

Original Research Paper

Nursing

A TRUE EXPERIMENTAL STUDY TO ASSESS THE EFFECTIVENESS OF HIGH FOWLERS POSITION ON MATERNAL OUTCOME AMONG FIRST STAGE OF PRIMI NORMAL VAGINAL DELIVERY MOTHERS AT SELECTED HOSPITALS.

T. Shanthi*

PhD Scholar Himalayan University. *Corresponding Author

Dr. Gajanand Wale

Research Guide, Himalayan University.

ABSTRACT

INTRODUCTION: pregnancy and labor are one of obstacle in women life. Also, primi mother have more fear and anxiety during pregnancy and labor. Primi mother need to manage highly in labor room without

any complication.

AIM: To study the role of high fowlers position in conducting normal vaginal delivery.

METHODS: In this study was under quantitative approach. True experimental posttest only control group research design was adopted. From 30 primi normal vaginal delivery mothers was selected. Maternal outcome finds by using modified WHO partograph, observational checklist.

RESULTS: The experimental group average score was 12.53 with standard deviation of 2.75. the control group average score was 8.40 with standard deviation of 2.10. the test statistics value of the unpaired t test was 4.63 with p value 0.000. the p value less than 0.05, hence reject the null hypothesis.

CONCLUSION: that high fowler position on maternal outcome is effective among first stage of primi normal mothers.

KEYWORDS: high fowlers position, maternal outcome, first stage, normal vaginal delivery.

INTRODUCTION

Discomfort is one of the biggest obstacles of labour and delivery. Pregnant women don't want to experience the fierce labour that has been in store for them. So, they demand for healthier labour, with less discomfort. Women in the developing countries with meagre health facilities usually lie in bed during the first stage of labour. Lying on the back (supine) puts the weight of the pregnant uterus on abdominal blood vessels and contractions may be less strong than when upright (high fowler position). Effective contractions help cervical dilatation and the descent of the baby. 1

The rationale for the upright and mobile positions during labour and delivery, is that gravity aids the descent of the fetus, uterine contractions are intensified, there is less uterine compression of abdominal vessels, transverse pelvic diameters are increased with squatting and kneeling, and mobility usually provides increased distraction from pain and a greater sense of control. On the other hand, most western women prefer to lie down once they have reached 5-6cm dilatation, and they cannot maintain squatting or kneeling positions for long periods of time.

Ineffective breathing positions like lithotomy and supine can compress major blood vessels which interferes with circulation and lowers maternal blood pressure, which can than lower maternal blood pressure, which can than lower fetal transcutaneous oxygen saturation as much as 91%, including cord compression which may lead to fetal distress, needs continuous or internal fetal monitoring, increased risk of shoulder dystocia/ problem with fetal presentation or a prolonged pushing phase. (The journal of perinatal education Lamaze international, 2013). 2

MATERIALS AND METHODOLOGY

Study approach: this study quantitative research approach was adapted.

Study design: The research design used for this study was true experimental posttest only control group design.

Sampling technique: simple random sampling technique was used in this study.

Setting: this study was conducted at department of OBG, at a selected maternity hospital in southern India.

Target population: the sample presenting to 30 first stage of

primi normal vaginal delivery mothers. During the study period that met the following criteria formed the cases for this study.

INCLUSION CRITERIA:

Who are all available during data collection.

Who are able to attend the intervention.

Who are Able to understand and read /write Marathi/English.

EXCLUSION CRITERIA:

who are all in 2^{nd} and 3^{rd} stage of primi mothers.

Who are all mentally ill.

Who are not writing to give consent.

METHOD OF DATA COLLECTION:

During the study period, 30 sample selected with 1st normal vaginal delivery mothers and fulfilling inclusion and exclusion criteria were recruited in the study. Sample selected for study based on above selection criteria were explained about the details of study, its purpose, benefits, and complications. Then informed written consent was obtained. Intervention given to the sample. Data was collected according to performa. The obtained data was tabulated in excel sheet and analyzed.

RESULTS:

General assessments of experimental group on maternal outcome among first stage of primi normal vaginal delivery mothers

GROUP A	Groups		Frequency	Percentage	
	Poor	0-5	1	6.67	
	Average	6-10	2	13.33	
	Good	11- 15	12	80.00	
Experimental	Minimum Maximum Average (SD)		5		
			15		
			12.53 (2.74)		

General assessments of control group on maternal outcome among first stage of primi normal vaginal delivery mothers.

