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A DESCRIPTIVE STUDY TO ASSESS THE KNOWLEDGE REGARDING PREGNANCY INDUCED HYPERTENSION AMONG STAFF NURSES WORKING IN A GOVERNMENT HOSPITAL JAMMU, (J&K)

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Abstract: Pregnancy can be the most beautiful experience by a reproductive married female as it is the creation of a new life. In all cultures, being pregnant or to give birth to a child is considered as a vital and divine event. Pregnancy experiences are different for different females. Some females carries pregnancy without any ailments or disorders and some females experiences many problems during pregnancy. Pregnancy induced hypertension is one of the common problems faced by pregnant females after 20 weeks of gestation. Pregnancy induced hypertension is the development of new hypertension in a pregnant women after 20 weeks gestation without the presence of protein in the urine or other signs of pre-eclampsia. (WHO) The most significant risk factors for pregnancy induced hypertension are previous history of pre eclampsia, multiple gestation, history of chronic high blood pressure, diabetes, kidney disease or organ transplants. Pregnancy induced hypertension is generally a silent condition. It is associated with significant maternal and fetal morbidity and mortality. World-wide treatment of this disorder remains a challenge. Present study conducted to assess the knowledge regarding pregnancy induced hypertension (PIH) among 100 staff nurses in Government SMGS hospital of Jammu (J&K). Sociodemographic profile and a self-structured questionnaire was used to collect data from 100 staff nurses. The study revealed that majority of the staff nurses 64 (64%) had adequate knowledge followed by 36 (36%) had moderately adequate knowledge and none of them had inadequate knowledge regarding pregnancy induced hypertension.

Keywords: Pregnancy, Hypertension, Pre-eclampsia, Mortality and Morbidity

1. Introduction

Pregnancy is one of the wonderful and noble service by nature. It's a kind of miracle particularly so that a man and women can plan to create a new soul but it is related with certain risks to the mother and for the baby she bears. These risks are ordinary in every people and every setting, but in developing countries these risks have been largely prevail over because every pregnant women has no access to special care. Pregnancy induced hypertension is one of the common risk to pregnant females.¹

Hypertensive disorders of pregnancy are leading cause of maternal and infant mortality and morbidity. It has been estimated that World-wide approximately 50,000 women die every year from eclampsia. Hypertensive disorders of pregnancy affects 5-10% of all pregnancies. Hypertension has been declared as chronic diseases which require urgent medical attention.²

According to World Health Organization estimates about 510,000 maternal deaths occurred globally during the year 2002. The statistical data on causes of maternal deaths worldwide as per the world health report revealed 12% of maternal deaths are due to hypertensive disorders of pregnancy.³

In India, the maternal mortality rate as per the annual report (2002) is 407 per 10,0000 live births, in Karnataka it is 195 per 100,000 live births. The maternal mortality rate in India due to direct obstetric causes is 70% of which pregnancy induced hypertension (PIH) is one among them.⁴

In developing countries the great majority of deaths are due to hypertensive disorders and higher when antenatal coverage is lower. This is taken as evidence of higher probability of progression from pre-eclampsia in the absence of antenatal care.⁵

Pregnancy induced hypertension occurs more frequently in young primi gravid. It is more common in females over 35 years of age and having multiple pregnancy and diabetes. It is also common in females from low socio economic status and not likely to receive adequate antenatal care.⁶

As it is a chronic disease which affects almost every nation. Recent polls have shown that these is increase in the number of cases suffering from pregnancy induced hypertension and also there is increase in death rate.⁷ A study in Banaras University Hospital revealed that every third eclamptic mother dies.⁸

2. Objectives

- 1. To assess the demographic variables.
- 2. To assess the knowledge of staff nurses regarding pregnancy induced hypertension.

3. Materials and methodology

For the present study, **Descriptive research approach** and **Non Experimental research** design was used. The research setting was **Government SMGS Hospital, Jammu**. The sample consisted of 100 staff nurses. Purposive sampling technique was used to select the sample. Prior to the data collection procedure, formal permission was obtained from the Superintendent of the hospital. Sociodemographic profile and self structured questionnaire was used to collect personal information. Socio-demographic profile included items like age (in yrs), education, source of information, residence and type of family. Self structured questionnaire schedule prepared to assess the level of knowledge of staff nurses regarding pregnancy induced hypertension. The review of literature, expert's opinions and investigator's own experience provided the basis for construction of tool. Data collection was done from March 10 to March 23, 2018. Prior to interview the questionnaire to the staff nurses, investigator gave self introduction to the subjects and explained the purpose of gathering information. A good rapport was established with the subjects. They were assured that their responses will be used kept confidential and the information will be used only for research purpose. Formal consent was taken from subjects. The data gathered was analyzed and calculated by percentage, mean, standard deviation and chi square.

4. Results

Table 1: Percentage distribution of the sample

Sr. No.	Characteristics	Frequency	Percentage
1.	Age (in yrs)		
	i. 18-24	30	30%
	i. 24-30	42	42%
	i. Above 30	28	28%
2.	Professional Qualification		
	i. G.N.M	73	73%
	i. B.Sc Nursing	27	27%
3.	Sources of knowledge		
	i. Books	29	29%
	i. Internet	41	41%
	i. Health professionals like physicians	30	30%
	Residence		
4.	i. Urban		
	i. Rural	67	67%
5.	Types of Family	33	33%
	i. Nuclear family		
	i. Joint family	63	63%
		37	37%

Table 1 shows the analysis of data that maximum no. of staff nurses 42 (42%) were in the age group of 24-30 yrs having G.N.M as professional qualification using internet as the source of information from urban residence belonging to nuclear families.

n=100

Table 2: Frequency, Percentage, Mean and Standard deviation according to level of knowledge regarding pregnancy induced hypertension among staff nurses.

Sr. No. Knowledge Score Mean S.D. n 1. 17-25 64 64% Adequate 2. 9-16 36 36% Moderately adequate 50 ±19.79 3. Inadequate 1-8

Table 2 showed that the majority 64(64%) of the staff nurses had adequate knowledge, 36(36%) of staff nurses had moderately adequate knowledge and none of them had inadequate knowledge regarding pregnancy induced hypertension

5. Discussion

Objective 1:- To assess the demographic variables

The analysis of data revealed that maximum no. of staff nurses 42 (42%) were in the age group of 24-30 yrs having G.N.M as professional qualification using internet as the source of information from urban residence belonging to nuclear families. These findings are supported by a study conducted for assessment of knowledge of staff nurses regarding management of pregnancy induced hypertension (PIH).⁹

Objective 2:- To assess the knowledge of staff nurses regarding the Pregnancy induced hypertension (PIH)

In the present study, the result of the study showed that majority 64(64%) of the staff nurses had adequate knowledge followed by 36(36%) of staff nurses had moderately adequate knowledge and none of them had inadequate knowledge regarding pregnancy induced hypertension which is consistent with the study conducted to assess level of knowledge of staff nurses on emergency obstetrics management at Orotta national referral maternity hospital which showed that majority of 39(65%) had adequate knowledge level followed by 21(35%) had moderately adequate knowledge and none of them had inadequate knowledge regarding emergency obstetrics management.¹⁰

6. Conclusion:

The main conclusion drawn from the present study is that majority of the staff nurses had adequate knowledge regarding pregnancy induced hypertension but still there is need to attain thorough knowledge and use this knowledge for the prevention and care of pregnancy induced hypertension. Hospital administration should organise training and education programmes for the staff working in maternity hospital.

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