Perception of risk of coronary heart disease among Jordanians.

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Abstract

AIMS AND OBJECTIVES:
The purpose of this study was to assess perceptions of risk of coronary heart disease among Jordanians and its association with demographic variables and health behaviours.

BACKGROUND:
Lack of accurate risk perception may prevent adults from considering the need for early preventive behaviours or seeking early life-saving interventions in the presence of coronary heart disease symptoms.

DESIGN:
A descriptive study.

METHODS:
Using descriptive statistics and regression analysis, a convenience sample of 300 adults was used.

RESULTS:
Older Jordanians had higher perception of risk of coronary heart disease ($\beta = 0.237, p < 0.001$). Jordanian women ($\beta = -0.121, p < 0.05$) perceived coronary heart disease more as unobservable, unknown, new and delayed in manifestation of harm than Jordanian men. Also, adult Jordanians who reported not having family member with coronary heart disease ($\beta = 0.129, p < 0.05$) perceived coronary heart disease more as unobservable, unknown, new and delayed in manifestation of harm. Adults with higher level of education indicated higher perception of risk of coronary heart disease. There were no significant associations between perception of risk of coronary heart disease and health behaviours among adult Jordanians.

CONCLUSIONS:
Our data indicate the need for heart disease education programmes for all adults, including programmes targeted for younger adults, women and persons with low levels of education. It is important to emphasise that adopting healthy lifestyle behaviours can influence their risk for developing long-term disease.

RELEVANCE TO CLINICAL PRACTICE:
Perception of risk of heart disease can greatly influence the decisions taken by adults in regard to their health care. Lack of accurate risk perception may prevent adults from considering the need for early preventive behaviours or seeking early life-saving interventions in the presence of coronary heart disease symptoms.