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Knowledge regarding danger signs of pregnancy among antenatal mothers

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Abstract

Pregnancy is the most beautiful phase in a women's life. It brings about emotional and physiological changes as well as poses extra demands on the body. Sometimes, a pregnant woman may experience some signs and symptoms which signal danger. The danger signs in pregnancy include vaginal spotting or bleeding at any time, leaking of fluid from the vagina, unusual abdominal pain, cramping, pelvic pressure, or persistent backache, persistent nausea and vomiting, especially in the second and third trimester. The other danger signs in pregnancy are persistent headache or blurred vision, marked swelling of the ankles and especially of hands and face, painful or burning urination, foul-smelling vaginal discharge, chills or fever, feeling very tired, and decreased fetal movements in the third trimester. A descriptive study of 50 antenatal mothers attending outpatient department was performed. Interviews were conducted at Arpana hospital, Karnal, using a structured knowledge questionnaire. Findings of the study revealed that across the samples, majority of the antenatal mothers belong to 22-25 years 27 (54%), Hindu religion 38 (76%), rural community 27(54%). Majority of antenatal mothers had graduation and above level of education 21(42%) and 42(80%) were housewife. The result showed 58% of the antenatal mothers had good level of knowledge regarding danger signs of pregnancy followed by 30% of the antenatal mothers had average level of knowledge and only 12% had very good level of knowledge regarding danger signs of pregnancy.

Keywords: Knowledge, danger signs, antenatal mothers

Introduction

When a woman becomes pregnant, she is very aware that a new life is growing within her for the next nine months. It is the period during which a woman carries a developing fetus, normally in the uterus. A pregnant woman may experience some signs and symptoms which signal danger. Danger signs in pregnancy are those signs that a pregnant woman will see or those symptoms that she will feel which indicate that something is going wrong with her or the pregnancy^[3].

The danger signs in pregnancy include vaginal spotting or bleeding at any time, leaking of fluid from the vagina, unusual abdominal pain, cramping, pelvic pressure, or persistent backache, persistent nausea and vomiting, especially in the second and third trimester. The other danger signs in pregnancy are persistent headache or blurred vision, marked swelling of the ankles and especially of hands and face, painful or burning urination, foul-smelling vaginal discharge, chills or fever, feeling very tired, and decreased fetal movements in the third trimester. The occurrence of any danger sign in pregnancy is a signal that something is wrong with the pregnant woman or the pregnancy itself. If this happens, the pregnant woman needs urgent medical care and advice. Knowledge of danger signs in pregnancy by pregnant women and their communities is the essential first step in accepting appropriate and timely referral to obstetric and newborn care. According to World Health Organization (WHO), every day about 830 women died due to complication of pregnancy and child birth. Almost all of these death occurred in low resources setting, and most could have been prevented.

The number of woman dying due to complications during pregnancy and childbirth has decreased by 44% from an estimated 532000 in 1990 to 303000 in 2015. According to UNICEF, every year about 78,000 mothers die in child birth and from pregnancy related complications in India. High levels of maternal mortality can be reduced by empowering women with knowledge on danger signs of pregnancy and promote appropriate health seeking attitude. Counseling on the danger signs of unpredictable obstetric complications and the appropriate management of such complications are crucial in reducing maternal mortality. Efforts should be done to increase awareness of danger signs and prevent severity of obstetric complications.

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Material and Methods

A non-experimental research approach with descriptive design was used and 50 antenatal mothers were selected by the purposive sampling technique from outpatient department of hospital. A structured knowledge questionnaire was prepared for assessing knowledge regarding danger signs of pregnancy among antenatal mothers. Structured knowledge questionnaire consist of 24 items regarding danger signs 5 related to risk factors for danger signs, 9 related to causes of danger signs, 1 related to symptoms, 3 related to treatment, 2 related to prevention, 4 related to complications of danger signs of pregnancy.

Data Collection Procedure

Antenatal mothers attending outpatient department were selected by Purposive Sampling technique in Arpana Hospital, District Karnal. Data were collected from 10th march to 16th march 2016. It took 30 minutes and 7 samples were interviewed in a day. The structured knowledge questionnaire was administered to assess antenatal mother’s knowledge regarding danger signs of pregnancy.

