

Knowledge on Warning Symptoms of High Risk Pregnancy as Perceived by the Antenatal Mothers in a Selected Tertiary Hospital, Kelambakkam, Kanchipuram District, Tamil Nadu

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Abstract

Knowledge on warning symptoms of high risk pregnancy as perceived by the antenatal mothers in a selected tertiary hospital, Kelambakkam, Kanchipuram District, Tamil Nadu, India". The objectives were to assess the knowledge on warning symptoms of high risk pregnancy perceived by the antenatal mothers to find out the association between the level of knowledge with demographic variables. The convenience sampling was used to select 60 Antenatal mothers. The data collection tools were validated and reliability was established. The data were collected by self-administered questionnaire. The collected data was Tabulated and Analyzed. Descriptive and Inferential statistical method were used. The study shows that 30% of the antenatal mothers had low level of knowledge, 57% of the antenatal mothers had moderate knowledge and 13% of the antenatal mothers had adequate knowledge regarding knowledge on warning symptoms of high risk pregnancy there was significant association between the knowledge and the selected demographic variables.

Keywords: Knowledge, warning symptoms, High risk pregnancy Antenatal mothers.

Introduction

"Birthing is the most profound initiation to spirituality a woman can have"
—Robinlim

Pregnancy is a beautiful phase because it gives you the joy and fulfillment which comes from bringing a new life into the world. Pregnancy is not just a physical metamorphosis of the female body; it is also an emotional change that lives lasting impact on your life and alters your perspective entirely.

The pregnancy is defined as gestation, is the time during which one or more offspring develops inside a woman.[First cry parenting (2019)]¹ In our study we showed among five particular conditions of high risk pregnancy such as **Anemia, pregnancy induced hypertension, placenta previa, gestational diabetes mellitus, polyhydramnios.**

High-risk pregnancy defined as one where pregnancy is complicated by factor or factors that adversely affect

the outcome maternal or perinatal or both [Hiralalkonar (2016)].³

The term high risk "high risk pregnancy" suggests that in order to have a healthy and successful pregnancy and delivery, extra care is needed. This is often the case if antenatal mother suffer from a chronic illness or have other factors and conditions that may put antenatal mothers in the high risk category.

It is possible to begin a normal pregnancy and develop conditions that put antenatal mothers into the high risk category regardless what causes your pregnancy to become high risk, it was likely problems may persists with both mother and or the baby during the pregnancy, birth process, or even after the delivery.

The problems can be minor or life threatening in severity for both the mother and the baby, requiring extra care and monitoring from your doctor. [Eunice kennedyshirver National Institute of child Health and Human Development]¹⁰

Need for the Study

WORLDWIDE:

Hypertensive disorders in pregnancy (HDP) are the most common medical disorders in pregnancy and the greatest single cause of maternal mortality worldwide. Most of the complications caused by HDP may be reduced by early detection and proper management. Health education during antenatal care attendance may play an important role in preventing the disease to aggravate. The purpose of this study was to investigate the status of knowledge that Moroccan pregnant women both in Morocco and in Netherlands since yearly dedication provides the opportunity for follow up management and/or treatment. May reduced complications of HDP therefore, it is important to inform pregnant women about the signs and symptoms of HDP. [Ouasmani, Engelities B, Haddou Rahou (2017)]¹.

Pre-exposure prophylaxis (prep) is a well-established bio medical HIV prevention strategy and recommended to reduce HIV risk during per-conception, pregnancy and breastfeeding. Efforts are needed to translate global recommendation into national guidelines and implementation strategies. This article presents the current status of the policy guidance for the use of Pre during per-conception, pregnancy and breastfeeding, with a particular focus on high prevalence countries, including those in sub-Saharan Africa. [Davies N, Heffron R (2018)]²

INDIA:

In India 75% of maternal death occurred due to complication of pregnancy and 25% of maternal mortality is due to indirect obstetric causes and social factors. Early identification of these patients, followed by proper management and therapy can frequently modify or prevent a poor perinatal

STATE:

A total of 100 pregnant women attending antenatal clinics were interviewed, of whom 59 were from urban Chennai and the rest from Kanchipuram District. The risk factors of GDM, 48.8% rural women were unaware of any risk factor while 55.9% of urban women reported family history diabetes as a risk factor. 49.2% of urban high risk mothers had

75.6% of rural mothers in high risk did not know long term consequences of GDM to babies born to GDM women. 50.8% said GDM women said GDM could lead to type 2 diabetes mellitus in future while only 45% of rural women were aware of this [R Kumari(2017)]³

