Identify the Level of Risk Pregnancy among Antenatal Mothers at Selected Hospital, Puducherry

Sugandary M and Manju Bala Dash*

Mother Theresa Post Graduate and Research Institute of Health Sciences, Puducherry, India

***Corresponding Author:** Manju Bala Dash, Professor in Nursing, Obstetrics and Gynecology Department, Mother Theresa Post Graduate and Research Institute of Health Sciences, Pondicherry, India.

Abstract

Introduction: High risk pregnancy is one that threatens the health or life of the mother and fetus. High risk pregnancy refers to anything that puts the mother and fetus at increased risk for mortality during pregnancy or childbirth. UNICEF from (1990-2013) has given global maternal mortality ratio declined be 45% from 380 deaths to 210 deaths per 1,00,000 live births. Fetus grow and change dramatically throughout pregnancy. During pregnancy, both the women and her developing child face various health risks. For this reason, it is important that all pregnancies are monitored by skilled care providers.

Objective: To identify the level of high risk pregnancy among antenatal mothers and to find an association between level of high risk pregnancy with demographic variable.

Assumption: It is assumed that antenatal mothers attending antenatal OPD and admitted to antenatal ward at RGGW and CH may have to high risk pregnancy.

Methods: The study was conducted on 124 antenatal mother in selected hospitals at Puducherry. Study design was descriptive, convenient sampling technique was used. The instrument used for data collection was a standardized High risk pregnancy assessment scale. Collected data was analyzed by SPSS package 16.0 version.

Results: The results indicate that 84.67% of antenatal mothers (105) under low risk, 14% of antenatal mothers (17) had High risk pregnancy and 1.16% of antenatal mother (2) having severe risk pregnancy.

Conclusion: The findings of the study showed that among 124 antenatal mothers majority of antenatal mothers had low risk pregnancy.

Keywords: Antenatal Mothers; Pregnancy

Introduction

"Mother's Love for her child is like nothing else in the world. It knows no Law, no pity, it dares all Pregnancy begins when a fertilized egg implants in the uterus. Women may experience a wide range of things, and crushes down remorselessly all that stand in its path"- Agatha Chriscia.

Women go through many changes during each stage of pregnancy. Many of the pregnancy symptoms they have and the changes they deal with are common to all healthy pregnancies. The stages of embryonic and fetal development also follow a common pattern. Still, pregnancy can be confusing and sometimes mysterious! It is normal to wonder what happens during each stage of the pregnancy. Pregnancy lasts about weeks, counting from the first day of the last normal period. Pregnancy lasts before 36 weeks or after 40weeks are considered to be high-risk. However, during pregnancy, both the woman and her developing child face various health risks. For this reason, it is important that all pregnancies should be monitored by skilled care providers [1-4].

Objectives of Study

- To identify the level of high risk pregnancy among antenatal mother.
- To associate the level of high risk pregnancy with the selected demographic and obstetric variables.

Assumption

It is assumed that antenatal mothers attending antenatal OPD and admitted to antenatal ward may have high risk pregnancy.

Methodology

The Study design was non-experimental and descriptive study. Around 124 antenatal mothers were selected by convenient sampling technique from OPD of a selected hospital at Puducherry for this study. The instrument used for data collection was a standardized high risk pregnancy assessment scale. That tool contains 3 areas, such as 1) Reproductive history 2) Medical or surgical condition and 3) Present pregnancy history. These three areas have factors and scores. First area has 13 factors and 20 scores, 17 factors and 24 scores in 2 area and 10 factors and 24 scores in 3rd area. Interpretation of total scores are: 0 - 2 as low risk, 3 - 6 as high risk and 7 or more considered as severe risk category. Inclusion criteria's are all the mother who attend the antenatal OPD at the time of data collection. After obtaining informed consent, data was collected through objective assessment of high risk pregnancy assessment scale. After the data was collected it was planned to analyse with descriptive statistical methods (frequency and percentage) and inferential statistical method (chi-square test) [5,6].

Results and Findings

The Results show that in relation to demographic variables and obstetric variables. i.e. Age of the mother shows majority 122 (98%) were from 19 - 35 years, 72 (58%) were in the Rs.2501 - 5000 income, 66 (53%) were from the high schooling, 75 (61%) were from the rural area, 70 (56%) were in the 3rd trimester and 67 (54%) were the multi gravida. There is no association, it may most of the mother came from the 19 - 35 years, 3rd trimester and multigravida.