Results and Discussion

The result of current study showed that antenatal mothers have good knowledge regarding danger signs of pregnancy. Similarly the findings of current study was consistent with the study conducted by Philomena Fernandes in 2014 to assess the knowledge of antenatal mothers regarding warning signs in pregnancy with a view to develop an information booklet. They had found that the majority (45%) of women had good knowledge regarding warning signs of pregnancy. There was significant association between knowledge of antenatal women and selected demographic variables like women’s age, education and

monthly income of family. The findings of the study showed that the knowledge of antenatal women regarding selected Warning signs of pregnancy was good. The result of current study shown that there there is no significant association of knowledge score regarding danger signs of pregnancy with selected sample characteristics. Similarly a study conducted by Gomathi Mahalingam, Mahalingam Venkatesan shows that the knowledge of antenatal mothers about warning signs of pregnancy, labour and puerperium. is statistically, not associated with their age, educational qualification, parity, occupation, family income, type of family, religion, residential area and previous source of information.

Tables and Figures

Out of 50 antenatal mothers majority of antenatal mothers (54%) were in the age group (22-25 years). Most of antenatal mothers (42%) had graduation and above level of education. Majority of antenatal mothers (80%) were housewife. Maximum number of antenatal mothers (76%) belonged to Hindu religion. Majority of antenatal mothers (54%) belonged to rural community.

Table 1: Mean, Median, Mean Percentage, Range and Standard Deviation of Knowledge Scores regarding danger signs of pregnancy among antenatal mothers, N=50

	Mean	Median	Mean %	Range	S.D
Knowledge score	11.76	12	49.00	16	4.08

Maximum score= 24 Minimum score = 0

The data presented in table 1 depicts that the range of knowledge of the antenatal mothers was 16 and mean knowledge of antenatal mothers 11.76 ±4.08, median was 12 and mean percentage of knowledge score was 49%.

Table 2: Area wise Mean, Mean Percentage of Knowledge Scores regarding danger signs of pregnancy among antenatal mothers, N=50

Area of Knowledge	Maximum Score	Mean Scores Obtained	Mean Percentage	Rank
Risk factors for danger signs	5	1.7	34%	6 th
Causes of danger signs	9	4.98	55.33%	2 nd
Symptoms	1	0.56	56%	1 st
Treatment	3	1.52	50.67%	4 th
Prevention	2	0.92	46%	5 th
Complications	4	2.08	52%	3 rd

The data presented in Table 2 reveals that maximum mean percentage score 56% was obtained in the area of symptoms of danger signs of pregnancy and the minimum mean

percentage score 34% was obtained in the area of risk factors for danger signs of pregnancy.

Table 3: Frequency and Percentage Distribution of knowledge Scores regarding danger signs of pregnancy among antenatal mothers, N=50

Level of Knowledge	Knowledge Score	Range of Score	f (%)
Very Good	> 66.67%	17-24	12%
Good	33.34-66.66%	9-16	58%
Average	<33.33%	0-8	30%

Maximum score= 24 Minimum score = 0

The data presented in the table 3 reveals that 58% of the antenatal mothers had good level of knowledge regarding danger signs of pregnancy followed by 30% of the antenatal

mother had average level of knowledge and only 12% had very good level of knowledge regarding danger signs of pregnancy.

Table 4: Frequency, Percentage and Chi -square Value of Knowledge Scores regarding danger signs of pregnancy among antenatal mothers, N=50

Sample characteristics data	Association with knowledge score				
	Chi Test	P Value	Df	Table Value	Result
Age in years	6.323	0.388	6	12.59	NS

Education status of mother	9.027	0.34	8	15.51	NS
Occupation of mother	6.361	0.384	6	12.59	NS
Religion	2.696	0.61	4	9.488	NS
Area of residence	6.327	0.176	4	9.488	NS

It showed that the obtained chi test values of sample characteristics of age in years, education of mother, occupation of mother, religion, area of residence are 6.323, 9.027, 6.361, 2,696, and 6.327.

Conclusion

On the basis of above reported findings of the study, the conclusion can be drawn that the antenatal mothers have good knowledge regarding danger signs of pregnancy but still have deficits of knowledge in some areas of danger signs of pregnancy. So the information booklet was used to elevating the knowledge regarding danger signs of pregnancy among antenatal mothers.

