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To assess the effect of acupressure on reduction of nausea and vomiting among primigravida women

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Abstract

Pregnancy can be a very special time in the life of a woman. Nausea and vomiting are common problems during pregnancy which may lead to weight loss, anorexia, general weakness and malaise. Acupressure on P6 point which is among the complementary and alternative therapies help to reduce nausea and vomiting. The aim of study was to assess the effect of acupressure on reduction of nausea and vomiting among primigravida women. A quasi-experimental study was conducted to assess the effect of acupressure on reduction of nausea and vomiting among primigravida women in selected areas. The study was consisted of 60 postnatal mothers, 30 each in experimental and control group selected by non-probability purposive sampling technique. Findings showed that according to pretest and posttest level of nausea and vomiting distress in experimental group and control group. In experimental group during pretest, maximum of primigravida women i.e. 70% had moderate and remaining 30% had great nausea distress, whereas in posttest, maximum of primigravida women i.e. 73% had mild and remaining 27% had moderate nausea distress. In control group during pretest, maximum of primigravida women i.e. 73% had moderate and remaining 27% had great nausea distress, whereas in posttest, maximum of primigravida women i.e. 77% had moderate, followed by 20% had great and remaining 3% had mild nausea distress. Similarly vomiting distress, in experimental group during pretest, half of the primigravida women i.e. 50% had moderate and great vomiting distress, whereas in posttest, more than half of primigravida women i.e. 53% had moderate, followed by 37% had mild and remaining 10% had no vomiting distress. In control group during pretest, maximum of primigravida women i.e. 70% had moderate and minimum 30% had great vomiting distress, whereas in posttest, more than two third of primigravida women i.e. 67% had moderate, followed by 30% had great and least 3% had mild vomiting distress. The difference between mean pretest and posttest nausea and vomiting score was found statistically significant at the $p < 0.05$ level of significance.

Keywords: Acupressure, reduction of nausea and vomiting, primigravida women

Introduction

Pregnancy is a sole, thrilling and often excitement moment in a women's life, and it highlights that women are amazing creative and nurturing powers while providing a bridge to the future. It is most powerful creation to have life growing inside the mother womb. Pregnancy one of vital events which needs special care from conception to postnatal period. A pregnancy may end either in live birth, miscarriage, or abortion. The anatomical, physiological and biochemical adaptations to pregnancy are profound. These changes that the female body undergoes during pregnancy begin soon after fertilization and continue throughout pregnancy. An embryo is developing offspring during the first eight weeks following fertilization after that term fetus is used until birth^[1].

Morning sickness, also called nausea and vomiting of pregnancy, is a common condition. It estimated that almost 70% of women worldwide experience nausea and vomiting in pregnancy but reported rates vary widely. Hyperemesis gravidarum most severe form of nausea and vomiting that affects 1.1%. Symptoms usually improve during the second trimester (weeks 13 to 27). In a few women, however, morning sickness occurs throughout their pregnancy. Nausea and vomiting during pregnancy can also impact quality of life, reducing ability to carry out daily parenting or work tasks and report depression^[2].

Acupressure has been studied and offered as a valuable treatment in reducing nausea and vomiting during pregnancy. Therefore, the purpose of this study is to investigate the difference in reduction of nausea and vomiting among primigravida women those receiving

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acupressure as an alternative therapy. Acupressure works on the precardium 6 (P6 or Neiguan) as acupressure point on the wrist. The effect of acupressure which was non-invasive, having no side effect, easy to adopt and easy to perform encouraged researchers to conduct the study in community settings [3].

A quasi-experimental study was conducted to assess effect of acupressure on nausea and vomiting during pregnancy, Egypt. The sample size was 100 pregnant women. The treatment group received acupressure on the pericardium6 points (P6) bilaterally for about 60 minutes per day for 7 consecutive days. Findings of study revealed that in experimental group, about 68% of pregnant women suffer from nausea and vomiting in first trimester and remaining 32% felt nausea and vomiting in second and third month of pregnancy. In control group, 74% suffered from nausea and vomiting during the first month of pregnancy and remaining 26% felt nausea and vomiting in second and third month of pregnancy. Hence, it was concluded that acupressure has a positive effect on the reduction of severity of nausea and vomiting during pregnancy [4].

