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Original Research Paper

Nursing

ASSESS THE EFFECTIVENESS OF VATM ON KNOWLEDGE REGARDING POST HYSTERECTOMY CARE AMONG THE WOMAN'S UNDERGONE HYSTERECTOMY

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A Pre experimental study with pre-test and post-test without control design was taken on 50 women under gone hysterectomy in SCBMCH, Cuttack, Odisha selected by convenience sampling technique. The Data were analyzed by using descriptive and statistics. The found data shows a significant increase in the knowledge scores of women of post hysterectomy care after administration of VATM and it emphasizes that the knowledge has no significant relationship with the selected demographic variable. Hence it shows that the VATM is effective for increasing the knowledge of women under gone hysterectomy regarding the post-operative care

KEYWORDS: Study, assess, VATM, Hysterectomy, Post-Operative Self Care Management

INTRODUCTION

Hysterectomy is defined as the surgical removal of the uterus; it is considered second only to caesarean section as the most frequently performed major operation in the United States. Nowadays hysterectomy is the common procedure performed in the gynaecological area, which aids in the reduction of many gynaecological problems. Rates of hysterectomy vary significantly among regions, rates are highest in the South and Midwest, and are higher for African-American women. In recent years, although the number of hysterectomies performed has declined, the number of hysterectomies performed on younger women aged 30 - 40years increasing, and 55 % of all hysterectomies are performed on women ages 35-49 years. Hysterectomies performed for pre-invasive and invasive gynaecological cancer, pelvic inflammatory disease, and obstetrical hemorrhage represent only 10 to 15% of cases. The most common indications are heavy or irregular uterine bleeding, pelvic pain, and pelvic pressure. Although hysterectomy is often the definitive treatment for much pelvic pathology, nonsurgical alternatives should always be attempted as first choice of treatment.

Hysterectomy may be performed by a vaginal, an abdominal, or laparoscopic approach. In a total hysterectomy, the uterus and cervix are removed. In some cases both fallopian tubes and ovaries are removed along with the uterus, which is a hysterectomy with bilateral salpingo-oophorectomy.

The positive attitude of women toward hysterectomy prevents many physical, psychological, and social complications, which is possible only with adequate knowledge regarding the causes and consequences of hysterectomy. Surgery causes stress among people that may handicap them physically, psychologically and socially. Hysterectomy may exacerbate these effects because of its symbolization to a female's sense of womanhood. Therefore emotional and social support along with education is of paramount importance to patients undergoing abdominal hysterectomy. Assisting a patient to understand and mentally prepare for surgery is possible through an effective pre- operative instruction, which further decreases complications, increases patient satisfaction, shortens the length of hospitalization and promote physical well-being.

OBJECTIVES

The study undertaken to assess knowledge, evaluate effectiveness of VATM, find out association between Pre & Post Test knowledge regarding post-Hysterectomy care.

MATERIAL AND METHOD

Pre-experimental design (one group pre & post-test approach without control group) used current study to test the research hypothesis. Pilot study was conducted in Jeevan Jyoti Hospital,

Khurdha, Odisha whereas Main study was conducted O&G Department, SCB,MCH, Cuttack, Odisha after obtaining the prior permission and concern from participants. Purposive sampling technique was used to select 50 no of sample for the study.

Tools used for the study were self- structured Questionnaires and VATM on knowledge of Post-Hysterectomy Care. Content validity of the tool was established by twelve experts including Statisticians.

DATA ANALYSIS AND RESULT

Data analysis done by using descriptive and inferential statistics as per the objectives of the study.

Percentage wise distribution of woman's under gone hysterectomy according to their age group depicts that highest percentages (46%) of the woman's were in 46-55 years of age group, whereas more majority (40%) of the woman's were in the age group of >55years & only 14% of woman's were in the age group of 36-45. Highest percentage (86%) of woman's was Hindu religion. Highest percentage (42%) of woman's were having Illiterate Highest percentages (62%) of woman's were having house wife. Highest percentages (68%) of woman's were married. Highest (54%) percentages of woman's were primipara. Highest (66%) percentages getting Total of hysterectomy. Highest percentage (38%) were income per month <5000. Highest percentage (46%) was having no previous exposure. Prior to the implementation of VATM of the woman under gone hysterectomy had post-operative knowledge.

Area wise assessment of knowledge shows during post–test highest mean percentage score was (93.71%) of the maximum score was obtained for the area "wound care" and whereas lowest mean percentage is 91% of total score in post-test was obtained for the area "Anatomy of uterus" and effective was from 31.43-44.5%.

Table-1: Paired "t" Value Of Pre And Post-test Knowledge Of Woman Under Gone Hysterectomy Regarding Hysterectomy Care.

Area	"t" value	Remarks
Anatomy of uterus	8.48	HS
Introduction to	12.84	HS
hysterectomy		
Complication to	14.41	HS
hysterectomy		
Wound care	15.05	HS
Ambulation	9.04	HS
Diet	4.28	HS
Activities & exercise	17.88	HS
	Anatomy of uterus Introduction to hysterectomy Complication to hysterectomy Wound care Ambulation Diet	Anatomy of uterus 8.48 Introduction to 12.84 hysterectomy Complication to 14.41 hysterectomy Wound care 15.05 Ambulation 9.04 Diet 4.28

(Table value 2.02, df-6, and Level of significance 0.05)

Table-1 showing comparison of pre and post cumulative percentage of knowledge score of woman's under gone hysterectomy

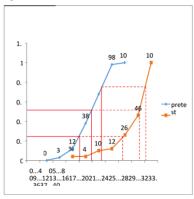


Figure-1

Fig-1 showing the comparison of pre and post cumulative percentage of knowledge score of woman's under gone hysterectomy that post-test score lies to the right of the pre-test score, over the entire range showing that post-test score is higher than pre-test scores.

CONCLUSION

From the findings of the present study it can be concluded that, highest percentages (46%) of the woman were in 46-55 years of age group. Prior to the implementation of VATM of the woman under gone hysterectomy had post-operative knowledge. The total mean score during post-test (28.02 ± 2.53) which is 82.41% revealing good knowledge and effectiveness was found to be 55.5%. Highest post-test mean score 86% of the total score was obtained by the Woman under gone hysterectomy diet. The lowest mean percentage is 72% of total score in post-test was obtained for the area "ambulation". Highly significant difference was found between pre and post-test knowledge score (p < 0.05).

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