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A study to assess the effectiveness of information booklet on knowledge and knowledge of practice regarding role of nurse in corticosteroid therapy among staff nurses

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ABSTRACT

Background and objectives Corticosteroid therapy are widely used therapy in every health setting to treat various disease conditions. The therapy has a lot of the adverse effects which can be prevented and monitored and also managed by the skill full nurse having competent knowledge and practice in the use of corticosteroid therapy. Many patients who receive corticosteroid therapy go home the same day or the other day, but nursing instruction is very necessary for improving the patient knowledge regarding the adverse effects of the therapy so to prevent the side effects of the therapy. Thus the nurses' knowledge and practice must be improved for the betterment of the care given to the patients. The objectives of this study were: 1. to assess the knowledge and practice score of subjects regarding the role of a nurse in corticosteroid therapy. 2. To administer information booklet 3. To determine the effectiveness of information booklet regarding the role of a nurse in corticosteroid therapy in terms of gain in knowledge and practice scores of subjects. 4. To find the association of pre-test scores of knowledge and practice of subjects with their selected socio-demographic variables. **Method** A quasi-experimental study with one group pre and post-test design was used to assess the effectiveness of Information Booklet on knowledge and practice regarding Role of Nurse in Corticosteroid Therapy. Simple random sampling technique (Probability) was used to collect data from 50 subjects working at the selected health facility, Bengaluru. The data was collected and interpreted to assess the effectiveness of Information Booklet on knowledge and practice regarding Role of Nurse in Corticosteroid Therapy. **Results** The findings of the study with regard to pre-test knowledge assessment revealed that the mean percentage was 35.55% with a standard deviation of 7.64. In the pre-test knowledge level, 88% had inadequate knowledge. In the post-test, a significant increase in knowledge was found. However, in post-test, the mean percentage of knowledge was 86.55% with 6.46 standard deviation. In the post-test knowledge level, 94% had adequate knowledge. In pre-test knowledge of practice level, the mean percentage is 31.9% with a standard deviation of 4.56. There is a significant increase in practice level in post test with a mean percentage score of 80.7% with standard deviation 4.12 by the subjects. **Interpretation and Conclusion** The study proved that subjects had inadequate knowledge and knowledge of practice on Role of nurse in corticosteroid therapy. The finding of the study showed that the information booklet was highly effective in increasing knowledge and knowledge of practice on Role of nurse in corticosteroid therapy. In the post-test, a significant association was found with most of the variables of the subjects. The overall knowledge means a score of the pre-test was 35.55% with a standard deviation of 7.64 and an overall post-test score of knowledge was 86.55% with 6.46 standard deviation. The overall knowledge of practice means a score of the pre-test was 31.9% with standard deviation 4.56 and post test practice score was 80.7% with standard deviation 4.12. The 't' value of the knowledge is 16.32 %. It shows that there is a significant increase in knowledge after the administration of Information Booklet (IB). The enhancement in the subject's knowledge is by 51 %. The statistical paired 't' test indicate that enhancement in the mean knowledge scores was found to be significant with "t" value 12.29 level for all aspects under study. The enhancement in the respondent's practice is by 70.7%. The statistical paired 't' test indicate that enhancement in the mean knowledge scores was found to be significant with 14.21 level for all aspects under study.

Keywords— Role of nurse in corticosteroid therapy, Information Booklet (IB), Under staff nurses

1. INTRODUCTION

The immune system is a system of biological structures and processes within an organism that protects against disease. To function properly, an immune system must detect a wide variety of agents, from viruses to parasitic worms, and distinguish them from the organism's own healthy tissue. In many species, the immune system can be classified into subsystems, such as the innate immune system versus the adaptive immune system, or humoral immunity versus cell-mediated immunity. Disorders of the immune system

can result in autoimmune diseases, inflammatory diseases and cancer. Immunodeficiency occurs when the immune system is less active than normal, resulting in recurring and life-threatening infections.¹

Autoimmune disorders occur when the body fails to tell the difference between self and non-self. When this happens, the body makes antibodies that are directed towards the body's own tissues. These are called auto-antibodies. The autoantibodies attack the normal cells by mistake.¹

From the time immemorial man has been interested in trying to control the disease by the medicine man, the priest, the herbalists and the magician. Man's immunity is a natural fighter for diseases but for certain diseases may not respond effectively undertook various ways to cure disease or to bring relief to the sick. When a person is sick the medicine plays a vital role in life-saving as well as improving the health status of an individual. The comprehensive action of the drug is preventive, promotive and curative. If the person is consuming the drug without proper guidance, may get deleterious effects on his health.²

According to WHO "drug is any substance or product that is used or intended to be used to modify or explore physiological states of the recipient. In the past patients were medically maintained, stabilized but the patient's survival, quality of life and progress was very poor. Nowadays the use of corticosteroid therapy have made efforts to improve survival and quality of life with its good prognosis.³

Corticosteroids are more often known as steroids, are anti-inflammatory medicine prescribed for a wide range of disease. Everyday our body produce groups of steroid hormone from cholesterol, they are called corticosteroids. Some of the examples of these steroid hormones are Estrogens, Androgens (testosterone), and Progesterone, Corticoids (Glucocorticoids and Mineral corticoids). These hormones are important mediators of metabolism, mineral balance and inflammatory process. When illness or trauma strikes our body system such as skin or nervous system, that time our body needs more quantity of corticosteroids than our body production. In that condition, the patient is prescribed with corticosteroid therapy. These corticosteroids can cause troublesome side effects if they are taken on a long term basis. However, in some circumstances, a long term course of corticosteroids is an only effective form of treatment.⁴

