1. INTRODUCTION

Globally cardiac vascular disease is a major cause of illness and death. Cardiac disease is one of the major causes of mortality and morbidity in population of both developed as well as developing countries. The prevalence of Indian subcontinent is presently one of the highest and is further on an increase and India faces a major challenge of adult morbidity and mortality due to cardiovascular disease.

Today heart disease has emerged as the most important cause of premature disability and deaths all over the world. Currently, India is a home to at least 4.5 crore patients with ischemic heart patients and about 25 per cent of the deaths in the age group of 25-69 years occur because of heart disease (Sharma 2010). Every year, cardiac disease claims 5-6 million deaths occur in people below the age of 45 years. By the year 2020, as per WHO estimates India will have the largest cardio-vascular death burden in the world which would account for one-third of all the deaths.

The rise in cardiac disease reflects a significant change in dietary habits worldwide as a result of industrialisation and food market globalization. Cardiac rates doubled in India due to dietary changes associated with epidemiological transition from rural sustenance economy to urban oriented economy. Current urbanization rate in India is 35.0 per cent as compared to 15.0 per cent in 1950. Rising affluence has modified the dietary pattern characterized by increased consumption of diets rich in fat, sugar and calories which is directly related to cardiac disease.

Metabolic diseases like cardiac disease are ever growing and the prevalence is increasing day by day. But presently changes in lifestyle and dietary pattern due to technological development, industrialization, increased urbanisation and economic condition resulting in cardiac problems (Gupta et al. 2008). Non communicable diseases like cardio-vascular disease, diabetes mellitus, hypertension are increasing in India because of various factors like increasing expectancy of life, in spite of the amazing transformation of the industrialised nations in terms of economy, science and technology, the declining health status due to non communicable diseases has spurred scientists to work on management approaches of diseases like diabetes mellitus, heart disease and hypertension which are induced by the factors like individual life styles, physiological inheritance and physical environment.
There are two strategies of prevention of cardiac disease viz. primary and secondary prevention. Primary intervention involves management in diet, exercise and other life style changes that will lower the risk of cardiac disease. Whereas, secondary prevention is the treatment of hypercholesterolemia in patients who already have cardiac disease. So implementation of intervention package is the key path to both kinds of prevention. It can effectively improve the dietary patterns, control body weight and overall blood lipid profile. To bring about these changes in the lifestyle of people comprehensive interpersonal counseling is an effective method as it can be individualised according to the need and give a better opportunity to multiple risk factors.

No doubt that modern allopathic system of medicine is greatly accepted in the treatment of heart disease throughout the world, and becoming expensive day by day and getting out of the reach of common masses. Moreover, Drugs are less preferred due to their side effects and are prescribed only in treating severe cases. Hence dietary counseling/ modification are the first in the line of treating heart problems.

Among the many health predictions for the new millennium, the most alarming is cardiovascular disease because it is a complex and multifactorial disease. The postulated risk factors predisposing the cardiac disease are age, sex race and genetics which cannot be controlled or modified, whereas the factors such as cholesterol level, obesity, hypertension, exercise habits, smoking, alcohol intake, dietary fat intake and stress can be modified or controlled to reduce the risk of cardiac disease. Common masses are mostly ignorant about these modifiable factors. It is therefore, important to concentrate on modifiable factors which can reduce the risk of developing heart diseases.

Proper diet is the key to good health and vigour. Sensible and healthy food habits right from childhood coupled with healthy life style can not only delay aging and increase the life span but also improve the overall quality of life. Proper guidance and education given regarding diet in cardiac disease can make significant improvement in the life style of cardiac patients. So diet is the most important factor that is used to treat the people who have elevated blood lipid levels.

Hence the present study aimed to assess the nutritional status and prevalent practices amongst cardiac patients in the surrounding area. Thereafter, an intervention package was developed which include various audio/ visual aids. This was implemented on selected group of cardiac patients to see the impact of interpersonal counseling on
knowledge and life style practices of cardiac patients. Hence, keeping in view the proposed work was envisaged with following objectives:

1) To assess the Nutritional status of the Cardiac patients.

2) To Develop, Implement and Validate the Intervention Package for Cardiac patients.

3) To formulate suitable Recipes for Cardiac patients.