The table 1 indicates that among 124 antenatal mothers 105 (84.67%), 17 (14%) and 2 (1.16%) were in the low, high and severe risk level pregnancy respectively.

Level	No	Percentage
Low risk	105	84.67%
High risk	17	14%
Severe risk	2	1.16%

***Table 1:** Level of risk pregnancy.*

The table 2 reveals that there is no association between the level of high risk pregnancy in relation to the demographic variables and obstetrics variables of age, gestational week, gravity, religion, types of family, place of living, education of the mother, education of the husband, income [7].

Demographical Variables	No	Level of High Risk Pregnancy			Chi-Square Value	P-Value
		Low	High	Severe		
Age						
19 - 35	122 (98%)	103 (84%)	17 (14%)	2 (2%)	0.832	0.563 N.S
Income						
2501 - 5000	72 (58%)	61 (85%)	9 (13%)	2 (3%)	0.914	0.830 N.S
Education						
High schooling	66 (53%)	56 (85%)	10 (15%)	0	0.64	0.391 N.S
Residency						
Rural	75 (61%)	63 (84%)	10 (13%)	2 (3%)	0.513	0.568 N.S
Gestational week						
3rd trimester	70 (56%)	62 (89%)	8 (11%)	0	0.303	0.275 N.S
Gravida						
Multi	67 (54%)	56 (84%)	9 (13%)	2 (3%)	0.421	0.476 N.S

***Table 2:** Association of the demographic variables and obstetric variables with the level of risk pregnancy.*

P < 0.05; S: Significant; N.S: Not significant

Citation: Sugandary M and Manju Bala Dash. "Identify the Level of Risk Pregnancy among Antenatal Mothers at Selected Hospital, Puducherry". *EC Gynaecology* 7.5 (2018): 160-162.

Discussion

The present study result reveal that 84.67% of mothers had low risk status. Similar study was conducted a cross-sectional descriptive study by Patrick GO., *et al.* on "Assessment of the risk status of pregnancy women presenting for antenatal care in rural health facility in Ebonyi state, South Eastern Nigeria" with the objective to assess the risk status of pregnant women presenting for antenatal care in a rural health facility among 208 samples; selected by systematic random sampling. A pre-tested semi-structured interviewer-administered questionnaire used for data collection. The result showed that 73 (35.1%) mothers were under low risk, 54 (26.0%) mothers were under High risk pregnancy and 19 (9.1%) mothers were under very high risk pregnancy [8].

Conclusion

A Descriptive study was conducted to identify the level of high risk pregnancy among antenatal mothers at Selected Hospital, Puducherry. Samples were collected by convenient sampling technique and sample size of 124 antenatal mothers. Data was collected by the method of questioner. The findings of the study showed that among 124 antenatal mothers, 105 mothers were in low risk pregnancy. There is no association between the level of high risk pregnancy in relation to the demographic variables and obstetrics variables of age, gestational week, gravity, religion, types of family, place of living, education of the mother, education of the husband, income. The result indicates that all the antenatal mothers needed initial screening for high risk status in order to prevent and manage properly.

Bibliography

1. Bobak and Jensen. "Maternity and Gynaecology care book". 5th edition, Mosby publication.

2. Scott Ricci S and Kyle. "Maternity and pediatric nursing". Lippincott publication.

3. Pillitteri AA. "Maternal and child health nursing". 7th edition, Lippincott Williams publication.

4. Cunninghana FG and Leveno KJ. "Williams Obstetrics". 22th edition, Lippincott publication (2005).

5. Polit Denis F and Beck Cheryl Tatano. "Nursing Research". Eighth edition, Wolters Kluwer Publication, New Delhi.

6. Suresh K Sharma. "Nursing research and statistics". Published by Elsevier India pvt., New Delhi (2012).

7. JP Baride. "Manual of biostatistics". 1st edition, published by Jaypee (2003).

8. PG Oyibo., *et al.* "Assessment of the risk status of pregnant women presenting for antenatal care in a rural health facility in Ebonyi State, South Eastern Nigeria". North American Journal of Medical Sciences 3.9 (2011): 424-427.