Methodology

Research design

A quasi-experimental pretest-posttest control group design was used to assess the effect of acupressure on reduction of nausea and vomiting among primigravida women.

Variables of the study

Independent variable: Independent variable of the study was acupressure among primigravida women.

Dependent variable: Dependent variable of the study was nausea and vomiting among primigravida women.

Target population

In this research study, the target population was primigravida women who had moderate to severe nausea and vomiting residing in selected areas, Hoshiarpur, Punjab

Sample and sampling technique

The sample size was 60 primigravida women from selected areas, i.e. 30 each in experimental and control group. Non-probability purposive sampling technique was used in the study to select the sample for study.

Development and description of tool

Section A: It included socio-demographic variables such as age (in years), gestational age (in weeks), education, dietary habit, occupation, type of family, family income (₹/month), area of residence, family history of nausea and vomiting and source of information.

Section B: It included Modified Rhodes index of nausea, vomiting and retching scale to measure the level of nausea and vomiting before and after the intervention among primigravida women.

Data collection procedure

The participants of the research study were explained about the purpose of research and objective of the study. Written consent was taken from them for their participation in the study. Pretest was done to assess nausea and vomiting among primigravida women in experimental and control group. Instructions were given regarding acupressure at P6 point located at forearm in between the two tendons by thumb or forefinger for 5 minutes (three times a day with the interval of 4 hours in experimental group. The pressure was applied for 4-5 seconds then the pressure was released and repeated simultaneously for 15 consecutive days. The routine care was provided to both experimental and control group. Posttest was conducted on 16th day in both the groups. The respondents were assured that their responses would be kept confidential and used for research purpose. The collected data was then organized for analysis.

Ethical considerations

- Ethical approval was obtained from institutional research committee.
- Permission was obtained from municipal councillor of selected areas to conduct the study.
- Certification after one month training in acupressure was obtained from acupressure therapist.
- The purpose of the study was explained to all the subjects and written informed consent was taken from them for their participation in the study.
- The responses were kept confidential and the professional interpersonal relationship with subjects was maintained.
- Routine work of subjects was not disturbed in both experimental and control group

Plan of data analysis

Analysis and interpretation of data was done by using descriptive and inferential statistics i.e. by calculating mean, mean score, percentage, standard deviation, chi square, 't' test and analysis of variance (ANOVA) test to assess effect of acupressure intervention on reduction of nausea and vomiting among primigravida women. The level of significance chosen was $p < 0.05$.

Results and Discussion

Findings related to frequency and percentage distribution of primigravida women according to selected socio-demographic variables

Socio-demographic variables	Experimental group (n=30)		Control group (n=30)		df	χ^2
	N	%	N	%		
Age (in years)						
18-24	10	33	15	50	2	2.37 ^{NS}
24-30	12	40	11	37		
30-35	8	27	4	13		
> 35	0	0	0	0		
Gestational age (in weeks)						
8-10	9	30	13	43	1	1.14 ^{NS}
10-12	21	70	17	57		
Education						
Illiterate	0	0	0	0	0	0

Upto primary	2	7	3	10	3	1.09 ^{NS}
Upto secondary	4	13	5	17		
Senior secondary	7	23	9	30		
Graduate and above	17	57	13	43		
Dietary habits						
Vegetarian	9	30	7	23	2	0.88 ^{NS}
Non-vegetarian	15	50	14	47		
Eggetarian	6	20	9	30		
Occupation						
Working	13	43	10	33	1	0.63 ^{NS}
Non-working	17	57	20	67		
Type of family						
Nuclear	14	47	10	33	2	1.30 ^{NS}
Joint	13	43	15	50		
Extended	3	10	5	17		
Family income (₹/month)						
≤10000	1	3	2	7	3	1.86 ^{NS}
10001-20000	3	10	6	20		
20001-30000	9	30	9	30		
>30000	17	57	13	43		
Area of residence						
Urban	25	83	27	90	1	0.57 ^{NS}
Rural	5	17	3	10		
Family history of nausea and vomiting						
Yes	14	47	11	37	1	0.61 ^{NS}
No	16	53	19	63		
Source of Information						
Family member and Relatives	6	20	12	40	2	6.84*
Health personnel	6	20	10	33		
Media	18	60	8	27		