In 1940 it was understood that there are two categories of corticosteroids; those that cause sodium and fluid retention and those that counteract shock and inflammation. In 1948 the first patient with rheumatoid arthritis was treated with cortisone and soon thereafter other rheumatologic patients received cortisone. Oral and intraarticular administration of cortisone and hydrocortisone begin in 1950-1951.⁴

2. METHOD

A quasi-experimental study with one group pre and post-test design was used to assess the effectiveness of Information Booklet on knowledge and practice regarding the Role of Nurse in Corticosteroid Therapy. Simple random sampling technique (Probability) was used to collect data from 50subjects working at a selected health facility, Bengaluru. The data was collected structured questionnaire and practice scenarios and interpreted to assess the effectiveness of Information Booklet on knowledge and practice regarding the Role of Nurse in Corticosteroid Therapy.

3. RESULTS

3.1 Description of Demographic data of subjects

Table 1: Classification of subjects by personal characteristics, N=50

Aspect wise comparison		Subjects	
		Frequency	Per cent
Age (in years)	20 Yrs to 24 Yrs	24	48.0
	25 Yrs to 30 Yrs	18	36.0
	31 Yrs to 40 Yrs	7	14.0
	41 Yrs to 50 Yrs	1	2.0
	Total	50	100.0
Gender	Male	13	26.0
	Female	37	74.0
	Total	50	100
Educational status	GNM	29	58.0
	B.Sc Nursing	21	42.0
	Total	50	100.0
Religion.	Hindu	36	72.0
	Muslim	6	12.0
	Christian	8	16.0
	Total	50	100.0
Exposure to any educational program regarding role of nurse in corticosteroid therapy.	Workshop	16	32.0
	Continue nursing Education	8	16.0
	Seminar	18	36.0
	Refreshment Course	8	16.0
	Total	50	100.0

Source of information	Magazine/Books	29	58.0
	Internet	7	14.0
	Peer	5	10.0
	Professional Course	9	18.0
	Total	50	100.0
Area of working	Medical wards	12	24.0
	Surgical wards	12	24.0
	Orthopedic wards	16	32.0
	Other wards	10	20.0
	Total	50	100.0
Years of experience	0-2 Years	29	58.0
	3- 5 Years	14	28.0
	6- 8 Years	6	12.0
	Above 8 Years	1	2.0
	Total	50	100.0

Table 1 Reveal's classification of samples by personal characteristics according to age, sex, educational qualification, religion, exposure of knowledge on the role of the nurse in corticosteroid therapy, source of information, area of working and years of experience

3.2 Assessment of Knowledge and practice of subjects on Role of Nurse in Corticosteroid Therapy

3.2.1 Overall and aspect wise pre and posttest knowledge scores of subjects on Role of nurse in Corticosteroid Therapy

Table 2: Mean, Mean Percentage and Standard Deviation for Pre-test knowledge of subjects on the role of the nurse in corticosteroid therapy. N=50

Aspect	No. of questions	Knowledge score			
		Range	Mean	±SD	Mean %
Introduction	5	0-5	1.97	±1.69	39.40
Indication, contraindications and adverse effect of corticosteroid	5	0-5	1.89	±1.85	37.80
Action and Management	2	0-2	0.72	±0.75	36.00%
Treatment and role of nurse	8	0-8	2.53	±3.35	31.62%
Over all pretest score	20	0-20	7.11	±7.64	35.55%

The table 2 depicts that the maximum mean percentage obtained by the subjects is found in the aspects of introduction(39.40%) followed by indications and contraindications(37.80%), mechanism of action and management(36%), and least mean score (31.62%) is found in treatment and role of nurse in corticosteroid therapy.. The overall knowledge scores of subjects were found to be 35.55% with standard deviation of 07.64 in pretest.

Table 3: Distribution of subjects by level of knowledge on role of nurse in corticosteroid therapy

Level of knowledge	Level of knowledge Percentage of scores Actual scores	No of Respondents	
Inadequate	<40%	40	80
Moderate	41% to 65%	10	20
Adequate	65% and above	0	0
Total		50	100

Table 3 shows pretest knowledge level of subjects, majority 88% of subjects had inadequate knowledge and 12 % had moderate knowledge.

