



## Importance of Pain Relief During Labour-A Survey Among Antenatal Patients

### KEYWORDS

antenatal patients, labour analgesia

### Maria Issac

Anesthesiology Department,  
Yenepoya medical College,  
Manglore \* CORRESPONDING  
AUTHOR

### S.Padmanabha

Anesthesiology Department,  
Yenepoya medical College,  
Manglore

### Alex Baby Paul

Geriatric medicine Department,  
Amrita institute of medical  
science,Kochi

**ABSTRACT** Child birth no doubt is associated with severe pain. A variety of labour analgesia options are available, but the awareness and attitude towards pain free labour is not well studied in developing countries. This study is done to assess knowledge about pain free labour and their attitude towards it. A questionnaire based study involving 82 antenatal patients over period of 2 months conducted to evaluate knowledge and awareness of labour analgesia. All 82 antenatal patients were anxious about facing labour pains while most of the patients are unaware about pain free labour. Majority are from rural areas and after awareness, most of them prefer to have painless labour. Awareness among antenatal women about labour analgesia was found to be inadequate, indicating the need of spreading knowledge among patients coming for antenatal checkup.

### Introduction

The most prestigious and rewarding moment for the doctor is to see a mother who delivers her child without experiencing any pain. The excruciating nature of pain of labour makes it an experience most women want to avoid. As more expectant mothers become aware of the possibility of pain-free labor and their expectations for use of pain relief agents during labor bound to increase. Painless labour is well established in developed countries. Knowledge and awareness about pain free labour in developing countries is not well understood where high parity and shorter interval between pregnancy are common. However, little information is available on what women know about the choices available to them. This study hopes to raise conversations on the perspectives of expectant mothers on pain relief utilization in labor.

This study is done to evaluate the knowledge of antenatal women about pain free labour and their attitude towards labour pain.

### METHODS

This study is conducted among antenatal women in Yenepoya medical college, Mangalore, Karnataka, India. Total population survey include 82 antenatal patients. It was a questionnaire based study consists of 8 questions helping to evaluate knowledge about painless labour in comparison with their age, education, religion, occupation, residence, parity, also reveals their attitude towards facing labour pain and approach towards labour analgesia.

TABLE 1: DEMOGRAPHIC DATA

	Fre-quency	Percent-age	Valid Per-centage	Cumulative Percentage
Religion				
Hindu	22	27.2	27.2	27.2
Muslim	58	71.6	71.6	98.8
Christian	1	1.2	1.2	100.0
Total	81	100.0	100.0	
Education				
Primary	31	38.3	38.3	38.3
Second-ary	42	51.9	51.9	90.1

Under-graduate	8	9.9	9.9	100.0
Total	81	100.0	100.0	
Occupation				
Home-maker	60	74.1	74.1	74.1
Self-em-ployed	8	9.9	9.9	84.0
Service	3	3.7	3.7	87.7
Labour	10	12.3	12.3	100.0
Total	81	100.0	100.0	
Resi-dence				
Urban	2	2.5	2.5	2.5
Rural	79	97.5	97.5	100.0
Total	81	100.0	100.0	
Age				
20-25 years	36	44.4	44.4	44.4
26-30 years	37	45.7	45.7	90.1
31-35 years	6	7.4	7.4	97.5
35 years and above	2	2.5	2.5	100.0
Total	81	100.0	100.0	
NUMBER OF PAST PREGNANCIES				
Nil	10	12.3	12.3	12.3
One in the past	32	39.5	39.5	51.9
Two in the past	32	39.5	39.5	91.4
Three in the past	4	4.9	4.9	96.3
Four in the past	3	3.7	3.7	100.0
Total	81	100.0	100.0	

