ISSN: 2091-2986
DOI Prefix: 10.3126/ijssm
International Journal of Social Sciences and Management

Research Article

Knowledge, Attitude and Practices Regarding Hepatitis C Prevention among People of Rural Community, Lahore

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Abstract

Introduction: Hepatitis C infection is developing risk and real burden on general wellbeing, overall prevalence of hepatitis C is 3% (170 million tainted individuals). Roughly 10 million individuals are contaminated in Pakistan and prevalence is relied upon to be higher in isolated places. **Methodology:** This was descriptive cross-sectional study. Convenient sampling was used and data was analyzed by SPSS version 21. **Results:** The findings of the research were good Response rate of this review was 100 % and mean number of "Yes" answers to knowledge, behavior and practice questions were 51%, 46% and 42% individually. **Conclusions**: Knowledge, attitude and practice about hepatitis C among adolescences was insignificant. Consequences of this investigation show lack of understanding about disease control and prevention. The level of knowledge was good among people but there was no significant association between attitude and practices.

Keywords: Knowledge; Attitude; Practice; Hepatitis C; Prevention.

Introduction

Hepatitis C is a contagious disease caused by Hepatitis C infection in human. First stage hepatitis C contamination is asymptomatic in nature and later it prompts unending hepatitis. HCV contamination has no compelling immunization. As indicated by a World Health Organization (WHO) assess, two billion individuals on the earth have serological proof of earlier HBV disease, and up to 3% (170 million) are tainted with HCV. (Organization, 2013)

Chronic liver sickness is the tenth driving reason for death among adults in the United States, and records for around 25,000 passing every year, or roughly 1% of all death. Population based examinations show that 40% of endless liver disease is HCV-related, bringing about an expected 8,000– 10,000 death every year (CDC 2010).

Pakistan is a developing nation with a public of 180 million. It has low wellbeing and educational norms. Sadly, Pakistan has a high pervasiveness of Hepatitis C with a consistent rise in the quantity of cases. Studies demonstrated that there are around 10 million individuals infected with HCV. (Shah *et al*., 2015)

Hepatitis C diseases have a wide range of clinical symptoms ranging from asymptomatic carrier state to intense self-constraining hepatitis. HCV diseases end up chronic and may prompt liver scarring, cirrhosis, liver failure and

Cite this article as:
K. Nawaz et al. (2018) Int. J. Soc. Sc. Manage. Vol. 5, Issue-3: 138-145. DOI: 10.3126/ijssm.v5i3.20602

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Peer reviewed under authority of IJSSM

hepatocellular carcinoma. Various agent can cause hepatitis, including infective specialists (infection, microscopic organisms, and different life forms) and alcohol or an immune reaction towards the organ itself (immune system hepatitis).(Patel, Thompson, Kallen, and Arduino, 2010)

Hepatitis C infection is a noticeable cause for liver disorder and has a high potential to cause dangerous morbidity and mortality. The real methods of HCV transmission in Pakistan are utilization of infected needles and instruments in medicinal practice, dangerous blood and blood item transfusion, intravenous medication use, face and armpit shaving with unsterilized instruments by barbers, ear and nose penetrating, poor individual cleanliness tendencies and deception (poor therapeutic practice by non-qualified individuals The absolute most essential reason for HCV transmission in the country is lack of appropriate screening of the transfusion blood.(Jamil, Ali, Shaheen, and Basit, 2010).

Knowledge is the main need toward prevention of Hepatitis C. In light of the fact that numerous population have deficit awareness and they are prone to get hepatitis C. Numerous people who has been contaminated don't have the unclear idea about that they contaminated on the grounds that it quietly harm the liver function which requires up to 30 years to grow yet don't give any hint or manifestations (CDC, 2010).