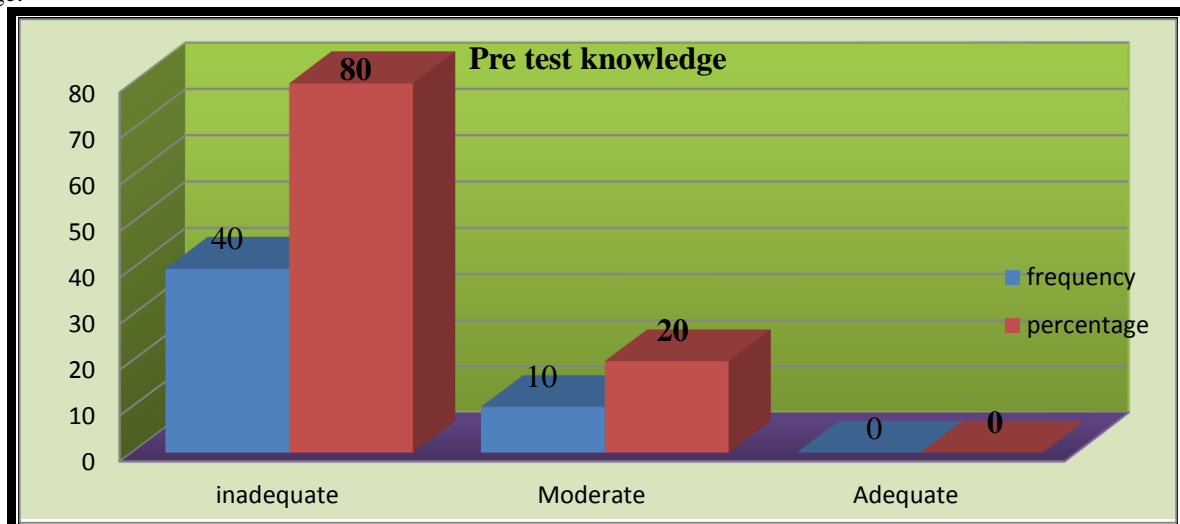


Fig. 1: Percentage distribution of subjects by pretest knowledge score

Table 4: Mean, mean percentage and standard deviation for posttest knowledge on role of the nurse in corticosteroid therapy

Aspect	No. of questions	Knowledge score			
		Range	Mean	±SD	Mean %
Introduction	5	0-5	4.32	±1.28	86.4
Indication, contraindications and adverse effect of corticosteroid	5	0-5	4.02	±1.72	80.4
Action and Management	2	0-2	1.76	±0.72	88.0
Treatment and role of nurse	8	0-8	7.21	±2.74	90.1
Over all Post test score	20	0-20	17.31	±6.46	86.55

The table 4, signifies that the maximum mean percentage obtained by the subjects is found in the aspects of treatment and role of nurse in corticosteroid therapy (90.1%), followed by action and management of adverse effects (88.0%), introduction (86.4%) and least mean score found in aspect of indication/ contraindication and adverse effects (80.4%). The overall knowledge scores of subjects were found to be 86.55% with standard deviation of 6.46 in posttest

Table 5: Distribution of subjects by the level of knowledge on the role of the nurse in corticosteroid therapy

Level of knowledge	No of Respondents	Percentage
Inadequate	0	0
Moderate	6	12
Adequate	44	88
Total	50	100

Table 5 signifies posttest knowledge level of subjects, the majority 94% of subjects had adequate knowledge and 6 % had moderate knowledge in post test.

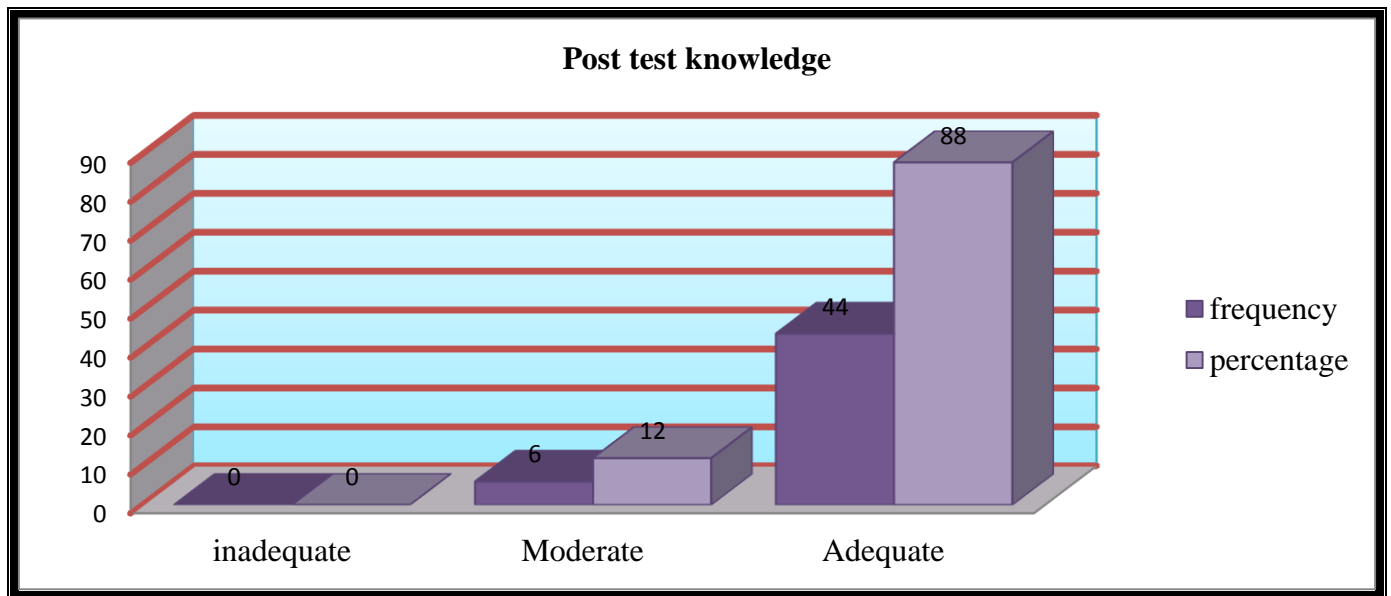


Fig. 2: Percentage distribution of subjects by posttest knowledge score

3.2.2 Overall and aspect wise pre and posttest knowledge of practice scores of subjects on Role of nurse in Corticosteroid Therapy