District: A study conducted on anemia among pregnant women in rural area of Kanchipuram District. About 48.5% of pregnant women were in the age group of 15 to 4 years. In the study 41.5% were found to be anemic. About 38.1% of the study participants were found to have mild anemia, while 1.9% had moderate anemia and 1.5% had severe anemia. [Abiselvi A, Gopalakrishnan S, Umadevi R, (2017)]⁴

Govt scheme identifies 550,000 high risk pregnancies in 18 months: over 5.5 lakh women were found to have high risk pregnancies during screening under Pradhan Mantri Surakshit Matritva Yojana (PMSMA) since its launch in 2016, aims to ensure comprehensive and quality antenatal checkups for pregnant women across India. (2018)

Prevalence of high risk pregnancy observed was 33.64% caesarean section and birth weight less than 2500 gm. that were significantly associated with high risk pregnancy mothers height less or equal to 140 cm pregnancy outcome low birth weight was significantly associated with oligohydramnios and history of caesarean [Ashok R, Jatho, Mahendra D. Gawade, Suresh N. Ughade]⁵

Statement of the Problem: Knowledge on warning symptoms of High risk pregnancy as perceived by the Antenatal mothers attending antenatal out patient department in selected tertiary hospital, Kancheepuram District, Tamil Nadu, India.

Objectives:

- Assess the knowledge on warning symptoms of high risk pregnancy as perceived by antenatal mothers
- Associate the level of knowledge with selected demographic variable among antenatal mothers.

Sampling Technique: Sampling process of selecting a representative part of the Population. Thus, carefully carried out sampling technique helps to draw a sample represents the characteristics of the population and which the sample is drawn.

Convenience sampling technique was used by the researcher to select the sample.

Sampling Criteria:

Inclusion Criteria: Inclusion Criteria are characteristics that the subjects must have if they want to be included in the study. The inclusion criteria were :

- Antenatal mothers who are willing to participate in the study.
- Antenatal mothers who can understand Tamil & English language

Exclusion Criteria: Exclusion criteria make up the eligibility criteria used to rule out the target population for a research study. The exclusion criteria was:

- Antenatal mothers those already aware of the warning symptoms

Research Approach: A research approach is a framework or guide used for the Planning, Implementation and analysis of the study.

Quantitative approach was used for the study by the researcher.

Research Design: The research design is the master plan specifying the method and procedures for collecting and analyzing the needed information in a research study

Quantitative approach was used for the study by the researcher

Research Setting: A research setting is a physical, social and cultural site in which the researcher conducts the study.

The study was conducted at attending antenatal outpatient department in selected tertiary hospital, at Kanchipuram District, Tamil Nadu

Population: Population is the aggregation of all units in which a researcher is interested in other words, Population is a set of people or entities to which the results of a research are to be generalized.

All the Antenatal mothers attending out patient department in selected tertiary hospital, were the study population taken by the researcher.

Sample: Sample is a representative unit of a target population, which is to be worked upon by the researchers during their study. In other words sample consists of subsets of units which comprise the population selected by the researcher to participate in the research project.

All the Normal antenatal mothers were the study sample

Sample Size Estimation:

$$\text{Sample size } n = \frac{[DEFF * Np(1-p)]}{[(d_z / z_{21-.j/2}) * (N-1) + p * (1-p)]}$$

The sample size is=60

Data Collection Tool: A self-administered questionnaire was used as a tool for data collection by the researcher. It consists of following parts.

Part A: It consists of demographic variables like age of the antenatal mother, education and occupation.

Part B: It consists of 15 questions regarding the knowledge on High risk pregnancy.

Scoring and Interpretation:

Total number of knowledge question-15

Each correct answer will be given one mark.

Score	Level of knowledge
Below 50%	Low level of knowledge
51-74%	Moderate level of knowledge
Above 75%	High Level of knowledge

Data Collection Procedure: The researcher got prior permission and consent from the sample. After getting the permission, a self administered questionnaire was given to them. They read the questions carefully and answered. Duration of data collection was one week.

Plan for Data Analysis: The plan for data analysis includes Descriptive and Inferential statistics.