Attitude is good or worrying response to objects, individuals, circumstances or different parts of world. The way individuals act towards circumstance and an individual inspiration to make changes. (ul Haq *et al*., 2012) Essential prevention of hepatitis C, as a movement to keep the sickness from happening, incorporates exercises to lessen or dispose of transmission of HCV to helpless people, and focusses on diminishing danger factors. Secondary anticipation incorporates deduction and treatment of illnesses in beginning periods before it causes significant morbidity. (Shalmani, Ranjbar, and Alizadeh, 2013)

Research Question

Research Question 1: What kind of knowledge rural community have regarding Hepatitis C prevention.

Research Question 2: What kind of attitude rural community possess toward Hepatitis C prevention.

Research Question 3: What are the preventive practices of rural community toward Hepatitis C.?

Aims of the study

The purpose of the research was to assess the knowledge, attitude and practice regarding Hepatitis C prevention among adolescent in Hussain Abad community, Lahore.

Significance of the Study

The significance of this study is to identify the gap exist between knowledge and preventive practices regarding Hepatitis C. The result of this study will be helpful for the community administration to estimate the knowledge, attitude and practices of people towards the prevention of Hepatitis C. The awareness of young adults regarding Hepatitis C is very significant to minimize its prevalence in future. The study findings will assist the stake holders of the community to know the importance of treatment of Hepatitis C and also help the Government/Institutes and NGO's to develop the strategies to enhance the knowledge regarding HCV treatment among the society to avoid the damages from the disease.

Literature Review

HCV is more common in a few states of Africa and Asia, with the most remarkable announced seroprevalnce of 13.9% in sound all-inclusive community of Egypt; and is bring down the industrialized nations, incorporating those situated in North America, Northern and Western Europe, and Australia with the prevalence of less than 2.5%. Hostile to Hepatitis c frequency figured 1.5%-5%for Eastern Europe, 2.5%-4.9% for the Western Pacific area, and 1% to over 12% for the Middle East and Central Asia. (Shalmani *et al*., 2013)

The investigation was directed in Mansehra to assess the prevalence, information and awareness regarding Hepatitis C among resident. The general predominance of HCV in the investigation zone was recorded as 67 (10.3%). Pervasiveness among male members was 30 (11.8%), while, that among female members was 37 (9.4%). Prevalence measures in Oghi, Shamdhara and Kathai were 10.3%, 11% and 9% individually. Information and knowledge related to HCV was insufficient between the examination population.(Jamil *et al*., 2010)

Hepatitis C infection (HCV) is a rising worldwide epidemic, a few countries have been more definitely influenced than others. Egypt reports the most striking frequency on the world, with a prevalence rate of more than 20 % (worldwide normal 3%). HCV frequency among multi-transfused patients ranged between 10-55%, among dialysis patients between 50-90%, and among other high hazard populations in the area of 10% and 85%. (Mohamed, Mumtaz, Riome, Miller, and Abu-Raddad, 2013)

A study of country Canadian student sexually transmitted diseases learning found elevated amounts of information among both rural and urban understudies in Canada. Another KAP study was led in United States of America to investigate adolescent's level of HIV information in generally safe provincial regions and high hazard urban areas and concentrate viewed that rural student would be

advised to learning of HIV and hazard decrease techniques than their urban counterpart.(Thomas *et al*., 2011)

Endless liver illness is the tenth driving reason for death among adults in the United States, and records for roughly 25,000 passing every year, or around 1% of all passing. Populace based investigations show that 40% of unending liver sickness is HCV-related, bringing about an expected 8,000– 10,000 passing every year. (Control and Prevention, 2015).

The examination was directed estimated to decide the learning level and attitude of medicinal understudies in Guilan University toward Hepatitis B and C infections' infections .In a cross-sectional review, the information and state of mind of 424 medical science understudies. The mean knowledge levels of the therapeutic understudies are generally low toward HCV contamination in the present review d HCV was decidedly corresponded with their mean information level (r=0.14, p=0.004), (r=0.18, p=0.0001).(Mansour-Ghanaei, Joukar, Souti, and Atrkar-Roushan, 2013)