References

- George Sithara. A study to assess the knowledge of antenatal women regarding danger signs during pregnancy in selected maternity hospital at Bangalore with a view to develop an information booklet. MSc. Nursing [obstetrics and gynaecological nursing]. faran College of nursing. Bangalore, 2011. Available From:- http://www.rguhs.ac.in/cdc/onlinecdc/uploads\05_Noo8_29816.DOC
- Stephanie Obrowski, Michael Obrowski, Starski Karolina. Normal Pregnancy: A clinical review. Academic Journal of Paediatrics and Neonatology. 2016; 1(1):1-2. Available from:- <http://www.juniperpublisher.com/ajpn/pdf/AJPN.MS.ID.555554.pdf>
- Nambala BS, Nagoma C. knowledge and perception of women towards danger signs in pregnancy in Chroma Rural district, Zambia. Medical Journal of Zambia. 2013; 40(2):43-44. Available from:- <http://www.ajol.info/index.php/mjz/article/download/110516/100253>
- Janet, Greenwold Natalie. MAF-Warning signs in pregnancy. Medical Aids Films Ltd, 2011. Available from:- <http://www.healthphone.org/maf/warning-signs-in-pregnancy.pdf>
- Ugbodya Kazeem. 330,000 women die during child birth-/WHO.PM News Nigeria, 2016, 15, 2:20pm. Available from:- <http://www.pmnewsnigeria.com/2016/01/15/330000-women-die-during-child-birth-who/>
- http://en.wikipedia.org/wiki/maternal_death
- Who, Unicef, Unfpa, The World Bank, and United Nation Population Division. Trends in maternal mortality: 1990 to 2015. Geneva, World Health Organisation, 2015. Available from:- <http://data.worldbank.org/indicator/SH.STA.MMRT>
- Birhanu Zelalem, Andargae Gashaw, Negesse Digsu, Awoke Tadesse, Assefa Gizachew. Determinants of skilled birth attendance for delivery in Northwest Ethiopia-A community based nested case control study. BMC Public Health, 2013. Available from:- <http://bmcpublihealth.biomedcentral.com/articles/10.1186/1471-2458-13-130>
- Unicef. Maternal Mortality fell by almost half between 1990 and, 2015. Available from:- <http://data.unicef.org/maternal-health/maternal-mortality.html#sthash.SxNfpqbB.dpuf>
- <http://unicef.in/Whatwedo/1/Maternal-Health.#sthash.7PFsehDH.dpuf>
- Government of India. Ministry of Health & Family welfare. Decline in Rates of Maternal and Infant mortality; 2014, 13:49. Available from:- <http://pib.nic.in/newsite/PrintRelease.aspx?relid=103446>
- <http://www.tribuneindia.com/news/15403-maternal-mortality-rate-drops-52-in-karnal.html>
- Requejo Jennifer, Merialdi Mario, Althabe Fernando, Keller Matthis, Katz Joanne, Menon Ramkumar. Born too soon: Care during pregnancy and childbirth to reduce preterm deliveries and improve health outcomes of the preterm baby.BMC Pregnancy and childbirth. Reprod Health. 2013; 10(1):S4. Available From:- www.ncbi.nlm.nih.gov/pmc/articles/PMC3842748/
- Demissie Eskedar, Dessie Fantahun, Michael Fikadu W, Kahsay Tensay, Tadele Niguse. Level of Awareness on Danger Signs of Pregnancy among Pregnant Women Attending Antenatal Care in Mizan Aman General Hospital, Southwest, Ethiopia: Institution Based Cross-sectional Study. Women's Health Care. 2015; 4(8). Available From:- <http://www.omicsgroup.org/journals/level-of-awareness-on-danger-signs-of-pregnancy-among-pregnant-women-attending-antenatal-care-in-mizan-aman-general-hospital-south-2167-0420-1000288.pdf>
- Park K. Textbook of Preventive and Social Medicine. 18th edition. Jabalpur: Banarsidas Bhanot Publications, 2005, 412-14.
- World Health Organization. Maternal Mortality, 2015. Available from:- <http://www.who.int/mediacentre/factsheets/fs348/en/>
- Sangal Renu, Srivastava Reena, Singh Arvind K, Srivastav DK, Meera, Khan Huma. Knowledge and practices regarding obstetric Danger Sings in women attending antenatal care clinic at BRD Medical College, Gorakhpur. India J Prev. Soc. Med. 2012; 43(1). Available from:- <http://medind.nic.in/ibl/t12/ibl12iP//.pdf>
- Mwilike, Beatrice. Knowledge of danger signs during pregnancy and subsequent health seeking actions among women in Kinondoni Municipality, Tanzania. M.Sc. [Midwifery and women's Health]. Makerere University, 2013. Available from:- <http://makie.mak.ac.ug/bitstream/handle/10570/2847/mwilike-chs-masters-abstract.pdf?Sequence=3>
- World Health Organisation. Maternal Mortality, 2015. Available From:- <http://who.int/mediacentre/factsheets/fs348/en/>
- Deepa R, Hemavathy V. Effectiveness of danger signs of pregnancy among primigravida women. International Journal of Innovative Research in Science, Engeneering and Technology. 2015; 4(5). Available from:- http://www.ijirset.com/upload/2015/may/23_20.pdf