Table 6: Mean, mean percentage and standard deviation for pretest knowledge of the practice of subjects on the role of the nurse in corticosteroid therapy

S. no	Aspect	Practice score			
		Range	Mean	±SD	Mean %
Case 1	Q.1	0-1	0.30	±0.51	30
	Q.2	0-1	0.32	±0.39	32
Case 2	Q. 3	0-1	0.28	±0.42	28
Case 3	Q.4	0-1	0.32	±0.41	32
	Q. 5	0-1	0.41	±0.41	41
Case 4	Q.6	0-1	0.33	±0.40	33
Case 5	Q. 7	0-1	0.31	±0.48	31
Case 6	Q.8	0-1	0.30	±0.51	30
Case 7	Q. 9	0-1	0.31	±0.52	31
Case 8	Q.10	0-1	0.31	±0.51	32
Over all total	10	0-10	3.19	±4.56	31.9

Table 7: Mean, mean percentage and standard deviation posttest of knowledge of the practice of subjects on the role of the nurse in corticosteroid therapy

S. no	Aspect	Practice score			
		Range	Mean	±SD	Mean %
Case 1	Q.1	0-1	0.88	±0.32	88
	Q.2	0-1	0.87	±0.46	87
Case 2	Q. 3	0-1	0.78	±0.39	78
Case 3	Q.4	0-1	0.81	±0.35	81
	Q. 5	0-1	0.72	±0.38	72
Case 4	Q.6	0-1	0.79	±0.41	79
Case 5	Q. 7	0-1	0.81	±0.43	81
Case 6	Q.8	0-1	0.88	±0.44	88
Case 7	Q. 9	0-1	0.76	±0.39	76
Case 8	Q.10	0-1	0.77	±0.55	77
Over all total	10	0-10	8.07	±4.12	80.7

The table 7 depicts that the maximum mean percentage of attitude score by the subjects in posttest is found in structured patient case scenario 1 (88%), followed by structured case 8(88%), structured case 2(87%), structured case 4(81%), structured case 7(81%), structured case 6(79%), structured case 3(78%), structured case 10(77%), structured case 9(76%), structured case 5(72%) in posttest. The overall mean percentages of subjects were found to be 80.7 % with standard deviation of 4.12 in the posttest.

Table 8: Knowledge of Practice Gain

S. no	Knowledge Assessment	% of Pretest Knowledge of practice	% of Posttest Knowledge of practice	% of Knowledge of practice gain
Case 1	Q.1	30	88	58
	Q.2	32	87	55
Case 2	Q. 3	28	78	50
Case 3	Q.4	32	81	49
	Q. 5	41	72	31
Case 4	Q.6	33	79	46
Case 5	Q. 7	31	81	50
Case 6	Q.8	30	88	58
Case 7	Q. 9	31	76	45
Case 8	Q.10	32	77	45
Over all total	10	31.9	80.7	50

