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Original Research Paper

Medical Education

A STUDY TO ASSESS THE EFFECTIVENESS OF SCREENING PROGRAMME IN DETECTING THE PREDICTORS OF STILLBIRTH AMONG HIGH RISK ANTENATAL MOTHERS, AT SMVMCH, PUDUCHERRY

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ABSTRACT Worldwide prevention of most stillbirths is possible with improved health systems. About half of stillbirths occur during childbirth, with this being more common in the developing than developed world. Otherwise depending on how far along the pregnancy is, medications may be used to start labor or a type of surgery known as dilation and evacuation may be carried out. **Objectives:**To assess the effectiveness of screening programme in detecting the predictors of stillbirth among high risk antenatal mothers by using predictors of stillbirth tool. To associate the predictors of stillbirth among high risk antenatal mothers with selected demographic variables. **Methodology:** A survey research design was conducted among 53 high risk antenatal mothers in SMVMCH at Puducherry . Tool was developed and modified as per expert suggestion for collecting data. Checklist questionnaire containing 39 questions for identifying detecting the predictors of stillbirth among high risk antenatal mothers. **Conclusion:** From the finding it is concluded that high risk antenatal mothers are they do not known about the stillbirth. This screening programme are very helpful to detect the high risk antenatal mothers. Out of 53 samples majority of the high risk antenatal mothers 25 (47.2%) had moderate level of risk, some of them 21 (39.6%) had mild level of risk and less mothers 7 (13.2%) had severe level of risk. The study shows that high risk antenatal mothers is significant association with demographic variables such as religion, gravida, booking status and socio economic status.

KEYWORDS : Predictors, Stillbirth, Screening Programme, High Risk Antenatal Mothers.

INTRODUCTION

Stillbirth is typically defined as fetal death at or after 20 to 28 weeks of pregnancy (depending on the source). It results in a baby born without signs of life. A stillbirth can result in the feeling of guilt or grief in the mother. The term is in contrast to miscarriage, which is an early pregnancy loss, and live birth, where the baby is born alive, even if it dies shortly after. A high-risk pregnancy (HRP) is one in which the maternal environment or past reproductive performance presents a significant risk to fetal well-being, such as premature birth, small for date infant, full term with low reservoir, or still births and early neonatal death. Identification of patients at risk for these complicated pregnancies with poor outcome is fundamental to antenatal care. Detection of HRP by developing a risk scoring system prioritizes the action for needy individuals especially in developing countries with scanty resources. It is essential that extra care be provided at least those who deserve it most

OBJECTIVES

1. To assess the effectiveness of screening programme in detecting the predictors of stillbirth among high risk antenatal mothers by using predictors of stillbirth tool
2. To associate the predictors of stillbirth among high risk antenatal mothers with selected demographic variables

METHODOLOGY

A Study to Assess the Effectiveness of Screening Programme in Detecting the Predictors of Stillbirth Among High Risk Antenatal Mothers, at SMVMCH, Puducherry"

A survey research design was adopted for this study.in which a total of 53 high risk antenatal mothers who met inclusion criteria was selected by using purposive sampling techniques. To assess the effectiveness of screening programme in detecting the predictors of stillbirth among high risk antenatal mothers. Tool was developed and modified as per expert suggestion for collecting data. Checklist questionnaire containing 39 questions for identifying detecting the predictors of stillbirth among high risk antenatal mothers.The level of predictors of stillbirth among high risk antenatal mothers. Majority of the mothers 25 (47.2%) had moderate level of risk, 21 (39.6%) had mild level of risk and less mothers 7 (13.2%) had severe level of risk respectively. The mean and standard deviation of the level of predictors of stillbirth among high risk antenatal mothers is (19.11±7.765) respectively. The investigator first introduce herself to the homemakers and develop a good rapport with them. The investigators explained the purpose of the study. The data collection done by structured interview method a separate questionnaires for identifying high risk antenatal mother and predictors of still birth among high risk antenatal mother and health education was given for the high risk mother , similarly 30 minutes spend for each mothers.

Major Finding of the Study

Table – 1: Reveals that, In Frequency and Percentage wise Distribution of the demographic variables among high risk antenatal mothers. Out of the 53 high risk antenatal mothers who were interviewed, majority of the high risk antenatal mothers 20 (37.7%) were in the age group 26-30 years. Most of them 44 (83%) belonged to Hindu. Majority 22 (41.5%) completed in secondary and graduate level. Majority 21 (39.6%) belonged to Rs.5000–10000 income. Most of them 38 (71.7%) belonged to private employee in occupation. Most of them 30 (56.6%) belonged to joint family.

