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Effectiveness of Nursing Care on Mothers With Bad Obstetrical History.

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ABSTRACT

The study was conducted to evaluate the effectiveness of nursing care on mothers with Bad Obstetrical History. The mother's needs and problems was assessed and nursing care given.
Keywords: Effectiveness, Bad obstetrical History (BOH), Mothers, nursing care

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INTRODUCTION

Bad obstetrical history (BOH) is an occasional cause of sporadic spontaneous abortion and consistent with statistical probability - Coulam C.B. (2004). In many countries pregnancy are not properly planned, complications are more which unfavour mother's and infant's health condition. BOH implies previous unfavorable fetal outcome in terms of two or more consecutive spontaneous abortions, early neonatal deaths, stillbirth, intrauterine fetal death, intrauterine growth retardation and congential anomalies.-Dutta D.C (2004). Acquired and inherited thrombophilias are known to be associated with unfavorable pregnancy outcome and recurrent fetal loss-Ghosh K, (2008). Obesity is known to be associated with increased of preterm birth, still birth and neonatal death- Smith GCS,(2007). APLA syndrome refers to a varied group of auto antibodies including lupus anticoagulants and anticardiolipin antibodies. The are frequently associated with a history of repetitive fetal death. APLA syndrome generally requires daily dose of aspirin and heparin during pregnancy-Spegiorin (2007)
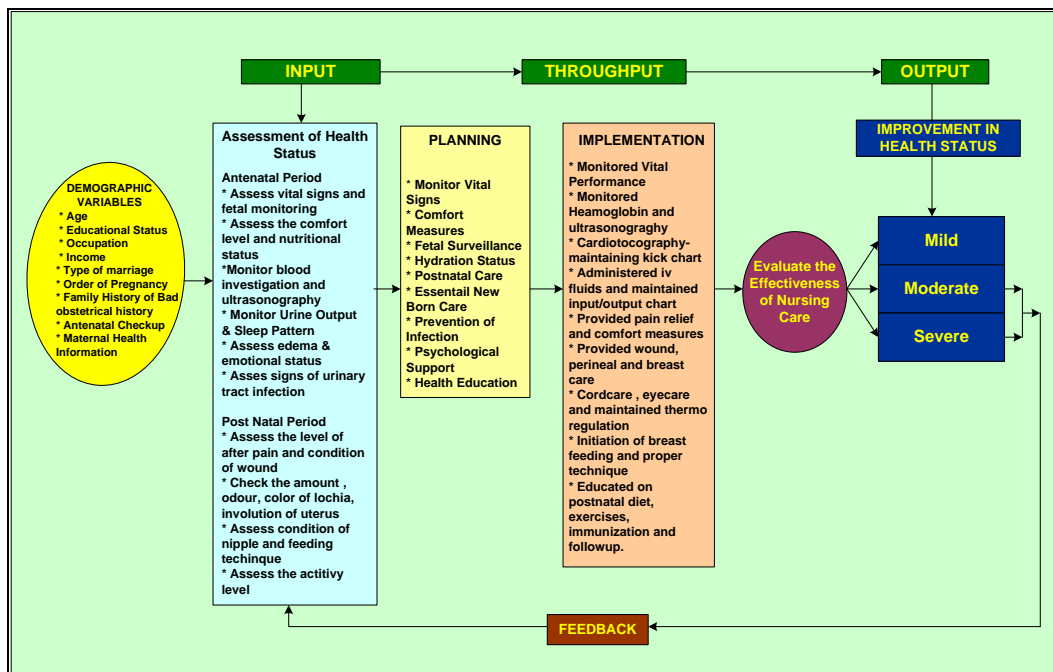
MATERIALS AND METHODS

The population of the study comprised of 30 antenatal and immediate postnatal mothers with bad obstetrical history admitted in maternity ward. Evaluative Research design and simple random technique was adopted for this study. Needs and problems was assessed and nursing care was given.

According to Modified General System Theory by Ludwig Von Bertalanffy, a system is a group of elements that interacts with one another in order to achieve the goal.

Input: Refers to the demographic variables and assessment of health status during the antenatal and postnatal period.
Throughput: it is the action to be performed such as planning and implementation
Output: Refers to the evaluating the effectiveness of nursing care on improvement of the mothers health status.

Modified general system theory by Ludwig VonBertalanffy(1968)

Description of the tool:

It consists of 4 parts

Part I: Demographic data

Part II: Observational check list to assess the general health status of both mother and baby

Part III: Rating scale to identify the improvement in the health status of mother with bad obstetrical history.