Expressive scientific investigation was performed with cross sectional plan among dental understudy of Tehran in regards to evaluating the information and states of mind of Hepatitis C. Information accumulation for this examination was directed through self-regulated poll of the aggregate considered people, 32 students (32%) demonstrated poor learning, 48 ones (48%) direct information and 20 ones (20%) had great learning of hepatitis C. Moreover, 12 cases (12%) showed poor state of mind, 49 cases (49%) direct disposition and 39 cases (39%) had great attitude.(Taheri, Jafari, Farzanegan, and Norouzi, 2015)

Conceptual Framework

The theme of this study is examining knowledge, character and works regarding Hepatitis C preventive action. Individuals have poor learning and practices toward Hepatitis C corrective action. There is an extraordinary requirement for conduct change. This task focuses the theory of reasoned action. The theory of Action Reasoned was produced by Martin Fishbein and Icek Ajzen (1975) as updating over Information Integration hypothesis. The theory of planned activity is a model that determines its sources in the field of social brain research. It describes the links between beliefs, characters, values, goals, and practices of person. First of all, planned activities included another component in procedure of influence, behavioral goal instead of endeavor to figure states of mind. Assumption is about conduct however it concedes circumstances which confine impact of state of mind on conduct. Hypothesis predicts behavioral expectations and compromise between tentative predicting state of mind and conduct. Furthermore, hypothesis of contemplated activity utilizes two components, demeanors and standards to foresee behavioral goal. (Mengal *et al*., 2014)

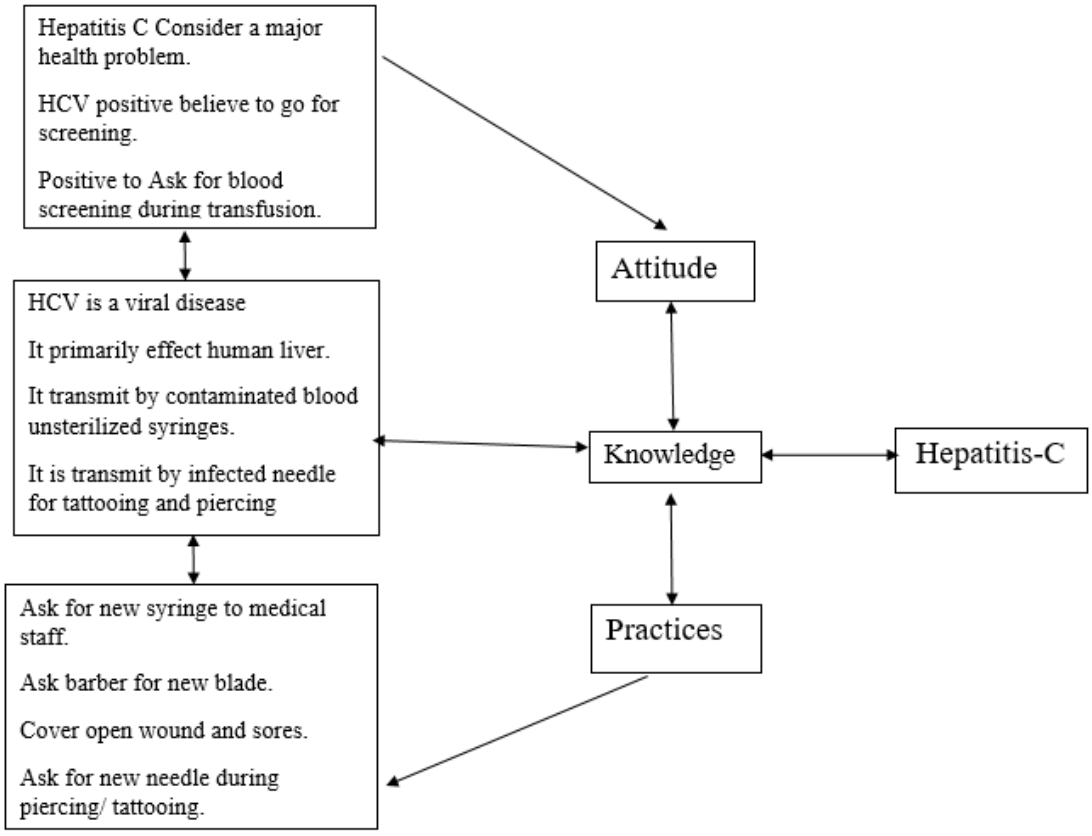

Fig. 1: Conceptual Framework (Ajzen, 1991)

Material and Methodology

Setting: The research was conducted at Hussain Abad community.

