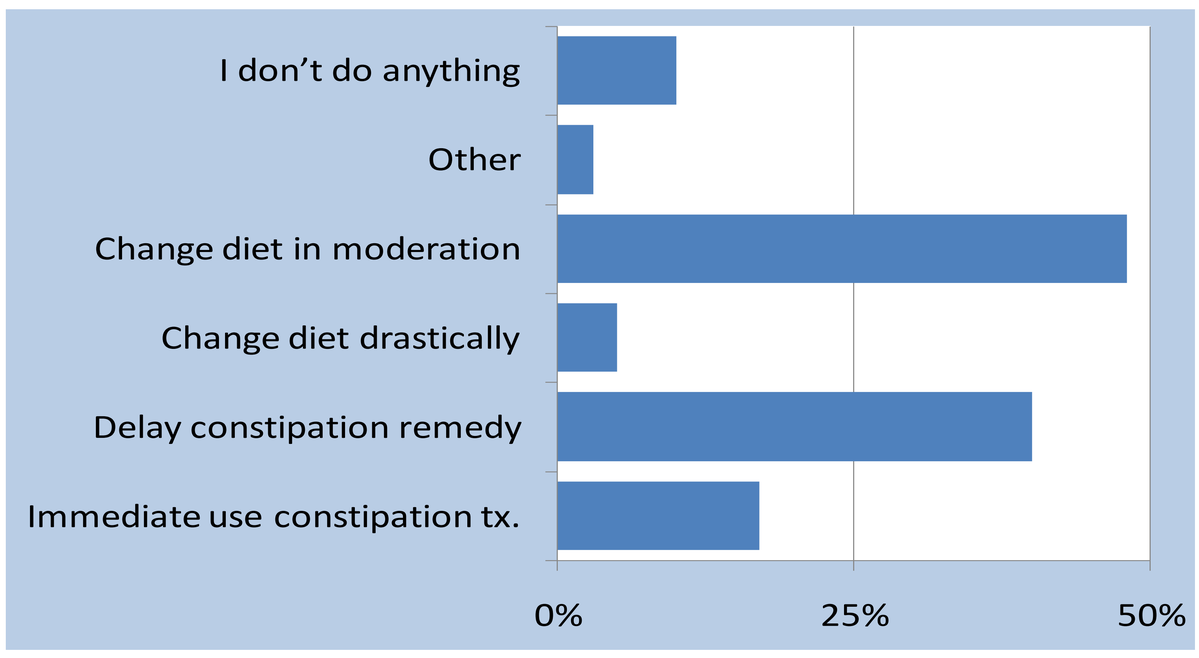
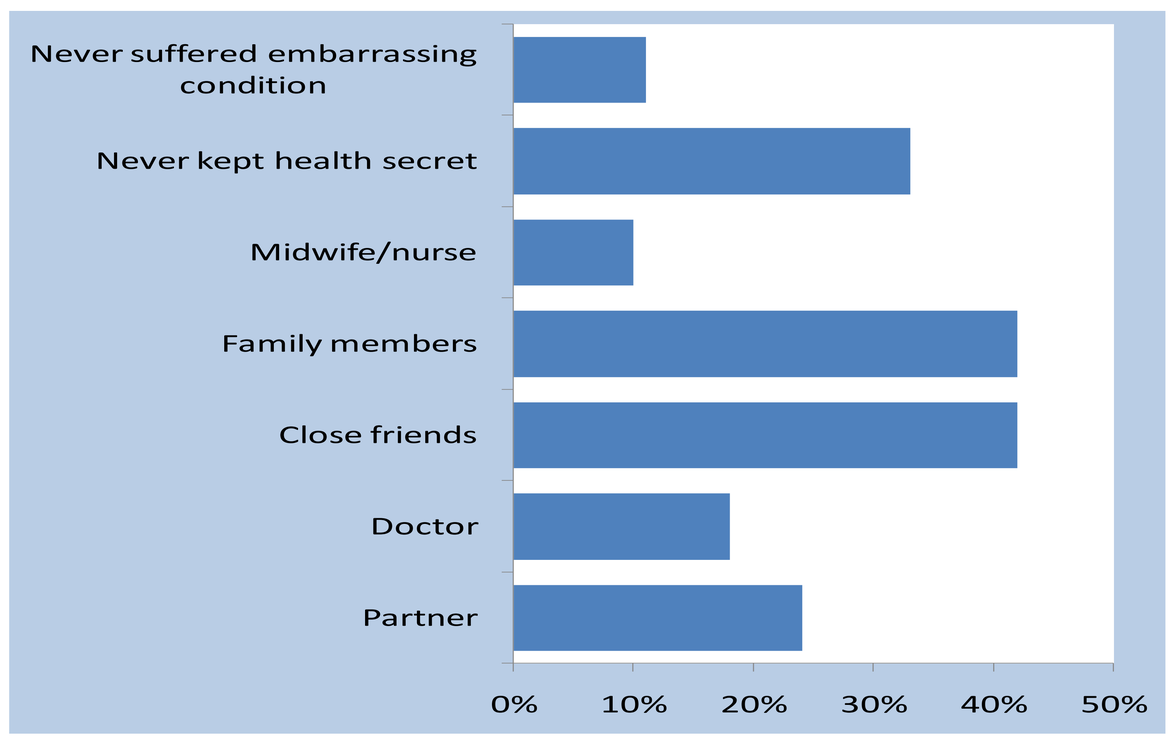


Fig. 4 Participants responding they have kept embarassing secrets from the following people



CONCLUSIONS:

(1) The results are consistent with the opportunity for improving the role of pharmacy services in managing constipation. Improved service delivery in this sector might reduce the high proportion (68%) seeking medical advice for their condition.

(2) In response to constipation symptoms participants expressed a greater interest to modify their diet in comparison with taking medicines. This might suggest a role for allied healthcare professionals to offer advice.

REFERENCES

Department of Health. Pharmacy in England. Building on strengths – delivering the future. Crown Copyright 2008.

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