



# Knowledge, attitudes and practice of primary healthcare physicians concerning the occupational risks of hepatitis B virus in Al Jouf Province, Saudi Arabia

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## KEYWORDS

Attitude;  
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## Summary

**Background:** Hepatitis B virus (HBV) infection is a well-recognized occupational risk for all healthcare workers (HCWs) worldwide.

**Aim:** This study aimed to assess the knowledge, attitudes, and practices of primary healthcare (PHC) physicians regarding the occupational risks of HBV.

**Method:** In this cross-sectional study, a questionnaire survey was administered to 145 physicians of primary care centers in the Al Jouf Province of Saudi Arabia. The questionnaire contained questions concerning the knowledge base, attitudes and practices of physicians regarding the occupational risks of HBV.

**Result:** The response rate of 82.8% yielded 120 questionnaires for analysis. The majority of physicians surveyed, 99 (82.5%), felt at high risk of contracting and spreading HBV. The vast majority, 115 (95.6%), considered the HBV vaccine safe for all ages. Of the total, 101 (84.2%) were vaccinated. Only 44 (36.7%) physicians recognized that HBV is resistant to alcohol and to some detergents. During surgical procedures, only a minority of the physicians always use double gloves and wear glasses. Almost all physicians were willing to subscribe to regular training programs concerning HBV.

**Conclusions:** A lack of knowledge was determined, and the practices of our physicians concerning the occupational risks of HBV appeared inappropriate. More education focusing on HBV is recommended.

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## Introduction

Hepatitis B virus (HBV) is one of the major diseases of humankind [1]. It is estimated that 30% of the global population (approximately 2 billion people) have serological evidence of HBV infection, whereas over 350 million people are carriers of chronic hepatitis B worldwide [1]. HBV is one of the most highly infectious diseases without seasonal distribution and is the tenth leading cause of death globally [1,2]. The virus is transmitted in the blood and in secretions, which can be diagnosed during acute and chronic phases [2,3]. Acute infection may cause a self-limited disease or fulminant hepatitis, which requires urgent liver transplantation [2,3]. Chronic hepatitis B (CHB) causes death associated with cirrhosis, liver failure, and hepatocellular carcinoma [3]. PHC physicians handle patients and are exposed to body fluids when taking blood samples, obtaining microbiological specimens and performing minor surgery [3,4]. The incidence of HBV infection among all healthcare workers (HCWs) in the United States, is estimated to be 3.5–4.6 infections per 1000 workers, which is 2–4 times the level for the general population [5]. In addition, numerous studies have shown that the risk of contracting HBV by HCWs is four times higher than that of the general population [5,6]. An additional risk factor for the acquisition of HBV among HCWs is the underlying prevalence of HBV infection in the population [6]. Thus, the disease has particular implications for PHC physicians in Saudi Arabia, which is a country with a high prevalence of HBV [7].

It is assumed that physicians practicing in the Al Jouf community are lacking important knowledge concerning and appropriate practices toward the occupational risks of HBV. Although many studies in different countries have been conducted, there have been few attempts to evaluate the knowledge, attitudes and practices of physicians practicing in Saudi Arabia regarding the occupational risks of HBV [4–6,8,9]. Therefore, this study aimed to assess the primary care physicians' knowledge, attitudes and practices regarding the occupational risks of HBV.

## Methods

### Study design and setting

During March 2012, "a cross-sectional descriptive study was performed among PHC physicians practicing in primary healthcare centers (PHCCs) in the Al Jouf Province of Saudi Arabia (population  $3.5 \times 10^5$ )". The province contains many

towns, including Domat al-Jandal, Sowair, and Sakaka. There were approximately 180 physicians practicing in 35 PHCCs distributed equally in this province. After obtaining permission from the healthcare authorities, 145 newly designed, self-administered, anonymous, confidential questionnaires with explanatory letters were sent to physicians practicing in 30 centers. The study protocol was discussed and approved by the research and ethical committee of the College of Medicine of Al Jouf University. The well-structured questionnaire was composed of 29 "closed-ended questions". The first part covered the demographic characteristics of the physicians. The second part of the questionnaire contained 23 closed-ended questions with variable items 2–15 focusing on the physicians' knowledge base, attitudes and important points concerning the prevention and control of HBV in their daily practices.

On February 15, 2012, the questionnaire was pre-tested during a pilot study that was conducted in 4 PHCCs inside Sakaka city. This pre-test was performed to ensure the clarity and relevance of the questionnaire and to determine the amount of time required to answer all items. The result of the pre-test was critically evaluated, and accordingly, some modifications were made. The average time required to complete all items in the questionnaire was approximately 20 min. The results of the pilot study were not included in the final analysis.

### Statistical analysis

The data were analyzed using the SPSS (version 17) program;  $p < 0.05$  was considered significant. The mean  $\pm$  SD and proportions were used to describe continuous and dichotomous data, respectively.

## Results

### Population characteristics

Of the 145 questionnaires distributed, 120 (response rate: 82.8%) were collected and analyzed. The general characteristics of the physicians are shown in (Table 1). Most the physicians in the study were males ( $n=87$ ; 72.5%), and the number of female physicians was only 33 (27.5%). The male to female ratio was found to be 2.6:1; the physicians ranged from 27 to 60 years of age (mean: 38 years old [SD=10.6]). Physicians with  $\geq 10$  years of practice constituted 50% of the sample. Of the physicians, 66 (55.0%) had postgraduate degrees, and only 13 physicians were Saudi nationals (10.8%).

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