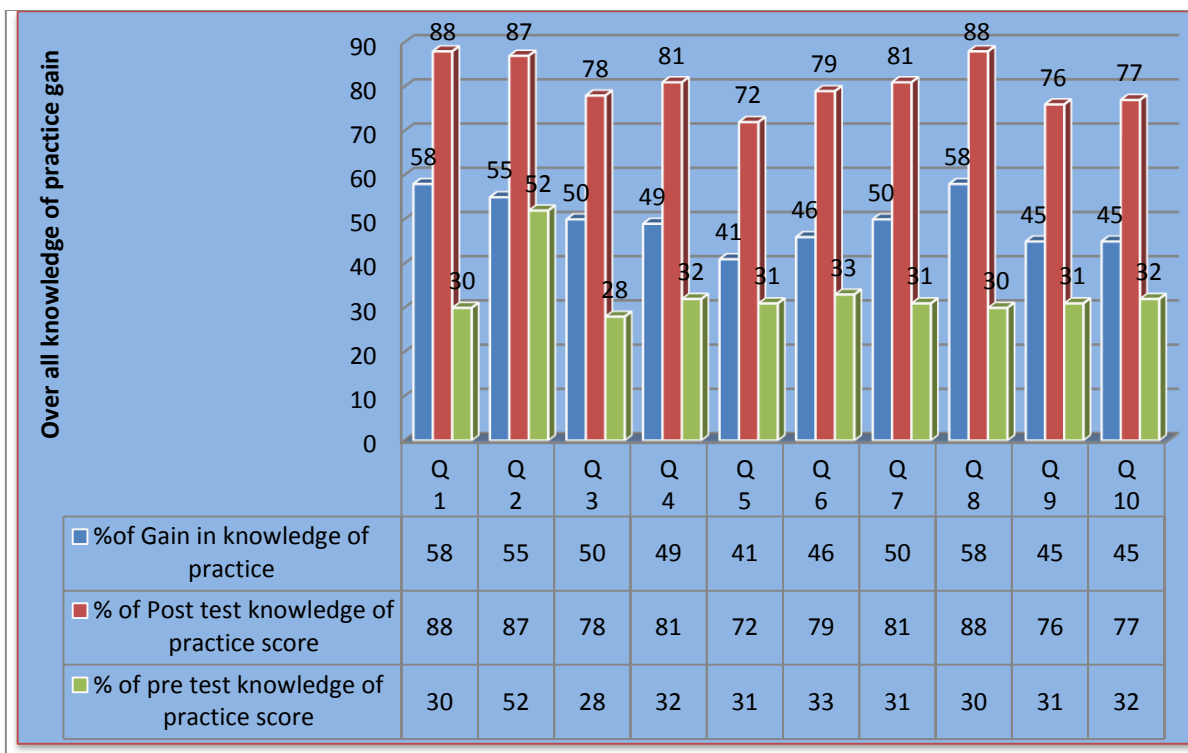


Fig. 3: Knowledge of practice gain

3.3 Assessment of the effectiveness of information booklet regarding the role of the nurse in corticosteroid therapy
 3.3.1 Overall pre and posttest knowledge scores of subjects on Role of nurse in corticosteroid therapy

Table 9: Distribution of subjects by the level of overall knowledge (pretest and posttest) on the role of the nurse in corticosteroid therapy (t- test), N=50

Overall Score	No. of Variable	Range	Pre Test Mean ±SD	Post test Mean ±SD	Independent Student's t-test
Overall Knowledge Score	20	0-20	7.11±7.64	17.31±6.46	t=16.32 P=0.003 significant

From table 9, it is evident that the obtained "t" value for overall knowledge score is 16.32 which are greater than the table value at 0.05 level of significance. Therefore, "t" value is found to be significant. It means there is a gain in the knowledge level of subjects. This supports that information booklet on the role of the nurse in corticosteroid therapy is effective in increasing the knowledge level of subjects.

Table 10: Distribution of comparison of subjects by the level of overall knowledge (pretest and posttest) on the role of the nurse in corticosteroid therapy

Overall Score	No of Question	Max Score	Mean ± SD	Percentage
Pre and Post Test	Pre Test 20	0-20	7.11±7.64	35.55
	Post Test 20	0-20	17.31±6.46	86.55

The table 10 reveals that the percentage obtained by the subjects in posttest percentage 86.55% is greater than the pretest percentage of 35.55%. It means there is gain in knowledge level of the subjects.

Table 11: Distribution of subjects by knowledge gain on role of nurse in corticosteroid therapy

Knowledge Assessment	% of Pretest Knowledge	% of Posttest Knowledge	% of Knowledge gain
Introduction	39.40	86.4	47.0
Indication, contraindications and adverse effect of corticosteroid	37.80	80.4	42.
Action and Management	36.00	88.0	52.0
Treatment and role of nurse	31.62	90.	58.48
Over all Post test score	35.55	86.55	51.0

The table 11 depicts that the maximum percentage of knowledge gain by the subjects that is found in the aspects of treatment and Role of nurse (58.48%) followed by mechanism of action and management of adverse effects(52%), introduction and meaning(47%), and least score found in indication and contraindications (42.6%) . The overall knowledge gains of subjects were found to be 51.0%.

