



“A STUDY TO ASSESS THE EFFECTIVENESS OF SELECTED INTERVENTIONS ON PROLAPSE UTERUS AMONG WOMEN ADMITTED AT SELECTED HOSPITALS IN INDORE”

Mrs Deepali Sachan¹, Prof. Dr. Jinu K Rajan²

¹Research Scholar, Malwanchal University

²Research Supervisor, Malwanchal University

1. INTRODUCTION

Women with pelvic organ prolapse are more likely to be encountered as the population ages. Women face a lifetime risk of undergoing surgery, prolapse (or) incontinence. Prolapse uterus is most common in postmenopausal women who have had one (or more) vaginal deliveries. Damage to supportive tissues caused by pregnancy and childbirth, as well as the effects of gravity Oestrogen deficiency and repeated straining over time can weaken the pelvic floor muscles and lead to prolapse. This can be caused by a variety of factors. This condition can be caused by intense pressure on the stomach area or if the tissues surrounding the uterus lose strength. If women gave birth vaginally, particularly if they had multiple children naturally. Another factor is menopause, as well as asthma or a condition that causes a severe cough.

Genetic predisposition, high parity, advancing age, prior pelvic surgery, connective tissue disorder, elevated intra abdominal pressure (obesity, chronic constipation account for 20% of the waiting list for major gynaecological surgery). The risk of prolapse requiring surgical correction after hysterectomy is 3.6 per 1000 people per year. The likelihood of prolapse increases with age. From 1968 to 1974, the Oxford Family Planning Association conducted a multi-centric cohort study in Scotland and England among 17,032 women ranging in age from 25 to 39 years. The incidence of genital prolapse among hospital admissions was 2.04 per 1000 people per year. Prolapse is more common in older people in developed countries, but it is more common in younger people in developing countries. If a woman has a mild prolapsed uterus, she may benefit from surgery to repair the prolapse (or) she may choose to use a special supportive device (necessary) that will be inserted into the vagina.

The most common indication for hysterectomy is in women of advanced age (55 years and older). The level of discomfort caused by a prolapsed uterus is determined by the degree of prolapse. For example, back pain, urinary retention, dyspareunia, white discharge, and constipation. For the project study, the investigator is interested in providing nursing care to women with first and second degree prolapse uterus in order to improve their health status.

2. METHODOLOGY

To assess the nursing care provided to women with first and second degree prolapse uterus, an evaluative research design was used. The research was carried out in the Gynaecology wards of selected government hospitals in the Indore.. The study's population included all women with first and second degree prolapse uterus who were admitted to Gynaecology wards at government hospitals in Indore. A total of 20 women were diagnosed with first and second degree prolapse uterus. Women who met the inclusion criteria were chosen using a simple random sampling method. For each woman, the interview lasted between 20 and 30 minutes. The investigator began by introducing herself to the women and building rapport with them. The investigators explained the purpose of the study and gained the woman's trust before introducing her to the instruments. They were helpful and attentive. The data collection time was set at 10 minutes for each woman to collect demographic information. The assessment was carried out using a rating scale. Nursing care was provided from eight a.m. to four p.m. during the study period. The effectiveness of nursing care was assessed on day seven.

3. RESULT AND DISCUSSION

The study found that among 20 women, 31% were in moderate health deterioration and 79% were in severe health deterioration on the assessment day, with a mean of 32.11 and a standard deviation of 4.41.

Assess the efficacy of nursing care on women with first and second degree uterine prolapse. The nursing care provided to each woman was monitored using a check list in accordance with the protocol. When the assessment mean was 32.11 and the evaluation mean was 19.13, the assessment standard deviation was 4.41 and the evaluation standard deviation was 3.11. The paired 't' value of 17.1 demonstrated that there was a difference in health status before and after nursing care.

