



SYSTEMATIC REVIEW ON EFFECTIVNESS OF BACK MASSAGE ON PAIN PERCEPTION AMONG INTRANATAL WOMEN DURING ACTIVE PHASE OF LABOUR IN DOON MEDICAL COLLEGE AND HOSPITAL, DEHRADUN, (U.K)

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ABSTRACT

Quantitative research approach and quasi experimental, nonrandomized control group design was used, purposive sampling techniques was utilized to select the sample. The study was conducted in Doon medical college and Hospital, Dehradun, Uttarakhand. Sample size of the research study was 60 intranatal women. Labour pain was measured before and after the back massage in the experimental group. Control group received the regular intervention and care. The data was collected using structured interview schedule, numerical pain rating scale and structured rating scale. Data was analyzed using descriptive and inferential statistics in terms of mean deviation and chi- squire test. In regards to the present study majority 24(80%) women experienced severe pain and 3(10%) each in moderate and worst possible pain. Similarly in post-test 27(90%) with severe pain and 3(10%) women experienced worst possible pain as progress in the labour in control group .Majority 25 (83.3%) women experienced severe pain and 5 (16.7%) women's having moderate pain. Similarly in post-test 20 (66.7%) with severe pain and 10 (33.3%) women experienced moderate pain as progress in the labor in experimental group. The pre-test mean score for control group was 7.93, mean % 79.3% with SD 1.14 similarly in experimental group 7.60, mean % 76% with SD 1.19. The post-test mean score for control group was 8.43, mean% 84.3% with SD 0.85 similarly in experimental group 6.90, mean % 69% with SD 1.09.

KEYWORDS : Effectiveness, Back Massage, Pain Perception, Active Phase Of Labor, Intrnatal Women.

INTRODUCTION

Pregnancy is the special event not only in the life of women but also in the entire family. The Labor and birth process is an exciting, anxiety provoking but rewarding time for the woman and her family. Labor is a health state that most women aspire to, at some point in their lives. The first thought comes to the mind of an expecting woman regarding her delivery is the pain of labor. The pain of the labor is the central and universal part of the woman's experience of childbirth. Labor is a normal physiological process, which while should be an occasion for rejoicing, it also accompanies with it, lots of pain, agony and discomfort and certain risks. Thus although being a joyful and empowering experience it can end with negative and tragic results, leaving the woman filled with fear and anxiety for future birth. Massage stimulate the body to release endorphins, which are natural pain killing substances and stimulates for the production of oxytocin, decrease stress hormones and neurological excitability.¹¹ Endorphins are endogenous opioid polypeptide compounds. They are produced by the pituitary gland and the hypothalamus in vertebrates during strenuous exercise, and they resemble the opiates in their abilities to produce analgesia and sense of wellbeing.¹²

Research literature were reviewed and organized under the following headings.

- Section A: Literature related to first stage of labor
- Section B: Literature related to perception of labor pain
- Section C: Literature related to non-pharmacological pain relief intervention during first stage of labor.
- Section D: Literature pertaining to back massage as a complementary therapy for pain management in labor.

Literature Related To First Stage Of Labor:

Friedman and Sachtleben 1965, Pearson 1981 the cervicograph in the diagrammatic representation of the cervix charted against the hours in labor. Some studies have shown that the cervical dilatation time of normal labor has a characteristic sigmoid curve. The curve can be divided into two distinct parts- the latent phase and the active phase. The active phase has been said to proceed at a rate 0.5 to 1 cm per hour. But more recent work has challenged the rigid view (Albers 1999, Lavender et al 2006).

Green JM and Baston HA. (2003) stated that self-control was the foremost cause to a woman's experience of childbirth and it results in succeeding the well-being of the mother. Feedback form was sent to the participants 1 month prior to their birth to appraise their priority and expectations. The study revealed that parity was strongly associated with the childbirth experience as the multipara had their own experience where as primipara had the imagination about the pain experience, since the primipara had less satisfaction and more painful experience of childbirth than multipara women. This study also suggested that care givers also influence the experience of the pain during childbirth. Both self-satisfaction and caregivers love together contributing to satisfaction and emotional well-being after childbirth.³¹