Table 1: Distribution of the Demography Variables of Antenatal mothers

Demographic Variables	Level of Knowledge				Chi Square (x ²) P Value<0.05
	Low Level of Knowledge	Moderate Level of Knowledge	High Level of Knowledge	Total	
Age in Year					(x ²)=1.331 df=4 P<0.05 *S
<16 Years	0	1	0	1	
16-35 Years	18	31	8	57	
>35 Years	1	1	0	2	
Educational Level					(x ²)=2.060 df=4 P<0.05 *S
No formal education	0	0	0	0	
Primary school	3	5	0	8	
Higher secondary school	4	5	1	10	
Graduation	12	23	7	42	
Occupation					(x ²)=1.810 df=2 P<0.05 *S
Employed	3	6	3	12	
Unemployed	16	27	5	48	
Parity					(x ²)=1.048 df=2 P<0.05 *S
0	19	19	3	32	
1-4	9	14	5	28	
>5	0	0	0		
Gestational Age (Weeks)					(x ²)=5.235 df=4 P<0.05 *S
1-12 Weeks	8	9	1	18	
13-26 weeks	7	9	2	18	
27-end of delivery	4	15	5	24	
Past Medical History					(x ²)=1.474 df=4 P<0.05 *S
Yes	3	8	2	13	
No	15	26	6	47	
Past Complicated Obstetrical History					(x ²)=5.130 df=4 P<0.05 *S
Yes	3	11	0	14	
No	16	22	8	46	

*NS- No Significant *S- Significant

Table 1 Shows that there is significant association between the selected demographic variables and knowledge.

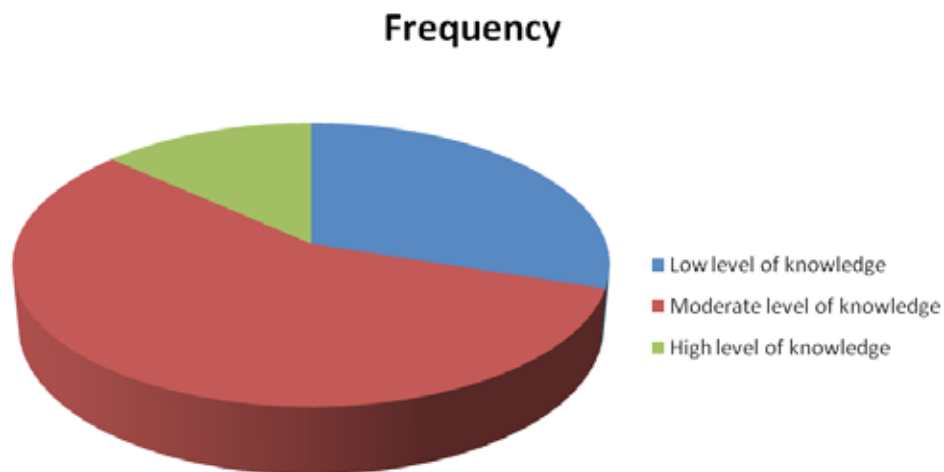


Fig. 1: Shows that 18 of the mothers had low level of knowledge among 30 mothers 34 of them had moderate level of knowledge and 8 mothers had high level of knowledge

Results and Discussion

The collected study was tabulated and analyzed. In the population majority 57% (34) of antenatal mother having moderate knowledge, 30% (18) having low level of knowledge, 13% (8) having high level of knowledge regarding knowledge on warning symptoms of high risk pregnancy among antenatal mothers.

Findings: Findings of the study were presented under the following headings based on the study objectives.

Objective 1: Assess the level of knowledge on warning symptoms of high risk pregnancy among antenatal mothers.

The finding of the present study reveals that:

- 18 (30%) of the Mothers had low level of Knowledge
- 34 (57%) of the Mothers had moderate level of Knowledge
- 8 (13%) of the Mothers had High level of knowledge.

Objective 2: Associate demographic variables and the level of knowledge on warning symptoms of high risk pregnancy among antenatal mothers .

Finding 1: Associate between Age and the level of knowledge of warning symptoms of high risk pregnancy among antenatal mothers .

There was no significant association between the age and the level of knowledge of warning symptoms of high risk pregnancy among antenatal mothers .

Chi square (χ^2) = 1.81 (p<0.05).

Finding 2: Associate between qualification and the level of knowledge of warning symptoms of high risk pregnancy among antenatal mothers .

There was no significant association between qualification and the level of knowledge of warning symptoms of high risk pregnancy among antenatal mothers .

Chi square (χ^2) = 4.35(p<0.05).

Finding 3: Associate between occupation of the mothers and the level of knowledge of warning symptoms of high risk pregnancy among antenatal mothers .

There was no significant association between the occupation of the mother and the level of knowledge of warning symptoms of high risk pregnancy among antenatal mothers .

Chi square (χ^2) = 0.71(p<0.05)

Conclusion

This study shows that antenatal have less knowledge regarding warning symptoms of high risk pregnancy. This study will serve as a basis to develop educational program us to promote knowledge towards warning symptoms of high risk pregnancy perceived by antenatal mothers.

Conflict of Interest: Nil

Source of Funding: No source of Funding

Ethical Clearance: Obtained

Reference

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