According to the data, the overall mean after providing nursing care on the evaluation day was 17.67, with a standard deviation of 3.45. The assessment and evaluation resulted in an improvement score of 13.54 with a standard deviation of 1.61. On evaluation day, 73.34 percent of 20 women had mild

health deterioration and 26.66 percent had moderate health deterioration. The calculated value exceeded the tabulated value. Women with first and second degree prolapse uterus saw an improvement in their health.

Correlation between selected demographic variables and nursing care effectiveness in women with first and second degree prolapse uterus. There is a positive relationship between the effectiveness of nursing care such as vaginal douche, perineal care, vaginal plug, Kegel exercise, drug administration, comfort measures, health education, and certain demographic variables such as age, occupation, number of child births, mode of delivery history, and previous history of pelvic surgery.

REFERENCE

- [1] Derek Hewelbyn., (2000) "Fundamental of Obsteric and Gynecology", sixth edition, published by Mosby Company.
- [2] Dewhurts., (1999) "Textbook of Obsteric and Gynecology", sixth edition, published by D.Keith Edmonds.
- [3] Parulekar.c., (1993) "practical Obsteric and Gynecology", second edition, published by vora medical publication.
- [4] Romney.,Gray.,et al.,(1982) "Obsteric and Gynecology", 10th edition, published by Clarinda company.
- [5] Boback and Janson(1997) "Maternity and Gynecological care", Philadelphia v. Mosby company.
- [6] Marcia L.K and Sally (1980) "Obsteric and Gynecological Nursing",London, Addison wesley company.
- [7] Myles, (2002) "The text book of midwives", London, Churchill publishers
- [8] Polit D.F. AND Hungler B.P.,(2002) "Nursing Research principles and methods", Philadelphia, J.P.lippincott company,
- [9] Sweet B.P., (1997) "May's Midwifery", Tokyo, BalliesTinidall publishers.
- [10] Basavanthappa B.T., (1990) "Nursing Research", New Delhi, Jaypee brother's publications.
- [11] Shaws, (2000) "Text book of Gynecology", Churchill livingstone, New delhi.
- [12] Williams, (1997) "Text book of Obstetric and Gynecology", Maryland publication.
- [13] Alligood.M, (2002) "Nursing theory utilization and application" second edition, Mosby publications, Philadelphia.
- [14] Boback, (2003) "Obstetric and Gynecological and women's health" sixth edition, Mosby publications, Philadelphia.
- [15] Gupta S.P., (2002) "Statistical methods" sullivan and son publication, New Delhi.
- [16] Kothari.C.P.,(1990) "Research methodology" Jaypee brothers publications,New Delhi.
- [17] Luckmann Joan and Karen creason Sorenson.,(1997) "Medical surgical Nursing", fourth edition, published by W.B. saunders.
- [18] Mosby.,(1998) "Text book Medical surgical Nursing",19thedition, published by account braces company.
- [19] Amarnath S Bhide, AmmeetsPatki, Jesse M Levi. (2003), "Text book of Gynecology", New Delhi, Medical Publishers (P) Ltd., Jaypee Brothers
- [20] .Dewhurst's. (1999), "Text book of Obstetrics and Gynecological for Postgraduates", sixth edition, London, Blackwell Science.
- [21] Lynna Y. Littleton, Joan Engebretson C. (2002), "Maternal, Neonatal and Women's Health Nursing", Delmar, published by William Brottniller .
- [22] Mathews A J (2000), "Using and understanding medical statistics", Karger publishers, Newyork.
- [23] Nancy Burns, Susan K. "Understanding nursing research building an evidence based practice", fourth edition, Saunders Company.
- [24] Patricia A, Creehan, Kathleen Rice Simpson. (1996), "Perinatal nursing: association of womens health obstetric and neonatal nurses" first edition, Philadelphia, Lippincott.
- [25] Reeder, Martin, Koniak. (1992), "Maternity nursing : family, newborn and women's health care" 17th edition, Philadelphia, J.B. Lippincott Company.
- [26] Romney, Gray, Little, Merrill, Quilligan, Stander. (1981), "obstetrics and Gynecological nursing", second edition, New York, McGraw Hill Book Company.