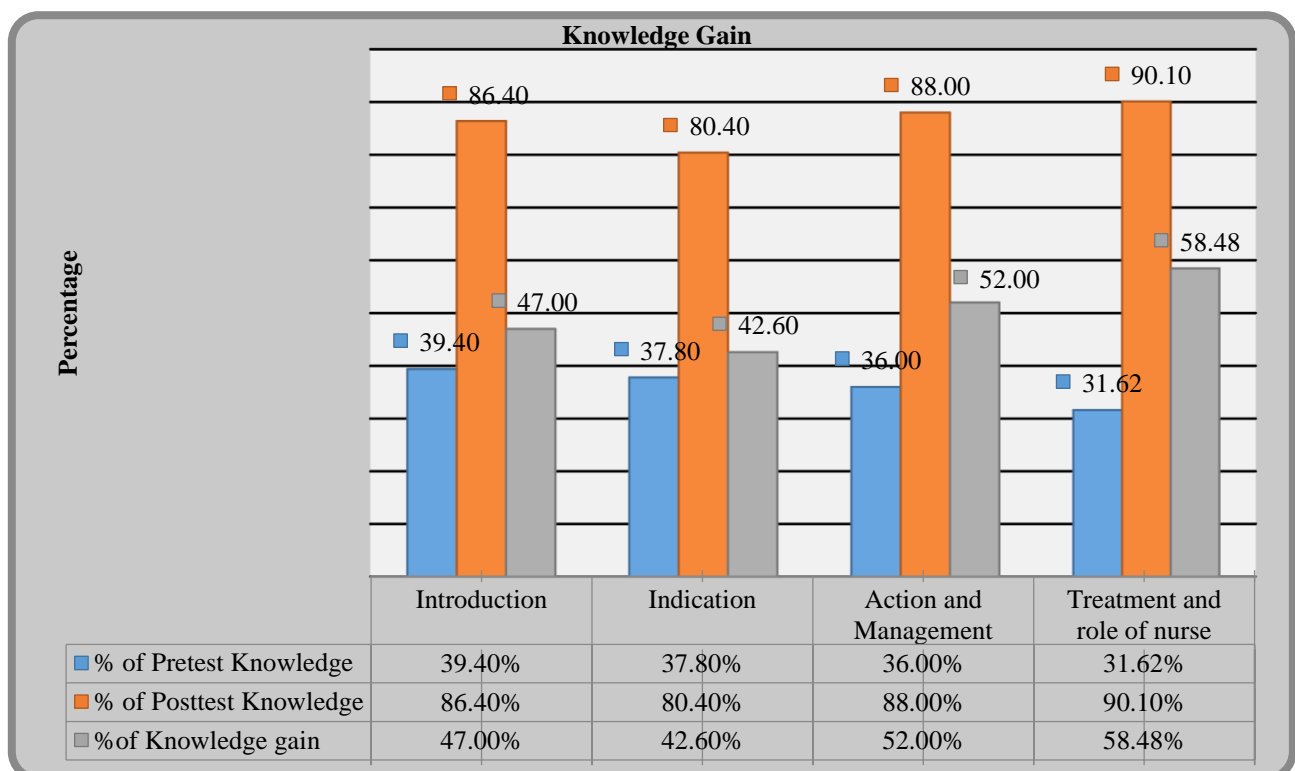


Fig. 4: Percentage distribution of subjects by knowledge gain

Table 12: Distribution of subjects by comparison of pretest and posttest scores on role of nurse in corticosteroid therapy (paired t- test)

Aspect	Pretest		Posttest		Paired t-test
	Mean	SD	Mean	SD	
Introduction	1.97	±1.69	4.32	±1.28	10.12***
Indication, contraindications and adverse effect of corticosteroid	1.89	±1.85	4.02	±1.72	11.12***
Action and Management	0.72	±0.75	1.76	±0.72	10.23***
Treatment and role of nurse	2.53	3.35	7.21	±2.74	09.21**
Over all Post test score	7.11	±7.64	17.31	±6.46	12.29***

From the table 12, it is evident that the obtained "t" value 12.29 is greater than the table value at 0.05 level of significance. Therefore, "t" value is found to be significant. It means there is gain in knowledge level of subjects. This supports that information booklet on role of nurse in corticosteroid therapy is effective in increasing the knowledge level of subject.

3.3.2 Overall pre and posttest knowledge of practice scores of subjects on Role of nurse in corticosteroid therapy

Table 13: Distribution of subjects by gain in knowledge of practice on Role of Nurse in corticosteroid therapy, N=50

S. no	Knowledge Assessment	% of Pretest Knowledge	% of Posttest Knowledge	% of Knowledge gain
Case 1	Q.1	30	88	58
	Q.2	32	87	55
Case 2	Q. 3	28	78	50
Case 3	Q.4	32	81	49
	Q. 5	41	72	31
Case 4	Q.6	33	79	46
Case 5	Q. 7	31	81	50
Case 6	Q.8	30	88	58
Case 7	Q. 9	31	76	45
Case 8	Q.10	32	77	45
Over all total	10	31.9	80.7	49.7