GROUP B	Groups		Frequency	Percentage	
	Poor	0-5	3	20.00	
	Average	6-10	10	66.67	
	Good	11- 15	2	13.33	
Control	Minimum		4		
	Maximum		11		
	Average (SD)		8.40 (2.09)		

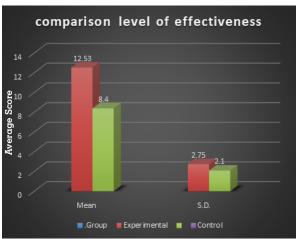
Comparison of effectiveness of experimental and control group on maternal outcome among first stage of primi normal vaginal delivery mothers.

VOLUME - 10, ISSUE - 07, JULY- 2021 • PRINT ISSN No. 2277 - 8160 • DOI : 10.36106/gjra

.Group	N	Mean	S.D.	t value	P value
Experimental	15	12.53	2.75	4.63	0.000
Control	15	8.40	2.10		

The comparisons of effectiveness of experimental and control group on maternal outcome among first stage of primi normal vaginal delivery mothers at selected hospitals were done by the unpaired t test. The test was conducted at 5% level of significance.

The experimental average score was 12.53 with standard deviation of 2.75. the control average score was 8.40 with standard deviation of 2.10. the test statistics value of the unpaired t test was 4.63 with p value 0.000. the p value less than 0.05, hence reject the null hypothesis. Concludes, significance difference in the effectiveness of experimental and control group on maternal outcome among first stage of primi normal vaginal delivery mothers.



DISCUSSION

The demographic variables of both group A and group B as shown in table 1 to 8 depicted that majority of the primi mothers were between the age group of in the study 46.67% 18- 22 years, in the study 33.33% educated up to primary, work pattern in this study group A 46.67% and group B 40% were in service, in the study group A 66.67% of them were from rural area and 33.33% mothers from urban area group B 73.33% of them were from rural area and 26.67% mothers from urban area, in the study 33.33% of them were from nuclear families, 60% from joint families and 6.67% from the extended families and group B 26.67% nuclear families, 66.67% joint families and 6.67% from the extended families. In the study group A 60% of them got support of mother in law and group B 53.33% of them got support from mother in law, in the study group A 66.67% in the gestational age in the 39-40 weeks and in the group B 80% in the gestational age 39-40 weeks.

Findings related to the effectiveness of high fowlers position on maternal outcome among first stage of primi normal vaginal delivery mothers.

The comparisons of effectiveness of high fowlers position on maternal outcome among first stage of primi normal vaginal delivery mothers at selected hospitals were done by the unpaired test.

CONCLUSION

The present study assessed the effectiveness of high fowlers position on maternal outcomes among first stage of primi normal vaginal delivery mothers. The study findings showed that there was a significant difference in the maternal outcomes after intervention (high fowlers position.). in experimental group (group A) the average time duration of labor was 14 hours, cervical dilatation rate was 1 cm/hrs, intensity of uterine contraction has good progress. In control group (group B) for most of the mothers the time duration of

first stage of labor was prolonged (18 hrs) cervical dilatation rate was $<\!$ lcm/ hr, intensity of uterine contractions had poor progress. The sample size of the study was 30 mothers with first stage of primi normal vaginal delivery at selected hospitals. It concluded that when compared with control group, experimental (high fowlers position) was effective in improving the maternal outcome. Hence the high fowlers protocol can be utilized during first stage of labor by the nursing professionals in their ethical practice to promote the maternal outcome and improve the quality of life which also evidenced by various other research studies. So, high fowlers position on maternal outcome is effective among first stage of primi normal mothers.

REFERENCES:

- Lawrence A, Lewis L, Hofmeyr GJ, Dowswell T, Styles C. Maternal positions and mobility during first stage labour. The Cochrane Collaboration. Wiley & Sons Ltd. Published Online: April 15, 2009 (cited 2010 Oct 11).
- The National Institute for Health and Clinical Excellence. (2012). Avoid using supine position during labor and birth. Retrieved from http://www.pubmed.com