NS = Non-significant

*Significant at $p < 0.05$ level

Objectives 1: To assess the level of nausea and vomiting among primigravida women in experimental and control group

According to the first objective i.e. in experimental group during pretest, maximum of primigravida women i.e. 70% had moderate and remaining 30% had great nausea distress, whereas in posttest, maximum of primigravida women i.e. 73% had mild and remaining 27% had moderate nausea distress. In control group during pretest, maximum of primigravida women i.e. 73% had moderate and remaining 27% had great nausea distress, whereas in posttest, maximum of primigravida women i.e. 77% had moderate, followed by 20% had great and remaining 3% had mild nausea distress. Similarly, vomiting distress in experimental group during pretest, half of the primigravida women i.e. 50% had moderate and great vomiting distress, whereas in posttest, more than half of primigravida women i.e. 53% had moderate, followed by 37% had mild and remaining 10% had no vomiting distress. In control group during pretest, maximum of primigravida women i.e. 70% had moderate and minimum 30% had great vomiting distress, whereas in posttest, more than two third of primigravida women i.e. 67% had moderate, followed by 30% had great and least 3% had mild vomiting distress.

These findings were consistent with the study conducted by Nisha BB. to assess the effectiveness of acupressure on reduction of nausea and vomiting among antenatal mothers and findings showed that in experimental group during pretest revealed that majority of antenatal mothers i.e. 16.66% had mild, 56.66% had moderate and 26.66% had severe nausea and vomiting, whereas in post intervention revealed that the majority of antenatal mothers i.e. 53.33% had a moderate and 46.66% had mild nausea and vomiting.

In control group revealed, the pretest score was 16.66% had mild, 70% had moderate and 13.33% had severe nausea and vomiting, whereas in posttest score revealed that 13.33% had severe, 56.66% had moderate and 30% had mild nausea and vomiting.

Objective 2: To compare the level of nausea and vomiting among primigravida women in experimental and control group

According to second objective i.e. comparison between pretest and posttest level of nausea and vomiting score among primigravida women in experimental and control group. In experimental group, mean pretest nausea score of primigravida women was 7.33 and mean posttest nausea score was 4.03. In control group, the mean pretest nausea score was 6.76 and mean posttest nausea score was 6.73. Similarly, vomiting score in experimental group, mean pretest vomiting score of primigravida women was 7 and mean posttest vomiting score was 4.06. In control group, the mean pretest vomiting score was 6.63 and mean posttest vomiting score was 6.73. The difference between mean pretest and posttest nausea and vomiting score was statistically significant at $p < 0.05$ level of significance.

These findings were consistent with the study conducted by Smith C, Crowther C and Beilby J. to determine effect of acupuncture on pc6 point to treat nausea and vomiting in early pregnancy and findings showed that nausea mean score in experimental group during pretest was 8.2, whereas in posttest nausea mean score was decreased upto 4.0 and in control group nausea mean score of nausea during pretest was 8.4, whereas in posttest mean score was 5.0. Similarly vomiting mean score in experimental group during pretest was 2.1, whereas in posttest mean score was decreased upto

0.9 and in control group vomiting mean score during pretest, mean score was 2.1, whereas in posttest mean score was 1.4. The difference between mean pretest and posttest nausea and vomiting score was statistically significant at $p < 0.05$ level of significance.

Conclusion

It was concluded that the difference between pretest and posttest nausea and vomiting score among primigravida women in experimental group was found statistically significant at the level $p < 0.05$. So it was concluded that acupressure was effective on reduction of nausea and vomiting among primigravida women as it is simple, non-invasive and easily performed technique can be used by health care professionals. So, we need to motivate and create awareness among health care providers regarding effect of acupressure on reduction of nausea and vomiting.

Conflict of Interest

Not available

Financial Support

Not available

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