Literature Related To Perception Of Labour Pain

Meharunnisa K Shahla B (2010) conducted a descriptive study to examine the women's self-perception of labour pain, understanding satisfaction during child birth with 400 laboring women at Liaquat University Hospital Hyderabad. Four hundred low risk healthy labouring women were participated in the study. All the complicated and high risk mothers were debarred from the investigation. The study showed that majority of women experienced the child birth was an exhausting experience and few were reported that the childbirth was an acceptable pain experience. Finally it was concluded that childbirth can be an excellent occurrence with efficient prenatal counseling. A high skilled approach and tender loving care may be the solution to a painless childbirth.²⁶

O. Kuti, and A.F. Faponle (2006) assessed the mothers' sensitivity of pain during labour and to find out the factors influencing the pain. Throughout the course of study, 281 participants who had normal delivery were questioned before 2 hours after childbirth; it was to evaluate the cruelty of labour pain and also recognize there need for analgesia. Intensity of pain during childbirth was recorded by the use of a three point verbal rating scale. Most of the women were described that labour pain was severe and only few described was not severe. Majority (86%) of the participants wished to have any pain relief methods during child birth. The study also suggested that demographic variables like age, parity and educational level were not having association with labour pain. It depends only on perception and pain tolerance of women.²⁷

Literature Related To Non- Pharmacological Pain Relief Intervention:

Skilnand et al (2002) conducted study acupuncture in the management of pain in labour. 210 parturient were randomly assigned to receive either real acupuncture or false acupuncture. Real acupuncture consisted of a treatment protocol from the Norwegian school of Acupuncture. The same type and number of needles were used not on the classic meridians. Pain was assessed using a linear VAS (rated 0-10) recorded at 30, 60 and 120 min after treatment. There were significantly lower pain scores at 30, 60, 120 min after treatment ($P < 0.001$).³⁴

Chuntharapt, Petpichechian and Hatthakit (2008) conducted a randomized trail on yoga during pregnancy in terms of maternal comfort and perception of labor pain. 74 prim gravida women were studied. The study reported that the experimental group had less pain perception and shorter duration of the first stage of labor than the control group. Aromatherapy uses essential oils extracted from aromatic sources to treat and balance the mind, body and spirit.⁸

Literature Pertaining To Back Massage As A Complementary Therapy For Pain Management In Labor:

Habeed Saima Jeelani and Chhughani Manju (2018) conducted a quasi-experimental research study on effectiveness of back massage on pain perception among primigravida mothers during first stage of labour. The sample consist of 30 prim gravida women selected randomly from labour wards of selected hospital of J & K. the findings indicated that back massage helped in reduction of labour pain level in experimental group & the mother perceived less pain. Provision of back massage was effective in the reduction of labour pain.³⁹

Sethi D et al. (2017) conducted a pre- experimental study to evaluate the effectiveness of back massage on pain among pregnant women in first stage of labor pains in a selected Hospital, Ludhiana, and Punjab. The objectives of the study were to assess the pre-test level of pain in first stage of labor pains among pregnant women, to administer the back massage in first stage of labor pains, to assess the post- test level of pain and to compare the pre-test and post-test level of pain in first stage of labor pains among pregnant women and to determine the relationship of pre-test and post- test level of pain with the selected demographic variables. Findings of the study were in the pre- test mean score was 5.83 and post- test mean score was 3.75 which was statistically highly significant at $p < 0.01$ level. Gravida had significant impact on level of pain. Back massage had impact on level of pain among pregnant women.⁴

CONCLUSION

Labor pain is the one of the most severe human pains, which has physiological and psychological side effects on pregnant women and their fetuses. One of the most ancient complementary methods used to relive labor pain massage.²¹

Labor is a frightening experience for many pregnant woman. There are a variety of methods through which to cope with pain. Some of these methods work by carrying labor pain. Naturally rather than medically. Pharmacological and complementary pain management strategies provide woman with specific techniques they can use to cope up with discomfort of labor, thereby increasing their feeling of pain control.²²

This article dealt with the review of literature adopted for the study. It included Review of literature related to first stage of labour, perception of labour pain, non-pharmacological pain relief intervention during first stage of labour and back massage as a complementary therapy for pain management in labour.

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