



PSYCHOSOCIAL HEALTH AMONG POST HYSTERECTOMY WOMEN

Ms. Ancymol L. B

Lecturer, Dept. Of Obstetrics and Gynaecology Nursing, Sree Gokulam Nursing College, Venjaramoodu

Prof. Bindu C. G*

HOD, Dept. Of Obstetrics and Gynaecology Nursing, Sree Gokulam Nursing College, Venjaramoodu *Corresponding Author

ABSTRACT

A descriptive study was conducted to assess the psychosocial health among post hysterectomy women. The objectives of the study were to assess self esteem among post hysterectomy women, to assess body image perception among post hysterectomy women and to assess marital adjustment among post hysterectomy women. The findings revealed that 51.1% of the subjects had average and 33.3% had low self esteem. About 62.2% of the subjects had average and 27.8% had poor body image perception. About 61.1% of the subjects had average and 20% had poor marital adjustment. The study concluded that majority of the post hysterectomy women only had average to poor psychosocial health. So it is essential to educate the women regarding physical and psychological problems after hysterectomy and help them cope up with this effectively without affecting the psychosocial health.

KEYWORDS : Self esteem; Body image perception; Marital adjustment; Post hysterectomy women.

INTRODUCTION

Better health is central to human happiness and wellbeing. The world Health Organization defined health in its broader sense in its 1948 constitution as "a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity. Mental health is a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life. Social health is the one's ability to form meaningful personal relationships with others. People who have good emotional health are aware of their thoughts feelings and behaviors. They feel good about themselves and have healthy relationships.

The reproductive system, in function, dysfunction and disease, plays a central role in women's all aspects of health. A major burden of the disease in females is related to their reproductive function and reproductive system.

The uterus or womb is a major female hormone-responsive reproductive sex organ of humans. Oestrogen is the main female hormone responsible for the thickening of the uterine lining during the menstrual cycle. It also moistens and lubricates the vagina, protects against infection, involves in breast development, helps to preserve bone strength, keeps arterial walls healthy and protects against heart disease.

Hysterectomy is one of the prevalent surgeries worldwide. Every year, many women all over the world undergo hysterectomy for benign conditions to malignancies of genital tract. Hysterectomy is a major event in a woman's life. It will result in instant menopause and the woman experiences all psychosocial changes of menopause. She will no longer have menstruation and will not bear children.

Statement of the problem

A descriptive study on psychosocial health among post hysterectomy women in selected panchayaths at Trivandrum district.

Methodology

Research Approach : quantitative approach.

Research Design: descriptive design.

Variables

Dependent Variables

- self esteem
- body image
- marital adjustment of post hysterectomy women

Socio-personal Variables

- Age
 - Religion
 - Education
 - Occupation
 - Monthly income
 - Type of family
 - Duration after hysterectomy
 - Co-morbidities
 - Reason for hysterectomy
- Obstetric datas include:
- Number of deliveries
 - Type of deliveries
 - Menopause before hysterectomy.

Setting of the study: The setting chosen for the study was Nelland, Manickal and Vamanpuram Panchayaths of Trivandrum district.

Population: Post hysterectomy women below 45 years of age and one to three years after surgery.

Sample: The sample of the present study consisted of 90 post hysterectomy women from Nelland, Manickal and Vamanpuram panchayaths at Trivandrum district, who fulfill the inclusion criteria.

Sampling technique : Non probability convenient sampling technique.

Sample size: A total of 90 samples were selected for the study.

Sample selection criteria**Inclusion Criteria**

- Post hysterectomy women below 45 yrs and in between one to three years after surgery.

Exclusion criteria

- Unmarried women / Divorcee / Widow
- Critically ill patients
- Women having psychiatric problems
- Women who underwent mastectomy, amputation of any other body parts.
- Hysterectomy without BSO

Tools and Techniques

- Socio-personal proforma

- Self Esteem Scale.
- Body Image Scale
- Marital Adjustment Scale

RESULTS

- In this study majority (78%) of the subjects belong to the age group of 41-45 years followed by 20% of the subjects who belong to the age group of 36-40 years, 2.0% of the subjects belong to the age group of 31-35 years.

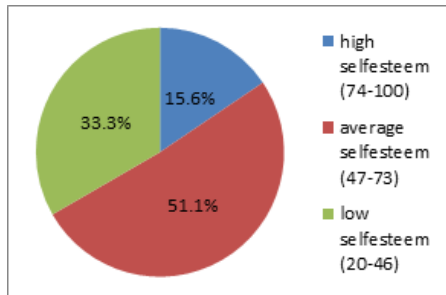


Fig 1: Pie diagram showing the percentage distribution of subjects according to self esteem.

