Knowledge on danger signs of pregnancy among antenatal mothers at NMCH, Nellore

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Abstract
Background: Worldwide every day at least 1,600 women die from complication of pregnancy and child birth. The majority of which occurs in the developing world between 25 to 33% at all deaths at women in the reproductive age group in developing countries are the results, at danger signs at pregnancy and fetus apart from the mortality maternal morbidity are also at serious concern.

Aim: The aim of the study was to assess the knowledge on danger signs of pregnancy among antenatal mothers.

Objectives: 1. to determine the knowledge of antenatal mothers regarding danger signs of pregnancy. 2. To find out association between level of knowledge with their selected demographic variables.

Methodology: 60 antenatal mothers admitted in antenatal ward at Narayana Medical College Hospital, Nellore were selected by using Non-probability convenience sampling technique method.

Results: Regarding level of knowledge among 60 antenatal mothers, 46(76.6%) had inadequate knowledge, 10(16.6%) had average knowledge, and 4(6.66%) had adequate knowledge regarding danger signs of pregnancy.

Keywords: Knowledge, danger signs, pregnancy, antenatal mothers

Introduction
Pregnancy is a state that it is a period from conception to child birth and it is a mother who carry a human embryo or fetal gestate during pregnancy from fertilization until birth, during the pregnancy there is progressive anatomical physiological and biochemical change not only continued to the genital organs but also to all system of the body this is particularly a phenomenon of maternal adaptation to the increasing of demands at the growing fetus unless well understood, this physiological adaptation of normal pregnancy can be misinterpreted as pathological[1].

Some symptoms during pregnancy are par for the course but others are cause for alarm. Bleeding means different things through your pregnancy if the client having heavily bleeding and have severe abdominal pain and menstrual like cramps or feel like you are going to faint during first trimester it could be a sign at an ectopic pregnancy. Heavy bleeding with cramping could also be sign in 1st or early second trimester by contras, bleeding with abdominal pain in the 3rd trimester may indicate placental abruption, which occurs when the placenta separate from the uterine line[2].

Severe Nausea and vomiting is being malnourished and dehydrated can harm to the baby if can’t eat or drink anything, you can run the risk of becoming dehydrated. Early contractions before the labour could be a sign at preterm labor but a lot of first time moms may confuse true labour and false labour. The false labour contractions are called Braxton-Hicks contractions. They are unpredictable non rhythmic and do not increase in intensity. They will subside in an hour or with hydration[4].

