

**EFFECTIVENESS OF BLACK TEA UPON BLOOD CHOLESTEROL AMONG  
HYPERLIPIDEMIC WORKING WOMEN**

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**ABSTRACT**

Working women who are at a crucial run through where they deal with students in bringing them away from the spot light areas, are found to have increased blood cholesterol level. Hyperlipidemia is a major problem faced by large number of population which is always silent till any symptoms appear. A non-pharmacological natural healing approach is needed to overcome that problem. Administration of black tea is simple and easy to implement, no notable side effects and most acceptable to reduce cholesterol level among the hyperlipidemic working women.

**KEYWORDS:** Hyperlipidemia, women, Blood Cholesterol, Black tea.**INTRODUCTION**

"It's Hot! It's Fun! It's Happen" WHO indicate that cardiovascular disease is responsible for 20% of health life years lost in most affluent countries. Working women who are at a crucial run through where they deal with students in bringing them away from the spot light areas, are found to have increased blood cholesterol level. It was observed that taking tea has become a habit to relax and to energize themselves, the good effect of tea was hidden and many were not aware.

**Statement of the Problem**

A descriptive study to assess the effectiveness of black tea upon the blood cholesterol level among hyperlipidemic working women.

**OBJECTIVES**

To assess the level of blood cholesterol among the hyperlipidemic working women before and after administration of black tea.

To find the associations between the selected clinical variables of hyperlipidemic working women and their level of blood cholesterol.

To assess the existing level of knowledge regarding prevention of hyperlipidemic working women.

**RESEARCH METHODOLOGY**

The research approach selected for the study is an evaluative approach. The population selected for the study was working women with hyperlipidemia. 40 hyperlipidemic working women were selected through

non probability purposive sampling technique, on the basis of the inclusion criteria, data was collected using demographic variable proforma, clinical variable proforma, rating scale for level of blood sugar, check list for knowledge assessment, rating scale for level of satisfaction.

**FINDINGS AND DISCUSSION**

Demographic and clinical variables of hyperlipidemic working women. Most of the patients were in the age group of 36-45 years (40%). A majority of them were males (52.5%), married (95%), Hindu (82.5%). It was also noticed that most of them were from nuclear family (70%), most of them did not have any family history of heart disease (92.5%). Majority of them had done arts subject (57%), 62% were earning between Rs. 10,001-20,000 per month. Majority of the working women did not have diabetes (92.5%), 92.5% of them were doing moderate physical activity and 32.5% of them had not undergone any health check. It was also seen that majority of them (82.5%) had normal blood pressure. The waist circumference among most of the male was between (61%) 95-97cm, among female 85% of them had above 90cm. Comparison of blood cholesterol level before and after administration of black tea Majority of the working women (80%) had borderline high level of cholesterol and 20% of the teachers had high level of cholesterol in the pre-test. The mean level of cholesterol in pretest was 220.68 and S.D was 17.734.

**CONCLUSION**

Hyperlipidemia is a major problem faced by large number of population which is always silent till any

symptoms appear. A non-pharmacological natural healing approach is needed to overcome that problem. Administration of black tea is simple and easy to implement, no notable side effects and most acceptable to reduce cholesterol level among the hyperlipemic teachers. There was no association between demographic variables and cholesterol level the results support that the administration of black tea is one of the interventions to minimize blood cholesterol.

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