- Majority (62.2%) of the subjects had average body image perception, 27.8% had poor body image perception and 10% had good body image perception.
- Majority (61.1%) of the subjects had average marital adjustment, 20% had poor marital adjustment and 18.9% had good marital adjustment.

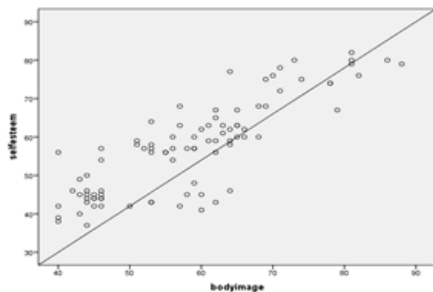


Figure 2: Correlation between self esteem and body image perception of post hysterectomy women.

- There was a strong positive correlation between self esteem and body image perception of post hysterectomy women with the correlation coefficient of 0.821 significant at 0.01 levels.
- There was a moderate positive correlation between body image perception and marital adjustment of post hysterectomy women with the correlation coefficient of 0.697 at 0.01 levels.
- There was a moderate positive correlation between self esteem and marital adjustment of post hysterectomy women with the correlation coefficient of 0.656 at 0.01 levels.
- There was a significant association between psychosocial health and selected socio-personal variables.

DISCUSSION

The present study revealed that, more than half (51.1%) of the subjects were having average self esteem, 33.3% were having low self esteem and 15.6% were having high self esteem. The findings of the study is consistent with another study conducted by Ilknur A.A et al. during the period of both before and after hysterectomy among 72 women showed that there weren't any changes in self esteem one week after surgery, but a significant decrease in the women's self esteem three months after surgery.

The present study findings shows that majority (62.2%) of the

subjects were having average body image perception, 10% were having good body image perception and 27.8% were having poor body image perception. The findings are consistent with another study by Flory N which revealed that hysterectomy causes impaired body image and negative psychosocial outcomes such as reduced sexual interest, arousal, and orgasm, as well as elevated depressive symptoms.⁶⁵ Gutl P et al. also revealed in their study that women after abdominal surgery were dissatisfied with their body image because of the abdominal scar.

The present study findings shows that majority (61.1%) of the subjects were having average marital adjustment, 20% were having poor marital adjustment and 18.9% were having good marital adjustment. The findings are consistent with another study done by Keskin G et al. that showed hysterectomy patients have greater sexual problems and difficulties with spouse relationships. They had more problems in terms of vaginismus ($t = 2.32, p < 0.05$), avoidance of sexual intercourse ($t = 2.31, p < 0.05$), communication ($t = 2.06, p < 0.05$), and frequency of sexual intercourse ($t = 2.10, p < 0.05$).

Nursing implications

The findings of the study have the following implications in nursing practice

Implications for nursing practice

- Nurses can identify the person who is lacking information about hysterectomy and its complications and can provide support and health education regarding various physical and psychological problems associated with hysterectomy and their management options.

Implications for nursing administration

- Nurse administrator can conduct health education programmes and counseling sessions for women who underwent hysterectomy in the hospital and in community.
- Nurse administrator can hold clinics for pre and post hysterectomy patients counseling to overcome physical and psychological problems after hysterectomy, which ensures a better health status of the women.
- Nurse administrator should ensure that all staff working in the gynecologic wards are well trained in early detection of problems and giving adequate care, proper health education and psychological support to all patients who underwent hysterectomy.

Implications for nursing education

- Health care system should pay more attention on training the nursing staff and students to identify the problems and its care of post hysterectomy women and care of those women.
- Training gynaecology nurses in inpatient, surgical or outpatient settings. Specialised training in the care of women undergoing hysterectomy is a critical factor. The training program should include an understanding about the nature of post hysterectomy and applying care strategies in systematic ways.

Implications for nursing research

- Generalization of the study result can be made by further replication of the study in larger population.
- The findings of the study serves as a basis for professional and the student nurses to conduct further studies on post hysterectomy women.

CONCLUSION:

Removal of uterus is a very concerned health issue. It may be affect the health of the women either positively or negatively. But majority of the study findings shows that hysterectomies have negative effects on self esteem, body image, and dyadic adjustment. In addition to this, the results of the present study

also reveals average to poor level of self esteem, body image perception and marital adjustment among post hysterectomy women. Hence the women needs implementation of strategies to increase self confidence and self esteem. In this present study the investigator prepared health educational module to enhance the self esteem, body image perception and marital adjustment.

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