Research design: The research was descriptive cross-sectional

Population: People of Hussain Abad were the target population.

Sampling: Convenient sampling technique. The sample was 100.

Research Instrument: A well-developed questionnaire that has been adapted from an article (Mengal *et al* 2014) was distributed among people Lahore community. Questionnaire was consist knowledge, attitude & practices regarding hepatitis C prevention.

Data gathering procedure: Toll was utilized to gather data about the socio-statistic attributes of respondents, information towards transmission and corrective action strategy for hepatitis C infection and mentality towards prevention HCV. Questionnaire was distributed and come back from the respondents.

Methods used to analyze data: Data was analyzed by SPSS version 21.

Study timeline: The study duration was September, 2017 to December, 2017.

Ethical consideration: Ethical permission was obtained from Institutional Review-Board (IRB) of University of Lahore. At the household level, purpose of this study was explained to the respondents and verbal consent was taken before conducting the research.

Result

Data collected from the rural community Hussain Abad, Lahore to evaluate the attitude, knowledge, and practices towards Hepatitis C prevention. A cross sectional study interviewed 100 adolescents in rural community. The response rate of survey was 100% and age range was 18 years to above 50 years old adolescents. Equal numbers of participants were selected from both genders. The data analysis consist of two parts, first part is demographic data which give detail about demographic variable and second part which provide descriptive analysis which provide us recurrence and rate of respondent regarding 35 questionnaire.

Section 1-profile of the respondents

Table 1 depicts that participants of the study were n=100, male 50 and female were50.18-30 year old participants were responded as36, 31-40 year old participants were responded as 31%, 41-50year old participants responded as 20% and above 50 year old participants responded as 13%. The statistical report shows in table 1 that the participants between the ages of 18-30 year old percentage is high between selected age group and above 50 year old is low.Mostly participants' education was (35%) Primary, (25%) Matric, (13%) and above Matric (27%) not educated (27%).Demographic data involve gender, age, qualification, Martial status individually described as bellow**.**

Table 1: Demographic Data Analysis

S.N.	Demographic	Group	Frequency	Percent
1	Gender	Male	50	50
		Female	50	50
		Total	100	100
2	Age	18-30 year	36	36
		31-40 year	31	31
		41-50 year	20	20
		Above 50 year	13	13
		Total	100	100
3	Marital status	Married	77	77
		Unmarried	23	23
		Total	100	100
4	Education	Primary	35	35
		Matric	25	25
		Above matric	13	13
		No formal education	27	27
		Total	100	100

Section 2-Questions Analysis

Respondent's knowledge towards hepatitis C Section II of survey was about information addresses and asked essential data, avoidance and method of transmission of hepatitis C among members. Inquiries number 1-8 were about essential data and avoidance of hepatitis C. Investigations number 9-16 were about hepatitis C method of transmission. Each inquiry reaction was scored "Yes" and "No". Mean number of "Yes" answers were 51%. The scope of most remarkable and least reacted "Yes" questions were 74% and 26% individually. The greater part of respondents thought about hepatitis C, its viral causation, it impact essentially liver and it can cause growth yet on other hand only 42% knew it can influence young people. Shockingly 66% trust that hepatitis C tainted individuals are in danger to others and 43% figure it could be found through easygoing contact (clasping hands). Dominant part (64%) surmise that hepatitis C has not antibody. Just 34% shared tooth brush transmission. The polluted blood, hairdresser utilized contaminated sharp edges, tainted needle for inking and puncturing information was 58% didn't know about spread through contact open injuries/trims and 54% know it transmit from mother to child amid pregnancy. The dominant part, 64% knew about unsterilized syringe transmission (Table 2).