TABLE 2

PAIN SCORE				
	Fre-quency	Percentage	Valid Per-centage	Cumu-lative Percentage

7	5	6.2	6.2	6.2	
8	30	37.0	37.0	43.2	
9	46	56.8	56.8	100.0	
Total	81	100.0	100.0		
ATTITUDE TOWARDS PAINFREE LABOUR					
	Fre-quency	Percentage	Valid Per-cent-age	Cumu-lative Per-cent-age	
Anxious	81	100.0	100.0	100.0	
KNOWLEDGE ABOUT PAINFREE LABOUR					
	Fre-quency	Percentage	Valid Per-cent-age	Cumu-lative Per-cent-age	
Aware	4	4.9	4.9	4.9	
Not aware	77	95.1	95.1	100.0	
Total	81	100.0	100.0		
WHEN THEY CAME TO KNOW ABOUT PAINFREE LABOUR – DURING CURRENT PREGNANCY OR PREVIOUS PREGNANCY					
	Fre-quency	Percentage	Valid Per-cent-age	Cumu-lative Per-cent-age	
Patients who are not aware before	75	92.6	92.6	92.6	
During current pregnancy	6	7.4	7.4	100.0	
Total	81	100.0	100.0		
AWARENESS OF DIFFERENT METHODS OF PROVIDING PAIN FREE LABOUR					
	Fre-quency	Percentage	Valid Per-cent-age	Cumu-lative Per-cent-age	
Patients who are not aware	75	92.6	92.6	92.6	
Injection in the back(epidural)	5	6.2	6.2	98.8	
IV medications (pethidine/morphine etc)	1	1.2	1.2	100.0	
Total	81	100.0	100.0		

INFORMATION SOURCE FOR PAINLESS LABOUR						
	Fre-quency	Percent-age	Valid Per-cent-age	Cumulative Percentage		
Not heard	Hospital	1	1.2	1.2	93.8	
	Internet	1	1.2	1.2	95.1	
	Friends and relative	4	4.9	4.9	100.0	
	Total	81	100.0	100.0		
	KNOWLEDGE ABOUT WHO IMPLIMENTS PAINLESS LABOUR					
	Fre-quency	Percent-age	Valid Per-cent-age	Cumulative Percentage		
Not aware	Any doctor	2	2.5	2.5	95.1	
	Anesthesiologist	1	1.2	1.2	96.3	
	Don't know	3	3.7	3.7	100.0	
	Total	81	100.0	100.0		
	THOSE WHO PREFER PAINFREE LABOUR					
	Fre-quency	Percent-age	Valid Per-cent-age	Cumulative Percentage		

Yes	75	92.6	92.6	92.6		
No	6	7.4	7.4	100.0		
Total	81	100.0	100.0			
REASONS FOR RELUCTANCE IN ACCEPTING PAINFREE LABOUR						
	Fre-quency	Percent-age	Valid Per-cent-age	Cumulative Percentage		
People who prefer labour analgesia	Wanted a normal labour	1	1.2	1.2	93.8	
	It is harmful to the baby	5	6.2	6.2	100.0	
	Total	81	100.0	100.0		

TABLE 3

III. RESULTS

A set of questionnaire was given to 82 antenatal patients who were willing to participate in our survey, 45.7% of them belong to age group between 26 to 30 years, 44.4% under age group between 20 to 25 years, 7.4% under 31 to 35 years. Majority of them belong to Muslim community 71.6%, Hindu 27.2% and Christian 1.2%.

Most of our patients were from rural areas 97.5% and only 2.5% from urban areas. Majority of them had completed their secondary education 51.9%,primary education 38.3% and undergraduate 9.9%.Most of them were homemaker 74.1%,Labour 12.3%,self-employed 9.9% and service 3.7%. Primigravidas were 12.3%, Second gravidas 39.5% ,Third gravidas 39.5% ,Fourth gravidas 4.9% and Fifth gravidas 3.7% .

We had given them a visual analogue scale indicating severity of pain with pain score from zero to ten where zero represents no pain and ten represents severe pain. Majority of them 56.8% had given a score of 9, score of 8 by 37% and 6.2% of them giving a score of 7. Attitude towards labour pain were elicited by asking if they are anxious or confident for experiencing labour pain, we got 100% result of patients being anxious for experiencing labour pain.