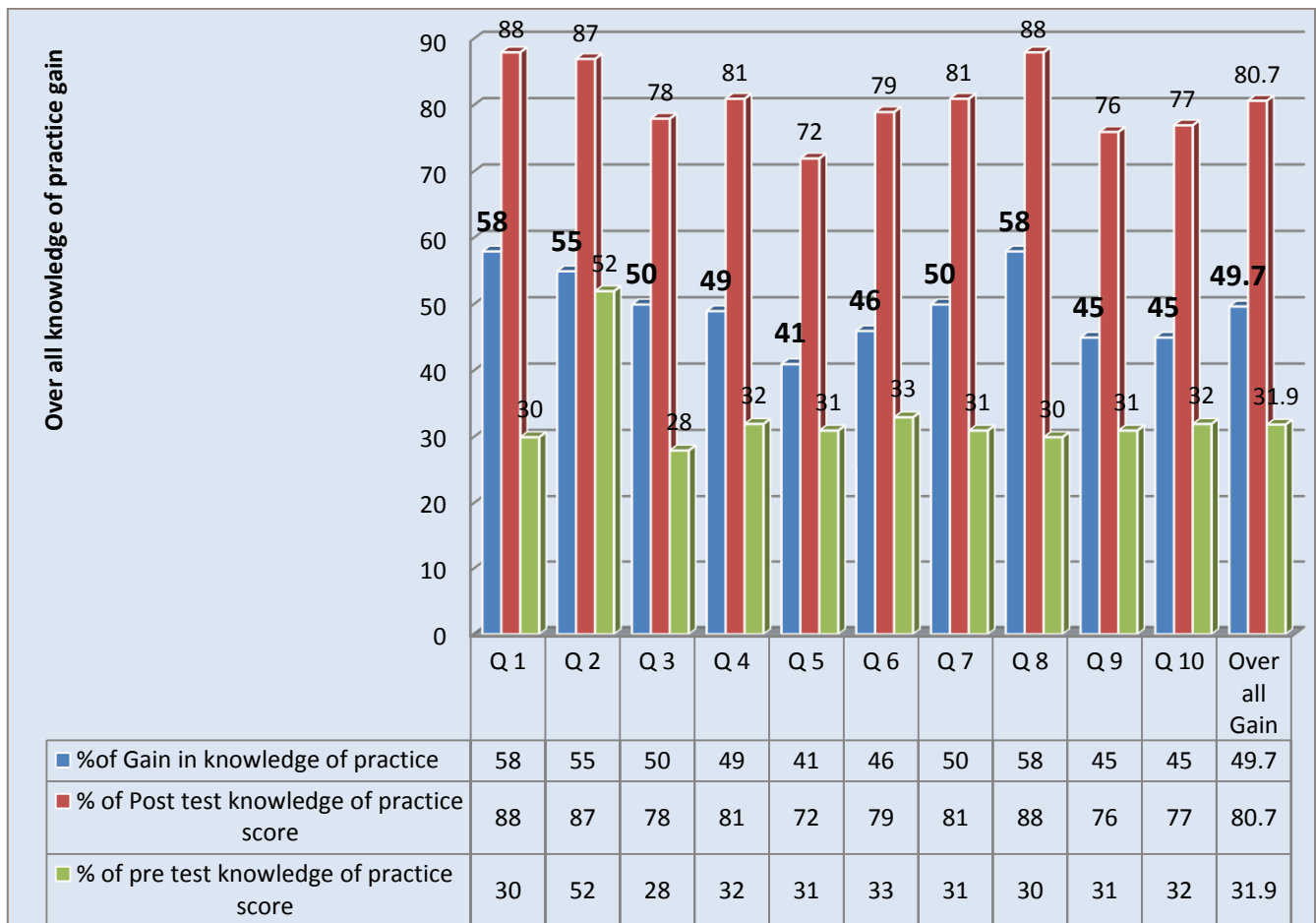


Fig. 5: Percentage distribution of subjects by the percentage of knowledge gain in practice

Table 14: Distribution of subjects by comparison of pretest and posttest knowledge of practice scores on the role of the nurse in corticosteroid therapy (paired t- test) N=50

S. no	Aspect	Pretest		Posttest		Paired t-test
		Mean	SD	Mean	SD	
Case 1	Q.1	0.30	±0.51	0.88	±0.32	10.12***
	Q.2	0.32	±0.39	0.87	±0.46	12.42***
Case 2	Q. 3	0.28	±0.42	0.78	±0.39	11.63**
Case 3	Q.4	0.32	±0.41	0.81	±0.35	10.45*
	Q. 5	0.41	±0.41	0.72	±0.38	11.11***
Case 4	Q.6	0.33	±0.40	0.79	±0.41	10.63***
Case 5	Q. 7	0.31	±0.48	0.81	±0.43	12.41***
Case 6	Q.8	0.30	±0.51	0.88	±0.44	12.12*
Case 7	Q. 9	0.31	±0.52	0.76	±0.39	12.14***
Case 8	Q.10	0.31	±0.51	0.77	±0.55	11.36***
Over all total	10	3.19	±4.56	8.07	±4.12	14.21***

(* significant at P≤0.05, ** highly significant at P≤0.01, *** very high significant at P≤0.001)

From table 15, it is evident that the obtained "t" value 14.21 high than the table value at 0.05 level of significance. Therefore "t" value is found to be significant. It means there is a gain in practice skill of subjects. This supports information booklet on role of nurse in corticosteroid therapy is effective in increasing the practice level of subjects.

3.4 Association of post-test knowledge scores and knowledge of practice scores of subjects with the selected demographic variables

3.4.1 Association of post-test knowledge score of subjects with the selected demographic variables.

Table 15: Association of posttest knowledge scores of subjects with demographic variables, N=50

Aspect wise comparison		Knowledge Score						n	Pearson Chi-square test
		Inadequate		Moderate		Adequate			
		n	%	n	%	n	%		
Age In year	18-20 Yrs	0	0	2	66.3	22	46.8	24	$\chi^2=4.05$ P=.013 Df:6 , significant
	21-30 Yrs	0	0	1	33.7	17	36.1		
	31-40Yrs	0	0	0	0	7	14.8		
	41 -5 Yrs	0	0	0	0	1	2.1		
Gender	Male	0	0	1	33.7	12	25.5	13	$\chi^2=1.049$ P=0.825 Df2, not significant
	Female	0	0	2	66.3	35	74.5		
Educational Status	GNM	0	0	2	66.3	24	51.1	26	$\chi^2=7.2$ P=0.0205 df6 , significant
	B.Sc. Nursing	0	0	1	33.7	18	38.2		
Religion	Hindu	0	0	2	66.3	34	72.3	36	$\chi^2=5.43$ P=0.519 df4, NON significant
	Muslim	0	0	1	33.7	5	10.6		
	Christian	0	0	0	0	8	17.1		
Exposure to any Educational Program	Workshop	0	0	1	33.7	15	31.9	16	$\chi^2=2.72$ P=.026 Df6, significant
	Continue Nursing Education	0	0	1	33.7	7	14.8		
	Seminar	0	0	1	33.6	17	36.2		
	Refreshment Course	0	0	0	0	8	17.1		
Source of Information	Magazine	0	0	3	100	26	55.3	29	$\chi^2=2.21$ P=0.692 Df6 , not significant
	Internet	0	0	0	0	7	14.8		
	Peer	0	0	0	0	5	10.6		
	Professional Course	0	0	0	0	9	19.1		
Area of Working	Medical Ward	0	0	1	33.7	11	23.4	12	$\chi^2=2.58$ P=0.046 Df6 , significant
	Surgical Ward	0	0	1	33.7	11	23.4		
	Orthopedic ward	0	0	1	33.6	15	31.9		
	other wards	0	0	0	0	10	21.2		
Year of Experience	0-2 Years	0	0	2	66.3	27	57.4	29	$\chi^2=1.9$ P=.02 Df6, significant
	3-5 Years	0	0	1	33.7	13	27.6		
	6-8 Years	0	0	0	0	6	12.7		
	>8 Years	0	0	0	0	1	2.1		