Part IV: Observation check list of nursing intervention for the mothers with bad obstetrical history

Score interpretation:

The obtained data were interpreted by the following procedure.

Score   Interpretation =Obtained score / Total Score × 100

Mild health deterioration - 0-50, Moderate health deterioration-51-74, Severe health deterioration->75

Statistical Method:

S.NO.	Data Analysis	Methods	Remarks
1.	Descriptive statistics	Number, percentage, mean, standard deviation	To describe the demographic variables
2.	Inferential statistics	Paired 't' test	To assess the effectiveness of nursing care on mothers with bad obstetrical history.
		Correlation test	To find out the correlation between demographic variables and effectiveness of nursing care on mothers with bad obstetrical history.

RESULTS AND DISCUSSION

The study was conducted to determine the effectiveness of nursing care on mothers with bad obstetrical history. The study findings have been discussed in terms of the objectives of theoretical basis and hypothesis. A total number of 30 mothers were selected. The health condition of each mother was assessed every day. Based on the assessment the nursing care was planned and implemented for the mother with bad obstetrical history.

Table 1: Frequency and percentage distribution of demographic variables of mothers with bad obstetrical history

S.no	Demographic variables	Frequency	Percentage
1.	Age		
	a. 18-21 yrs	3	10
	b. 22-25 yrs	7	23.3
	c. 26-29 yrs	9	30
	d. Above 29 yrs	11	36.7
2.	Religion		
	a. Hindu	15	50
	b. Christian	5	16.7
	c. Muslim	10	33.3
	d. others	0	0
3.	Educational status		
	a. illiterate	10	33.3
	b. primary level	8	26.7
	c. high school level	5	16.7
	d. graduate	7	23.3
4.	Occupation		
	a. private	3	10
	b. government	7	23.3

	c. coolie	8	26.7
	d. homemaker	12	40
5.	Family monthly income		
	a. below Rs. 1000	6	20
	b. Rs. 1001- Rs 3000	10	33.3
	c. Rs. 3001- Rs. 5000	9	30
	d. Above 5000	5	16.7
6.	Type of marriage		
	a. Consanguineous	13	43.3
	b. Non Consanguineous	17	56.6
7.	Order of pregnancy		
	a. Second	4	13.3
	b. Third	8	26.7
	c. Fourth	8	26.7
	d. Above four	10	33.3
8.	Family history of bad obstetrical history		
	a. Yes	12	40
	b. no	18	60
9.	Practice of antenatal check up		
	a. regular	7	23.3
	b. once in a month	8	26.7
	c. occasionally	11	36.6
	d. whenever there is a problem	4	13.3
10.	Maternal health problem		
	a. mass media	3	10
	b. family, relatives	6	20
	c. health personnel	21	70

Table2: Mean and Standard deviation of Assessment and Evaluation Scores of mothers with bad obstetrical History N=30

Health Status	Antenatal			Postnatal		
	Mean	Std Deviation	Confidence Interval	Mean	Std Deviation	Confidence Interval
Assessment	33.2	5.49	34.5 – 30.36	34.96	4.76	37.32 – 28.49
Evaluation	20.83	3.51	15.18 – 12.26	19.66	3.55	13.99 – 11.16

Table 2 reveals that mean and standard deviation of the effectiveness of nursing care among 30 mothers with bad obstetrical history. The overall mean for pre assessment score was 32.2 with the standard deviation of 5.49. The overall mean for post assessment score was 20.83 with standard deviation 0f 3.51 during the antenatal period

It also revealsoverall mean for pre assessment score was 34.96 with the standard deviation of 4.76. The overall mean for post assessment score was 19.66 with standard deviation 0f 3.55 during the postnatal period.

Table 3: Improvement Score Mean and Standard deviation of Assessment and Evaluation Scores of Nursing care mothers with bad obstetrical history. N=30

Health Status	Antenatal			Postnatal		
	Mean	Std Deviation	Paired t test	Mean	Std Deviation	Paired t test
Improvement	12.4	1.92	10.88	15.3	1.21	14.73

Table3 depicts that improvement of assessments and evaluated score and effectiveness of nursing care among mothers with bad obstetrical history. The paired 't' test value was 10.88 during the antenatal period and 14.73 during the postnatal period. The calculated value is greater than the tabulated value at the P value less than 0.01 significance. So there was a great significance between the assessment and evaluative score during the antenatal and postnatal period.

CONCLUSION

It was found that there is a positive relation between the effectiveness of nursing care among 30 mothers of bad obstetrical history. The Present study can help nurses to enrich the knowledge to plan and provide appropriate nursing care to mothersfot good fetal outcome.

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