CONCLUSION

The urban Sikh population in Amritsar has a high prevalence of lifestyle disorders with prevalence rates of T2DM, hypertension and metabolic syndrome estimated to engulf 23.2%, 35.9% and 34.3%, respectively. Further, a high prevalence of multiple modifiable risk factors associated with these lifestyle disorders was found. The management of these lifestyle disorders is possible with a combination of medication and strict lifestyle changes. However, the awareness of T2DM, hypertension and metabolic syndrome is inadequate in urban Sikh population of Amritsar. The main reasons for this inadequate awareness includes demographic characteristics, health beliefs and lack of knowledge about them. Awareness programs are required to manage them in a social dimension. There is a need and scope for health education activity regarding these lifestyle disorders and their risk factors to promote healthy lifestyle among this population. With the alarming increase in prevalence of these lifestyle disorders, the policy-makers and the healthcare providers should implement the measures for prevention and management of these non-communicable disorders to prevent complications and epidemiological outburst in the country.