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A study to assess the knowledge of staff nurses regarding the management of minor ailments during postpartum period in NMCH, Nellore, Andhra Pradesh

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Abstract

Background: Puerperium is the period following child birth during which the body tissues, specially the pelvic organs revert back approximately to pre-pregnant state both anatomically and physiologically. There are some physiological changes that will occur during postnatal period. Involution is the processes were by the pelvic reproductive organs returns to their pre-pregnant size and position and the placental site of endometrial heals.

Aim: The aim of the study was to assess the knowledge regarding management of minor ailments during postpartum period among nurses.

Objectives: 1. To assess knowledge regarding management of minor ailments during post-partum period among staff nurses.

2. To find out association between level of knowledge with selected demographic variables among nurses.

Methodology: 100 staff nurses working in PN ward NMCH, Nellore were selected by using Non-probability convenience sampling technique method.

Results: Regarding the level of knowledge among nurses, 42(42%) of them had inadequate knowledge, 34(34%) had moderately adequate knowledge and 24(24%) of them had adequate knowledge regarding management of minor ailments during postpartum period.

Keywords: Knowledge, management, minor ailments, post-partum period, staff nurses

Introduction

Puerperium is the period following child birth during which the body tissues, specially the pelvic organs revert back approximately to pre-pregnant state both anatomically and physiologically. Puerperium is the period following child birth when the endocrine influences of the placenta removed the physiological changes of pregnancy is reversed. The reproductive organs return back approximately to their pre-gravid state both anatomically and physiologically during which lactation is initiated^[1].

Puerperium begins as soon as the placenta is expelled and lasts for approximately 6 weeks when the uterus becomes regressed almost to the non-pregnant size. The period is arbitrarily divided into three within 24 hrs is called immediate, upto 7 days is called early and upto 6 weeks is called remote period^[2].

There are some physiological changes that will occur during postnatal period. Involution is the processes were by the pelvic reproductive organs returns to their pre-pregnant size and position and the placental site of endometrial heals. After the delivery, uterus becomes firm and retracted with alternate softening hardening. The uterus measures about 20 x 12 x 7.8 cm and weights about 1000gms. After delivery the lower uterine segment and cervix remain loose, thin and stretched. It may also appear edematous and bruised from the delivery and may have small tears of lacerations^[3].

There are some minor ailments occur during postnatal period like after pain, perineal pain, breast engorgement, postnatal diuresis constipation etc. After pain is the infrequent spasmodic pain felt over the lower abdomen after delivery for a viable period of 2-4 days. Presence of blood clots or bits of the after birth leads to hypertonic contractions of uterus in an attempts to expel them out. Management of after pain is the massaging of uterus with expulsion of clots, administration of antibiotics and antispasmodics^[4].

Discomfort on the perineal region due to the child birth and episiotomy is called as pain on perineum. This will be due to some contractions or retractions of uterus the management includes examination of the perineum for any vulval-haematoma, provide analgesics and ice packs. Vaginal canal appears swollen and smooth after delivery, gradually becomes smaller and firm, never regains to the pre-pregnant state muscle floor of the perineum is stretched, swollen or bruised, even an intact perineum can be edematous, erythematous and uncomfortable scar may present is episiotomy is performed^[5].

Postnatal diuresis is the within 12 hrs of the birth the women begins to loss excess tissue fluid accumulated during pregnancy. The profuse diuresis occurs at night for the 2-3 days after birth. It can be managed by keeping the mother clean and dry, changing of dresses frequently, cleaning of bed sheets^[6]. Constipation is the most important problem much less because of early ambulation and liberalization of food intake. This will occur due to reduced intake of fluid and fibers in diet and reduced motility of the bowel to solve this encourage the mother to take diet containing sufficient amount of roughage and fluid which is enough to move the bowel, and administration of mild laxatives^[6].

Breast engorgement is described as excessive swelling and over filling of the breast and areola and is physiological response to an increase in blood flow and an increase in milk production. It is characterized by symptoms of pain, tenderness, hardness. It can be managed by wearing of support bra, maintain good breast feeding, provide mild analgesics, removal of milk from breast etc^[7].

Need for the study

In India a third of fourth degree laceration or tear is a serious adverse. Outcome of vaginal delivery. It left untreated may lead to persistent perineal pain. It's incidence rate is 62% in 2019^[8].

Perineal pain is present after birth in almost all 95-100% who have experience perineal trauma. It has been shown that woman with vaginal delivery and minimal or absent perineal trauma have better recoveries the prevalence of pain was found 99.2% in first day 62.3% in 1st week at birth 80% seven weeks^[9].

Constipation occurs in about 15% worldwide population and people with constipation have lower quality of life when compared with healthy population it is ranged from 9-39%. After pain is having a combined prevalence estimates from meta analyses ranged from 65% to 12.9 at different week of post-partum period up to 16.8%. Post-partum diuresis is other common puerperial complication which increases the risk of maternal morbidity in postnatal period with incidence of 56% women in 90%^[10].

A prospective study was conducted to evaluate the post-partum perineal pain and dyspareunia in women with in the first 2 weeks after their first vaginal delivery. Pain was assessed with a 4 point verbal rating score and an 11 point visual analogue scale on day 1, day 5 and 2 months after delivery. Perineal pain affected 92% of mothers, and it was found that perineal pain was associated with perineal trauma^[11].