3.4.2 Association of posttest knowledge of practice score of subjects with the selected demographic variable

Table 16: Association of posttest knowledge of practice scores of subjects with demographic variable

Aspect wise comparison		Practice Score						n	Pearson Chi-square test
		Inadequate		Moderate		Adequate			
		n	%	n	%	n	%		
Age in year	18-20 Yrs	0	0	2	50	22	47.8	24	$\chi^2=5.05$ P=.03
	21-30 Yrs	0	0	2	50	16	36.9		

	31-40Yrs	0	0	0	0	7	15.2	7	Df:6, significant
	41 -5 Yrs	0	0	0	0	1	2.1	1	
Gender	Male	0	0	2	50	11	23.9	13	$\chi^2=2.32$ P=0.02 Df 2 , significant
	Female	0	0	2	50	35	76.1	37	
Educational Status	GNM	0	0	2	50	24	52.2	26	$\chi^2=10.2$ P=0.03 df6 , significant
	B.Sc. Nursing	0	0	2	50	17	36.9	19	
Religion	Hindu	0	0	2	50	34	73.9	36	$\chi^2=3.34$ P=0.519 df4, not significant
	Muslim	0	0	1	25	5	10.8	6	
	Christian	0	0	1	25	7	15.2	8	
Exposure to any Educational Program	Workshop	0	0	2	50	15	32.6	16	$\chi^2=3.27$ P=.036 Df6, significant
	Continue Nursing Education	0	0	1	25	7	15.2	8	
	Seminar	0	0	1	25	17	36.9	18	
	Refreshment Course	0	0	0	0	8	17.3	8	
Source of Information	Magazine	0	0	3	75	26	56.5	29	$\chi^2=1.21$ P=0.892 Df6, not significant
	Internet	0	0	0	0	7	15.2	7	
	Peer	0	0	1	25	4	8.6	5	
	Professional Course	0	0	0	0	9	19.5	9	
Area of Working	Medical Ward	0	0	1	25	11	23.9	12	$\chi^2=3.58$ P=0.026 Df6, significant
	Surgical Ward	0	0	1	25	11	23.9	12	
	Orthopedic ward	0	0	1	25	15	32.6	16	
	Other wards	0	0	1	25	9	19.5	10	
Year of Experience	0-2 Years	0	0	3	75	26	56.5	29	$\chi^2=2.3$ P=.01 Df6 significant
	3-5 Years	0	0	1	25	13	28.2	14	
	6-8 Years	0	0	0	0	6	13.1	6	
	Above 8 Years	0	0	0	0	1	2.1	1	

The above table 16 shows that there was significant association between age and post test knowledge of practice ($\chi^2=5$, P=.03, Df 6), the association between gender and posttest was found significant ($\chi^2=2.32$, P=0.02, Df 2), the association between the educational status and posttest was found significant ($\chi^2=10.2$, P=0.03, Df 6), the association between the religion and posttest was found non-significant ($\chi^2=3.34$, P=0.519, Df 4), the association between the exposure to any educational program regarding corticosteroid therapy and posttest was found significant ($\chi^2=3.27$, p=0.036, Df 6), the association between the source of information and posttest was found not significant ($\chi^2=1.21$, P=0.892, Df 6), the association between the area of working and posttest was found significant ($\chi^2=3.58$, P=0.026, Df 6) and the association between the years of experience and the posttest was found significant ($\chi^2=2.3$, P=.01, Df 6). Thus there was an association between knowledge of practice and all other variables except the religion and source of knowledge in terms of knowledge of the practice.

4. CONCLUSION

The study proved that subjects had inadequate knowledge and knowledge of practice on Role of nurse in corticosteroid therapy. The finding of the study showed that the information booklet was highly effective in increasing knowledge and knowledge of practice on Role of nurse in corticosteroid therapy.

In the post-test, a significant association was found with most of the variables of the subjects. The overall knowledge means score of the pre-test was 35.55% with standard deviation 7.64 and an overall post test score of knowledge was 86.55% with 6.46 standard deviation.

The overall knowledge of practice means score of the pre-test was 31.9% with standard deviation 4.56 and post test practice score was 80.7% with standard deviation 4.12. The 't' value of the knowledge is 16.32 %. It shows that there is a significant increase in the knowledge after administration of information booklet (IB). The enhancement in the subject's knowledge is by 51 %. The statistical paired 't' test indicate that enhancement in the mean knowledge scores was found to be significant with "t" value 12.29 level for all aspects under study. The enhancement in the respondent's practice is by 70.7%. The statistical paired 't' test indicate that enhancement in the mean knowledge scores was found to be significant with 14.21 level for all aspects under study.

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