Majority were under rural area 43 (81.1%). Majority 42(79.2%) of gestation weeks in third trimester was 35-40 weeks. Majority 38(71.7%) of gravida was multi-mother. Majority 24(45.3%) of Body Mass Index was 25-30. Most of them 52(98.1%) belonged to booked status. Most of them 24(45.3%) belonged to upper middle class. Most of them 52(98.1%) had no information obtained for stillbirth.

Table 2: Frequency and Percentage Wise Distribution of Identifying the High Risk Mothers.

Table 2: Reveals that, Frequency and Percentage wise Distribution of identifying the high risk mothers. In antenatal high mothers, majority of them responded no, History of elderly primi (30 years and over) 53 (100%). History of previous cesarean section or instrumental delivery 27 (50.9%). History of ma lpresentation during pregnancy 53 (100%). History of hyperglycemia during pregnancy 52 (98.1%). Short stature mother less than 140cm 53 (100%). History of antepartum haemorrhage 53 (100%). History of threatened abortion 53 (100%). History of eclampsia 50 (94.3%). History of anaemia 44 (83%). History of polyhydromnios, oligohydromnios 53 (0%). History of previous stillbirth, intra uterine death, manual removal of placenta 52 (98.1%). History of grand multipara 53 (100%). History of twins 51 (96.2%). History of prolonged

pregnancy 51 (100%). History of treatment for infertility 53 (100%). History of three or more spontaneous consecutive abortion 53 (100%). History of RH negative factor for pregnancy 52 (98.1%). History of consanguineous marriage 33 (62.3) and Pregnancy associated with general diseases (e.g) communicable and non – communicable diseases 53 (100%).

Table 3: Frequency and Percentage Wise Distribution of Level of Predictors of Stillbirth Among High Risk Antenatal Mothers. (n=53)

LEVEL OF RISK	FREQUENCY N	PER CENTAGE %
Mild risk (0-13)	21	39.6
Moderate risk (14 - 26)	25	47.2
Severe risk (27- 39)	7	13.2

Table –3 Frequency and percentage wise distribution of level of predictors of stillbirth among high risk antenatal mothers. Majority of the mothers had moderate level of risk 25 (47.2%), 21 (39.6%) had mild level of risk and less mothers 7 (13.2%) had severe level of risk respectively.

Table 4: Mean and Standard Deviation of Level of Predictors of Stillbirth Among High Risk Antenatal Mothers. (n=53)

level of predictors of stillbirth among high risk antenatal mothers.	MEAN	S.D
	19.11	7.765

Table –4: Mean and standard deviation of level of predictors of stillbirth among high risk antenatal mothers. The mean and standard deviation of the level of predictors of stillbirth among high risk antenatal mothers is (19.11±7.765) respectively.

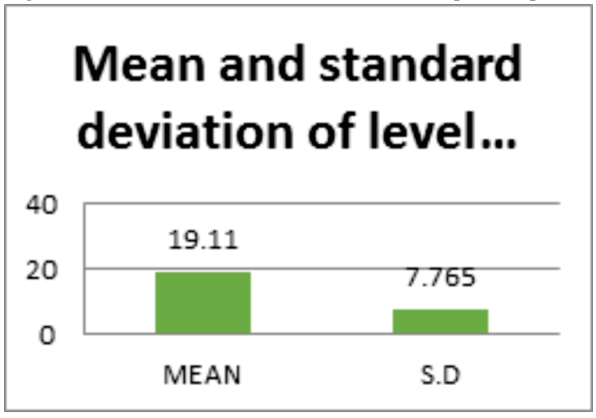

Fig: 15 Mean and Standard Deviation of Level of Predictors of Stillbirth Among High Risk Antenatal Mothers.

Table 5: Association of Level of Predictors of Stillbirth Among High Risk Antenatal Mothers with Selected Demographic Variables.

The table 5 depicts the chi-square is evident that the demographic variable religion, gravida, booking status and socio economic status had shown statistically significant Association of level of predictors of stillbirth among high risk antenatal mothers with chi-square value of (^{2}=12.6, d.f=4), (^{2}=9.80, d.f=4), (^{2}=6.69, d.f=2) and (^{2}=11.6, d.f=6) at $p<0.05$ level respectively.

CONCLUSION

Thus the study findings reveals that high risk antenatal mothers do not known about the stillbirth. This screening programme is very helpful to detect the high risk antenatal mothers. Out of 53 samples, majority of the high risk antenatal mothers 25 (47.2%) had moderate level of risk, some of them 21 (39.6%) had mild level of risk and less mothers and 7 (13.2%) had severe level of risk. The study shows that high risk antenatal mothers is significantly associated with demographic variables such as religion, gravida, booking status and socio economic status.

Recommendation

Based on the findings of the present study, the following recommendation have been made,

- The same study can be conducted in different settings
- The study can be replicated with larger samples for better generalization

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