

“A Study To Assess The Knowledge And Expressed Practices Regarding Management Of Antepartum Haemorrhage Among Nursing Officers Working At Selected Hospital, Jodhpur”

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Abstract

Statement of the study- “a study to assess the knowledge and expressed practices regarding management of antepartum haemorrhage among nursing officers working at selected hospital, jodhpur”

Objective- 1. to assess the knowledge score of nursing officers regarding the management of antepartum haemorrhage. 2. To assess the expressed practice score of nursing officers regarding the management of antepartum haemorrhage. 3. To find out the correlation between knowledge score and expressed practices score of nursing officers regarding management of antepartum haemorrhage. 4. To find out association between knowledge score of nursing officers regarding management of antepartum haemorrhage with their selected demographic variables. 5. To find out association between expressed practices of nursing officers regarding management of antepartum haemorrhage with their selected demographic variables.

Materials and methods- a non-experimental quantitative research design was employed, with a sample of 81 nursing officers selected through convenient sampling. Data were collected using a structured questionnaire and checklist, and the analysis included descriptive statistics, karl pearson's coefficient of correlation, and chi-square tests.

Results- In terms of knowledge, 61.73% exhibited adequate knowledge, with a mean score of 18.296. Regarding expressed practice, 69.14% displayed good practice, with a mean score of 51.407. A strong positive correlation ($r = 0.746$, $p = 0.001$) was observed between knowledge and practice scores. However, no significant associations were found between knowledge/practice scores and demographic variables.

Conclusion- the study identified moderate to adequate knowledge and good expressed practices among nursing officers regarding antepartum hemorrhage management. A strong positive correlation between knowledge and practice scores indicate the importance of continuous education and training programs for nursing officers. Demographic variables did not significantly influence knowledge or practice scores, highlighting the need for targeted interventions to improve maternal health outcomes.

Keywords: Antepartum hemorrhage, nursing officers, knowledge, expressed practice, correlation, demographic variables.

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I. Introduction

Pregnancy is such a special and wonderful time for a woman. It's a time when her amazing ability to create and nurture life shines, connecting the present to a beautiful future. As one embarks on the journey of transitioning from a woman to a mother, numerous responsibilities and concerns become uniquely theirs to bear.¹

Bringing a new life into the world is a remarkable experience. It's crucial to get your body ready to provide the best environment for your baby's growth while ensuring your emotional and mental well-being. Each week of pregnancy brings new changes and emotions that might require explanations and emotional and physical support.

After getting pregnant, the next big moment a woman looks forward to is going into labor. However, sometimes, many women might miss the early signs and symptoms of labor, which can leave them unprepared for childbirth.²

During pregnancy, some women face health issues that can affect both their well-being and that of the baby. Even women who were healthy before becoming pregnant can encounter complications. These may

include conditions like high blood pressure, gestational diabetes, infections, preeclampsia, preterm labor, depression, anxiety, miscarriage, stillbirth, vaginal bleeding, and other health challenges.³

Vaginal bleeding during pregnancy, referred to as antepartum hemorrhage, is any bleeding that occurs after the 20th week of pregnancy but before the baby's birth, including both the early and late stages of labor. The primary cause of antepartum hemorrhage is bleeding from the placenta, accounting for about 70% of cases. Placental bleeding can manifest in two main types: placenta previa and abruptio placentae. Other potential causes of antepartum hemorrhage include localized issues and cervicovaginal conditions such as cervical polyps, cervical cancer, varicose veins, and local trauma.⁴

Antepartum hemorrhage is a serious risk for both expectant mothers and their unborn children, demanding swift and efficient care. Nursing officers play a pivotal role in supporting pregnant women, which includes recognizing, evaluating, and addressing complications like antepartum hemorrhage. In the UK and Ireland, between 2016 and 2018, there were 14 maternal deaths related to obstetric hemorrhage during pregnancy or up to six weeks post-pregnancy. This resulted in an overall mortality rate of 0.63 per 100,000 pregnancies. Among these, six fatalities were attributed to antepartum hemorrhage, with three linked to placental abruption and three to placenta previa.⁵

II. Methods

Non-Experimental design, with non-probability purposive sampling method was used. The study aimed to management of antepartum haemorrhage. Convenient study research design was used in 81 Nursing officers were chosen and simple random technique were chosen in selected sample. The knowledge was assessed using self-structured questionnaire. Assess the knowledge level regarding management of antepartum haemorrhage

III. Data Analysis And Interpretation-

The study found that among the nursing officers, 6.17% demonstrated inadequate knowledge regarding the management of antepartum hemorrhage, with scores falling below 12. Meanwhile, 32.10% exhibited moderate knowledge (scores between 12-18), and the majority, comprising 61.73%, displayed adequate knowledge (scores above 18). The mean knowledge score was calculated at 18.296, with a standard deviation of 3.8615, indicating a moderate level of dispersion around the mean.

Level of knowledge	Frequency	Percentage	Mean Score	Median Score	Mode Score	Standard Deviation
<u>Inadequate(<12)</u>	5	6.17	18.296	19.00	19	3.8615
Moderate (12-18)	26	32.10				
<u>Adequate(>18)</u>	50	61.73				

Regarding the expressed practice of nursing officers in managing antepartum hemorrhage, only a small proportion (1.23%) demonstrated below-average practice, scoring below 33. Meanwhile, 29.63% exhibited average practice (scores between 33-49), and the majority (69.14%) displayed good practice, scoring above 49. The mean practice score was computed at 51.407, with a standard deviation of 7.3208, indicating a considerable variation in expressed practices scores within the sample.

Category	Frequency	Percentage	Mean Score	Median Score	Mode Score	Standard Deviation
Below Average (<33)	1	1.23	51.407	53.00	53	7.321
Average <u>33-49</u>	24	29.63				
Good <u>>49</u>	56	69.14				

A strong positive correlation ($r = 0.746$) was observed between the knowledge scores and expressed practice scores of nursing officers regarding the management of antepartum hemorrhage. This correlation was statistically significant ($p = 0.001$), suggesting that higher knowledge levels were associated with better-expressed practices in dealing with antepartum hemorrhage.

The association between knowledge scores and demographic variables such as age, gender, qualification, years of work experience, previous sources of information, and previous exposure to cases was explored using the chi-square test. Results indicated no significant association between knowledge scores and these demographic variables, as evidenced by non-significant p-values (>0.05) for all variables.

Similarly, the association between practice scores and demographic variables was examined using the chi-square test. Results revealed no significant association between practice scores and demographic variables, with all p-values (>0.05) indicating no statistically significant relationship between practice scores and the demographic characteristics of the nursing officers.

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