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Table 2: Community Knowledge toward Hepatitis C Prevention

S.N	Question	Yes	No
1	Ever heard about HCV?	63%	37%
2	It is a viral disease?	64%	36%
3	HCV Not catch by contact (hold hands) with others?	43%	57%
4	HCV Infected person are at risk to others?	66%	34%
5	Vaccine of HCV is not available?	36%	64%
6	HCV Affect adolescent only?	42%	58%
7	HCV cause cancer?	65%	35%
8	It primarily effect human liver?	74%	26%
9	It is transmit by infected person shared tooth brush?	66%	34%
10	It is not transmitting by water and food?	48%	52%
11	It is transmit by Contaminated blood?	62%	38%
12	It is transmit by unsterilized syringes?	64%	36%
13	It is transmit by barber used infected blades?	64%	36%
14	It is transmit by infected needle for tattooing and piercing?	54%	46%
15	It is transmit by contact to open wound/cuts?	66%	34%
16	It is transmit from mother to baby during pregnancy?	54%	46%

Table 3: Community Attitude toward Hepatitis C Prevention

S.N.	Attitude Questions	YES	NO
17	Hepatitis C Consider a major health problem?	69%	31%
18	HCV believe to go for screening?	71%	29%
19	HCV positive don't affect ability to visit others?	51%	49%
20	It safe to Visit HCV infected friend/relative?	52%	48%
21	Safe to sit close to hepatitis C infected person?	52%	48%
22	Safe to greet/kiss HCV infected person?	46%	54%
23	Harmless to use cup/glass of HCV infected person?	53%	47%
24	HCV infected person shouldn't isolate for prevention?	41%	59%

Table 4: Community Practices towards Hepatitis C prevention

S.N.	Practice Questions	YES	NO
27	Do you tested for HCV?	55%	45%
28	Do you ask for new syringe to medical staff?	66%	34%
29	Do you ask barber for new blade?	61%	39%
30	Did you ask dentist for sterilized instruments?	62%	38%
31	Do you use others used tooth brush /razor?	58%	42%
32	Do you use others earrings / nail clippers?	57%	43%
33	Do you ask for new needle during piercing/ tattooing?	63%	37%
34	Did you cover your open wound and sores?	65%	35%
35	Do you report needle and blade injuries?	63%	37%

Segment III of survey evaluated routine with regards to adolescences towards hepatitis C. Each analysis reaction was scored "Yes" and "No". Mean number of "Yes" answers were 42%. The range of most amazing and least reacted "Yes" questions were 66% and 34% individually. 55% respondents were tried for hepatitis C and those to cover open injuries/cuts were 65%. Around 63% respondents need to report Needle/cutting edge wounds to guardians and instructors. Around 63% respondents request new syringes to restorative staff. Around 61% respondents request new cutting edges to hairdressers and 62% of respondents request sanitize instruments to dental specialist. Around 63% respondents request new needle for puncturing and inking. In spite of the fact that 58% members share others tooth brush and razors and 57% utilize others studs and nail scissors (Table 4)

Discussion

The present investigation looked to assess information, disposition and routine with regards to provincial group Hussain Abad youths towards hepatitis C counteractive action included 100 individuals including male and female maturing between 18-50 years above from the group of Lahore Hussain Abad. The point of the investigation was to decide the information and mentality with respect to Hepatitis-C anticipation among individuals. As indicated by this examination, nearly individuals had misinterpretation about preventive measure towards the counteractive action of Hepatitis C.

