

A Study to Assess the Knowledge and Perineal Self-Care Practices on Episiotomy Wound Among Primiparous Women

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ABSTRACT

The female perineum becomes suffused and stretched during pregnancy, and further strain during vaginal childbirth contributes to approximately 85% of women experiencing some degree of trauma to the perineal region. Multiple factors play a role in the type and severity of trauma experienced, including parity, delivery method, and local practices. There is ongoing debate about best midwifery practice to reduce perineal trauma. Once perineal trauma has occurred, treatment also varies greatly, depending on its degree and severity, local practice and customs, and personal preference. In order to optimise wound-healing outcomes, it is important that wounds are assessed and managed in an appropriate and timely manner. During pregnancy and primiparous period nurses educate mothers about health behaviour that enhance positive outcomes particularly those related to self-care. The proper and effective care is thus required to prevent from the morbidity and for enjoying motherhood. A perineal wound may cause significant physical and/or psychological impact in the short or long term, however little evidence is available on this subject.

Keyword: Episiotomy, primiparous women, Knowledge, perineal self care, practice

INTRODUCTION AND BACKGROUND

**Progress is when we forgive ourselves
for taking long time to treat our bodies
like a home**

- yung pueblo

Perineal care is one of the most important maternal health-care services for reducing the maternal mortality. They indicate a time of great hope and joyful anticipation. It can also be a time of fear, suffering and even death. Although pregnancy is not a disease, and a normal physiological process, it is associated with certain risks to health and survival both for the women and for the fetus she bears. In developing countries where each pregnancy represents a journey into the unknown from

which all too many women return due to lack of care provision.¹ [Pilliteri (2008)]

The perineum is the anatomic area between the urethra, the tube that carries urine from the bladder, and the anus. In women, the perineum includes the vaginal opening. This area undergoes a lot of stress and change during pregnancy and delivery both anatomically and physiologically so it requires a proper and due attention afterwards the delivery Perineal trauma occurs during spontaneous or assisted vaginal delivery, and is usually more extensive after the first vaginal delivery. Associated risk factors also include increased fetal size, mode of delivery, and malpresentation and malposition of the fetus.

Other maternal factors that may increase the extent and degree of trauma are ethnicity (white women are probably at greater risk than black women), older age, abnormal collagen synthesis, and poor nutritional state.²(Blessly, 2021)

Perineal injury is the most common maternal morbidity associated with vaginal birth. In Queensland in 2016, 73.5% of women who had a vaginal birth experienced perineal trauma and of these, 57.2% required surgical repair.³(Premkumar G, 2005) Episiotomy the surgical incision made to widen the perineum in order to facilitate vaginal delivery and prevent laceration it has been a part of obstetrics practice.⁴ Primigravidity and operative vaginal deliveries have been associated with higher incidence of episiotomy and while routine use with its attendant complication have continued, restrictive use recommended by WHO has been difficult to achieve in many developing countries.⁴ [Timothy A Oluwasola]. Most women have some degree of discomfort during the first few postpartum days. One of the common causes of discomfort is episiotomy.⁴ Nursing interventions are intended to reduce the discomfort and allow the woman to take care of herself and her baby. Simple interventions that can decrease the discomfort associated with perineal trauma is applying an ice pack, moist or dry or topical applications, cleansing the perineum with a squeeze bottle and taking a warm shower or a sitz bath.⁵ [Hoda abed El-Azim Mohamed]

MATERIALS AND METHOD

The chapter explains the methodology adopted by the researcher by the researcher to assess the knowledge and perineal self care practice on episiotomy wound among primiparous women in chettinad hospital and research institute, kelambakkam, Tamil nadu. It deals with the research approach, research design, setting of the study, population, sample and sample size, sampling technique, criteria for the selection of sample, data collection procedure, description of tool for data collection, plan for data analysis, and ethical clearance.

RESEARCH APPROACH

The researcher adopted a quantitative approach

RESEARCH DESIGN

A Descriptive study

RESEARCH SETTING

Chettinad Hospital and Research Institute, Kelambakkam

POPULATION

Primiparous women with episiotomy wound

SAMPLE

30 Primiparous women

SAMPLE SIZE

SAMPLE SIZE :FORMULA,

$$n = z^2 p_1(1-p_1) + p_2(1-p_2) / d^2$$

d²

Where,

n = 30 Primiparous women

d/2 = confidence interval

p₁ = Estimated proportion

d = desired precision

1112

SAMPLE TECHNIQUE

Convenience Sampling technique was used in this study

FINDINGS

Objective 1: To assess the perineal self-care practices on episiotomy wound among primiparous women

From the findings it shows that 3.2% of primiparous women have adequate perineal self-care practices, 80.6% of primiparous women have moderate perineal self-care practices, 16.2% of primiparous women have inadequate perineal self-care practices, so the findings shows that majority of primiparous women have moderate perineal self-care practice

Objective 2: To assess the knowledge of perineal self-care on episiotomy wound among primiparous women

From the findings it shows that 3.2% of primiparous women have adequate knowledge on perineal self-care, 80.6% of primiparous women have moderate knowledge on perineal self-care, 16.2% of primiparous women have inadequate knowledge on perineal self-care, so the findings shows that majority of primiparous women have moderate knowledge on perineal self-care.

Objective 3: To identify the correlation between the knowledge and perineal self-care practices on episiotomy wound among primiparous women

From the findings it shows that there is a positive correlation between the knowledge and perineal self-care practices on episiotomy wound among primiparous women, the perceived value of correlation is 0.095, so there is a positive correlation between objectives & hypothesis

Objective 4: To identify the association between knowledge and perineal self-care practice with selected socio-demographic variables

From the findings it shows that there is a significant association between knowledge and perineal self-care practice with selected socio-demographic among primiparous women

DISCUSSION

The study intends to assess the knowledge and perineal self-care practices on episiotomy wound among primiparous women, in order to achieve the objectives of the study, Descriptive research design was adopted. Purposive sampling technique was used to select the samples. Data was collected from 30 Primiparous women by using the self-structured practice & knowledge questionnaire. Data gathered was analyzed by using descriptive and inferential statistic.

CONCLUSION

The study findings shows that 3.2% of primiparous women have adequate knowledge and perineal self-care practice on episiotomy wound, positive correlation was found between knowledge and practice which is statistically significant at $p > .05$ level of significance.

Conflict of Interest: NIL

Source of Funding: SELF

Ethical Clearance: The research was conducted according to established ethical guidelines (paules 2007) The UG Committee clearance and institutional ethical committee clearance was obtained from CARE Institutional. The study was explained to the participants. The participants were reminded that they may withdraw their participation whenever they wishes and the study results will be solely for research purpose

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