Only 4.9% of them know about pain free labour and remaining 95.1% of them were unaware about the same. All of those who know about pain free labour, they came to know about it only during current pregnancy.92.6% of patients don't know about methods by which labour analgesia is provided, 6.2% told that labour analgesia is provided through injection in the back, where 1.2% of them through intravenous medications.4.9% of patients got information about pain free labour from friends and relatives,1.2% from hospital and 1.2% from internet. 3.7% of people are unaware about the person who provides labour analgesia, 2.5% of them know that any doctor can administer labour analgesia and only 1.2% knows that anaesthesiologist provides labour analgesia.

After explaining about pain free labour to all 82 patients, 92.6% of them prefer pain free labour while 7.4 % of them didn't prefer. 6.2% of them were thinking that its harmful for the baby and 1.2% of them told a reason to have a normal labour for not choosing pain free labour.

#### IV. DISCUSSION

Labour results in severe pain for many women. The first stage of labour starts with onset of regular strong uterine contractions causing cervical dilation. The pain of this stage is visceral in nature, through different nerve supply of uterus via sympathetic nerves and it is referred to dermatomes supplied by T10-L1 spinal nerves. The second stage of labour starts from full dilatation until delivery of baby. This pain is somatic in nature due to pressure of presenting part of the Fetus leading to distension of outlet and perineum which causes intense stretching of the fascia and subcutaneous tissues. The peripheral somatic nerve pathways are carried via Pudendal nerve that is derived from posterior roots of S2 S3 and S4 spinal segments.

Our study showed that only very few patients know about pain free labour 4.9% while majority 95.1% are unaware of pain free labour which reflect on lack of knowledge about getting pain free labour in a population where they have got a positive attitude for receiving painless labour with only 7.4% patients who doesn't prefer labour analgesia, among them 6.2% thinks that its harmful for the baby and 1.2% patients things that normal labour is not possible with labour analgesia.

Among those who know about painless labour, their knowledge was found to be unsatisfactory where 3.7% don't know who provides labour analgesia while 2.5% patients think any doctor can provide and only 1.2% of them knows that anaesthesiologist provide labour analgesia. 6.2% of patients knows about epidurals and 1.2% of patients knows about intravenous medications for providing analgesia.

This study was confined to patients where most of them where from a rural background 97.5% and only 2.5% from a urban area, with education status of more secondary followed by primary with less undergraduates.

Only few of them are aware and majority gained knowledge through friends and relatives 4.9%, hospital 1.2% and internet 1.2% showing relevance of spreading awareness among patients coming for antenatal clinic.

Irrespective of having opinion that labour is most painful experience with majority of patients 56.8% expressed pain score of 9, score of 8 by 37% and score of 7 by 6.2%, their knowledge towards painless labour is limited.

#### V. Conclusion

As stated by Hippocrates, "Divine is the task to relieve pain", its divine to provide mother to have a pain free labour. A total of 82 antenatal patients were studied, where awareness about painless labour was found to be inadequate indicating the relevance of providing more awareness among them.

#### References

- [1] Ogboli-Nwasor EO, Adaji SE. Between pain and pleasure: pregnant women's knowledge and preferences for pain relief in labor, a pilot study from Zaria, Northern Nigeria. *Saudi j of anaesthesia*. 2014;8(1):20-4.
- [2] Oladokun A, Eyelade O, Morhason-Bello I, Fadare O, Akinyemi J, Adedokun B. awareness and desirability of labor epidural analgesia: a survey of Nigerian women. *Int J of Obstet Anesth*. 2009;18(1):38-42.
- [3] James JN, prakashKS, PonniahM. Awareness and attitudes towards labour pain and labour pain relief of urban women attending a private antenatal clinic in Chennai, india. *Indian J Anaesth*. 2012;56(2):195-8.
- [4] Nabkenya MT, Kintu A, Wabule A, Musingo MT, Kwizeria. A knowledge, attitude and use of labour analgesia among women at a low-income country antenatal clinic. *BMC Anesthesiol*. 2015;15-98.
- [5] Barakzai A, Haider G, Yousuf F et al. Awareness of women regarding analgesia during labour. *J Ayub Med Coll Abbottabad* 2010; 22(1):73-5.