

# Study to Evaluate Perinatal Care Among High-risk Mothers in Selected Hospitals of Belgaum (July 2000)

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## OBJECTIVES:

- \* To evaluate perinatal care among high-risk mothers.
- \* To find an association between selected socio-demographic variables and perinatal care.
- \* To find a relationship between perinatal care received and outcome of pregnancy.

## ASSUMPTIONS:

- \* Quality perinatal care has a positive effect on outcome of pregnancy.
- \* Care given to high-risk mothers is not adequate in prenatal period.
- \* Socio-demographic variables have an effect on the perinatal care received.

## OPERATIONAL DEFINITIONS:

High-risk mother: mother, fetus and newborn at risk.

Following category of high-risk mothers selected:

Anemia

P.I.H.

C.P.D.

L.S.C.S. (Prev.)

A.P.H.

Perinatal period: From 28<sup>th</sup> week or pregnancy to 1<sup>st</sup> week after delivery.

Perinatal care: Care received by high-risk mothers from following categories of health personnel.

Obstetrician

General practitioner

Nurse

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Senior health assistant  
Junior health assistant  
Traditional birth attendant

## METHODOLOGY

Non-experimental descriptive study

100 high risk perinatal mothers selected by purposive random sampling from K.L.E's Hospital and Medical Research Center and District Hospital, Belgaum.

## DATA COLLECTION:

Tool used: Structured interview schedule (S.I.S.) and questionnaire (Q)

Data collected in two phases

**Phase I** – Sociodemographic variables by S.I.S.

**Phase II** - Perinatal care received by Q

**Scoring** – Phase I not scored

Phase II scored

Max. Score 99

Score: 70 and above – adequate perinatal care

70 and below - inadequate perinatal care.

## RESULTS:

High-risk mothers

- 90% had anemia
- 30% had P.I.H.
- 10% had C.P.D.
- 90% had A.P.H.
- 20% had Prev. L.S.C.S.
- 61% had undergone L.S.C.S.
- 71% had received inadequate perinatal care

Neonatal outcome in terms of condition of newborn

- Alive 91%
- F.S.B. 2%
- I.V.D. 7%

Neonatal outcome in terms of type of delivery

- Preterm delivery 14%
- Term delivery 82%
- Post term delivery 4%
- Neonatal admissions in N.I.C.U. 23%
- Neonates kept with mother 68%

71% mothers who did not receive adequate perinatal care even though they attended antenatal

## Association between socio-demographic variables and perinatal care received.

| S.D.V.             | $\chi^2$ Calculated value | df | p value |
|--------------------|---------------------------|----|---------|
| Religion           | 4.712                     | 1  | p<0.05  |
| Education (mother) | 33.97                     | 2  | p<0.001 |
| Education (father) | 8.156                     | 2  | p<0.02  |

## Association between perinatal care and outcome of pregnancy

| Perinatal care | Vaginal delivery | Cesarean section | Total |
|----------------|------------------|------------------|-------|
| Adequate       | 20               | 09               | 29    |
| Inadequate     | 29               | 42               | 71    |
| Total          | 49               | 51               | 100   |

clinic were not informed about simple measures to prevent high risk conditions like:

- Importance of rest and sleep
- Resting mostly in left lateral position
- Early admission for care
- Keeping a check on fetal well being
- Prior arrangement for emergency transportation and finance.
- None were informed that baby would require N.I.C.U. admission.

#### IMPLICATION

**Health education** – by imparting education and counselling high risk mothers on various aspects of perinatal care and waiting signs of complications of pregnancy.

**Nursing education** – Incorporation of health education and client counselling using advanced educational technology in the curriculum.

**Nursing admission** – Formulation of policies and protocols for care givers.

**Nursing research** – It opens a big avenue for research on effect of maternal education for prevention of complications during pregnancy.

#### CONCLUSION

In spite of improved M.M.R. and I.M.R. due to advances in medicine and care, our statistics show high incidence of complication in high-risk mothers.

This could be prevented by providing adequate perinatal care in terms of health education for early detection in preventing complications.

Adequate perinatal care can be provided when the patient visits ANC O.P.D. and/or is admitted in the maternity ward by nursing staff specialized in obstetrics nursing or midwife with the help of health education and counselling seminar by using videos, CDs, questionnaire, informative booklets etc.



#### THOUGHT FOR THE DAY !

"Just because you do not take an interest in politics doesn't mean politics won't take an interest in you."

- Pericles

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