Persistent severe headache, abdominal pain, visual disturbances and swelling during third trimester. These symptom could be a sign of pre-eclampsia that is serious condition that develops during pregnancy and is potentially fetal. The disorder is marked by high blood pressure, excess protein in your urine that typically occurs after the 20th week of pregnancy[5]. Preventive health care strategies are typically described as taking place at the primary, secondary, tertiary and quaternary prevention level. In addition that term primary prevention has been used to describe all measures taken to ensure fetal wellbeing and prevent any long term health consequences from gestational history and or disease[6].
Need for the study
Worldwide every day at least 1,600 women die from complication of pregnancy and child birth. The majority of which occurs in the developing world between 25 to 33% at all deaths at women in the reproductive age group in developing countries are the results, at danger signs at pregnancy and fetus apart from the mortality maternal morbidity are also at serious concern [7].
An exploratory descriptive study was conducted at two maternal and child health centers selected randomly in Albehonia, assessed women awareness of danger sign at obstetric complication. The study objects consisted at 200 pregnant women attending MCH clinics for tetanus toxoid immunization during pregnancy were enrolled in the study. The study revealed that slightly more than one quarter at obstetric danger sign compared to almost the same proposition (26.0%) that had good awareness about such signs while (47.5%) at the study subjects exhibits for awareness, lack of awareness about obstetric danger signs was related younger age, low level of education, gravidity and parity [8].
A study conducted that national maternal mortality study 2017 reported that poor quantity antenatal care was found to contribute to 15% at maternal death and to 13 maternal deaths 1000,000 live birth it played a more important 34% in cardiac disease lack of antenatal care and poor quality antenatal care were considered to be avoidable factors in 19% and 28% of causes respectively [9].
Globally women that die each year die to pregnancy and child birth are Africans (53%) while the Asians(42% and to a lesser extent later Americans(4%) less than (1%) at maternal death occurs in developed countries it is estimated that (99%) maternal deaths occurs in the developing world every year [10].
WHO states that in India every five minutes one women dies from complications related to pregnancy and child birth. This adds up to a total at 1,21,0000 women per year 15% at the women develops life threatening complications [11].
Statement of the problem
A study to assess the knowledge on danger signs of pregnancy among antenatal mothers in NMCH, Nellore.
Objectives
- To determine the knowledge of antenatal mothers regarding danger signs of pregnancy.
- To find out association between level of knowledge with their selected demographic variables.
Delimitations
- Antenatal mothers attending selected hospital, Nellore.
- Antenatal mothers who are available & willing for the study.
- Sample size of 60 antenatal mothers.
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 Pediatric ward in Narayana Medical College Hospital, Nellore.
Target population
The target population for the present study was antenatal mothers.
Accessible population
The accessible population for the present study was antenatal mothers admitted at antenatal ward at Narayana Medical College Hospital, Nellore and who fulfilled the inclusion criteria.
Sample size
The samples consist of 60 antenatal mothers.
Sampling technique
Non-probability convenience sampling technique was adapted for the study.
Criteria for sampling selection
Inclusion criteria
- Antenatal mothers admitted in antenatal ward at Narayana Medical College Hospital, Nellore.
- Antenatal mothers willing to participate in the study.
Exclusion criteria
- Antenatal mothers who are not willing to participate in the study.
- Antenatal mothers with high risk pregnancy.
Description of the tool
Part-I: Socio demographic variables: It includes age, educational status, no of pregnancy, living child, previous history of abortion, no of abortion, occupational status, type of family, place of residence and source of knowledge.
Part-II: A self-structured knowledge questionnaire to assess the knowledge on danger signs of pregnancy among antenatal mothers.

<table>
<thead>
<tr>
<th>Level of knowledge</th>
<th>Score</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inadequate knowledge</td>
<td>0-18</td>
<td>&lt;50%</td>
</tr>
<tr>
<td>Average knowledge</td>
<td>19-25</td>
<td>51-70%</td>
</tr>
<tr>
<td>Adequate knowledge</td>
<td>26-37</td>
<td>&gt;70%</td>
</tr>
</tbody>
</table>

Table 1: Score interpretation

<table>
<thead>
<tr>
<th>Level of knowledge</th>
<th>Frequency (F)</th>
<th>Percentage (P)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inadequate knowledge</td>
<td>46</td>
<td>76.6</td>
</tr>
<tr>
<td>Average knowledge</td>
<td>10</td>
<td>16.66</td>
</tr>
<tr>
<td>Adequate knowledge</td>
<td>4</td>
<td>6.66</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 2: Frequency distribution of level of knowledge regarding danger signs of pregnancy. (N=60)

Data Analysis and discussion
Fig 1: Percentage distribution of level of knowledge of antenatal mothers

Tab 3: Mean and standard deviation of knowledge score among antenatal mothers (N=100)

<table>
<thead>
<tr>
<th>Level of knowledge</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antenatal mothers</td>
<td>12.7</td>
<td>5.8</td>
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</table>

Major findings of the study
- Regarding level of knowledge among 60 antenatal mothers, 46(76.6%) had inadequate knowledge, 10(16.6%) had average knowledge, and 4(6.66%) had adequate knowledge regarding danger signs of pregnancy.
- The mean knowledge score of antenatal mothers was 12.7 and standard deviation was 5.8.
- Regarding association, age, no. of pregnancy, type of family and source of knowledge had significant association with level of knowledge at $P<0.05$ level.

Conclusion
The study concluded that majority of antenatal mothers, 46(76.6%) had inadequate knowledge regarding danger signs of pregnancy.

References