A study was performed to assess maternal fatigue in breast feeding among primi para mothers during the first nine weeks post-partum. This plot study documented maternal fatigue levels among breast feeding primi para mothers and

relationship between maternal fatigue and selected physiological, situational, performance factors and fatigue interference with activities of daily living. A convenience sample of 41 mothers completed self-report instrument measuring breast feeding experiences, fatigue, sleep characteristics perceived stress, depression, at 3 days, 3, 6, and 9 weeks post-partum. Positive moderate relationships between maternal fatigue and selected physiological, situational, performance factors and fatigue interference with activities of daily living a Positive moderate relationships were detected at all but times results suggested that fatigue was moderately significant among breast feeding mothers in the early to late post-partum period^[12].

Problem statement

A study to assess the knowledge of staff nurses regarding the management of minor ailments during postpartum period in NMCH, Nellore.

Objectives

- To assess knowledge regarding management of minor ailments during post-partum period among staff nurses.
- To find out association between level of knowledge with selected demographic variables among nurses.

Delimitations

- Nurses working in Narayana Medical College Hospital, Nellore.
- Sample size of 100.

Methodology

Research approach

A quantitative approach was adopted to determine the research study.

Research design

The present study was conducted by using descriptive research design

Setting of the study

The study was conducted at postnatal ward at Narayana Medical College Hospital, Nellore.

Target population

The target population for the present study includes all nurses.

Accessible population

The accessible population for the present study was nurses working at postnatal ward in Narayana Medical College Hospital, Nellore and who fulfilled the inclusion criteria.

Sample

The sample for the present study was nurses working in Narayana Medical College Hospital, Nellore.

Sample size

The samples consist of 100 staff nurses.

Sampling technique

Non-probability convenience sampling technique was adapted for the study.

Criteria for sampling selection

Inclusion criteri

- Staff nurses who are working in postnatal ward at NMCH, Nellore.
- Staff nurses who are willing to participate in the study.

Exclusion criteria

- Staff who was sick or leave at the time of data collection.
- Staff who was not available at the time of data collection.

Description of tool

Part-I: Socio demographic variables of staff nurses: It consists of staff nurses includes Age, Sex, Educational status, area of working, Year of experience, Source of information and attended any CNE or workshop.

Part-II: This consists of structured questionnaire to determine the knowledge regarding management of minor ailments during postpartum period.

Table 1: Score interpretation

Level of Knowledge	Score
Inadequate Knowledge (0-12)	<50%
Average Knowledge (13-24)	51-70%
Good Knowledge (25-36)	>70%

Table 4: Association between level of knowledge among staff nurses with demographic variables (N=100)

S. No	Demographic Variables	Inadequate		Moderately Adequate		Adequate		Chi-Square
		F	%	F	%	F	%	
1.	Age							CV=9.548 Tv=9.49 Df=6 S* P< 0.001
	a. 21-30 years	39	39	33	33	24	24	
	b. 31-40 years	3	3	-	-	-	-	
	c. >40 years	-	-	1	1	-	-	
2.	Educational Qualification							CV=9.947 Tv=9.49 Df=6 S* P< 0.05
	a. ANM	9	9	3	3	1	1	
	b. GNM	11	11	4	4	4	4	
	c. B.Sc.	22	22	27	27	19	19	
3.	Previous experience in PN ward							CV=13.8254 Tv=5.99 Df=2 P< 0.05
	a. Yes	26	26	15	15	18	18	
	b. No	16	16	19	19	6	6	

Major findings of the study

- Regarding the level of knowledge among nurses, 42(42%) of them had inadequate knowledge, 34(34%) had moderately adequate knowledge and 24(24%) of them had adequate knowledge regarding management of minor ailments during postpartum period.
- The mean knowledge score of staff nurses was 11.33 and standard deviation was 6.078.
- Regarding association, Age, educational qualification and previous experience in the PN ward had significant association with level of knowledge at $P < 0.05$ level.

Conclusion

The study concluded that half of the staff nurses (42%) had inadequate knowledge regarding management of minor ailments during postpartum period.

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Data Analysis and discussion

Table 2: Frequency distribution of level of knowledge among staff nurses regarding management of puerperium (N=100)

Level of knowledge	Frequency(f)	Percentage (%)
Inadequate knowledge	42	42
Moderately adequate knowledge	34	34
Adequate knowledge	24	24
Total	100	100

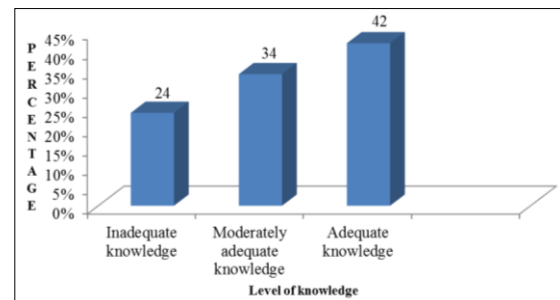


Fig 1: Frequency distribution of level of knowledge on management of minor ailments during postpartum period among staff nurses

Tab 3: Mean and standard deviation of level of knowledge among staff nurses

Level of knowledge	Mean	SD
Staff nurses	11.33	6.078

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