Area II of survey was about knowledge questions and asked essential data, anticipation and method of transmission of hepatitis C among members. Inquiries number 1-8 were about fundamental data and counteractive action of hepatitis C. Inquiries number 9-16 were about hepatitis C method of transmission. Each inquiry reaction was scored "Yes" and "No". Mean number of "Yes" answers were 51%. The scope of most noteworthy and least reacted "Yes" questions 68% and 26% separately. The vast majority of respondents thought about hepatitis C, its viral causation, it impact basically liver and it can cause growth however on other hand only 38% knew it can influence youths. Shockingly 64% trust that hepatitis C contaminated individuals are in danger to others and 57% figure it could be discovered through easygoing contact (clasping hands). Greater part imagine that hepatitis C has an antibody in urban (52%) and semi-urban (75%) regions. Just 32% knew about shared tooth brush transmission. The defiled blood, hair stylist utilized contaminated cutting edges, tainted needle for inking and puncturing learning was 58. In spite of the fact that 74% in country setting realized that hepatitis C isn't transmitted by water and sustenance yet dominant part, 70%, didn't know about spread through contact open injuries/slices and mother to infant amid pregnancy. The greater part, 68% knew about unsterilized syringe transmission in urban setting.

Segment II of toll evaluated attitude of respondents towards hepatitis C and each inquiry reaction was scored "Yes" and "No". Mean number of "Yes" answers were 46%. The scope of most elevated and least reacted "Yes" questions were 77% and 16% individually. The greater part of respondents trust that hepatitis C is real medical issue and in the event that they discovered tainted at that point will go for advance examination in the two settings. Just 35% consider hepatitis C screening productive and 63% respondents believe it's certain to request screening amid Blood transfusion. Around 16% were ready to welcome in customary way and kiss hepatitis C tainted individual. Moreover 36% respondents in rustic setting were ready to utilize glass or measure of hepatitis C tainted individual. In spite of the fact that 65% respondents were consent to disconnect hepatitis C tainted individual however around 42% will visit hepatitis C contaminated relative, 44% willing to sit near tainted individual and around 37% trust that hepatitis C influence capacity of contaminated to visit others. The respondent's state of mind wasn't genuinely sufficient towards HCV in both setting.

The area III of survey evaluated practices with regards to young people towards hepatitis C. Each inquiry reaction was scored "Yes" and "No". Mean number of "Yes" answers were 42%. The scope of most astounding and least reacted "Yes" questions were 53% and 18% separately. Just

18% respondents were tried for hepatitis C and those to cover open injuries/cuts were 53%. Around 42% respondents need to report needle/edge wounds to guardians and educators. Around 37% respondents request new syringes to restorative staff. Around 52% respondents request new cutting edges to hair stylists and 47% of respondents request clean instruments to dental practitioner. Around 41% respondents request new needle for penetrating and inking. Despite the fact that 48% members share others tooth brush and razors and 36% utilize others hoops and nail scissors. Information of the right transmission course of HCV was unacceptable in the vast majority of the members. Information is delivered by association with claim condition where people themselves assemble their comprehension of world through experience. Human learning comes by and large with correspondence procedures and information assumes enter part in counteractive action.

Limitations

This analysis originate numerous limitations; Duration Time was too short. This investigation was focus only on rural community. Likert scale questionnaire has been used in this study. Data collection was faced lot of issues. The respondents of the study have very careless assertiveness concerning filling questionnaire. Participants of study have no awareness about the significance of the filling questionnaire sincerely.

Conclusion

Practices, attitudes and knowledge about hepatitis C among young people was incomplete. Aftereffects of this investigation demonstrate absence of comprehension about essentials of contamination control and counteractive action of Hepatitis – C transmission. The study had been determined the knowledge and attitude of people regarding Hepatitis-C prevention. The level of knowledge was good among people but there was no significant association between attitude and practices regarding hepatitis C prevention among the people. Moreover the people have poor practices toward Hepatitis C prevention. Furthermore factors (poverty, social context and conviction) were also influencing their conception toward Hepatitis-C prevention.

Acknowledgement

The first author would like to thanks all the faculty members of LSN for their valuable & excellent teaching strategies regarding present research work. She would also like to thanks authorities of university who gave me permission to collect data from the community. She is also thankful to the participants who actively participated, and gave me their precious time and information in this research. Thanks goes to English teacher Mr. Muhammad Sabir for his supports during research and manuscript writing.

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