



Hospital Management

ASSESSMENT ON KNOWLEDGE REGARDING ANAEMIA AMONG POSTNATAL MOTHERS

M. Suriyha*

Student, MBA in Hospital Management, Annamalai University, Chidambaram, Tamilnadu, India *Corresponding Author

Junior Sundresh

Associate Professor of Surgery, Raja Muthiah Medical College, Annamalai University, Chidambaram, Tamilnadu, India

ABSTRACT**Aim:** To assess the knowledge regarding anaemia among postnatal mothers.**Methods:** Women attending the postnatal OPD were asked to fill a questionnaire regarding anemia during antenatal so as to test their knowledge, attitudes and practices pertaining to anemia and role of their diet.**Results:** During the pretest the majority of 20 (45%) postnatal mothers scored extremely poor knowledge, 15 postnatal mothers (33%) scored inadequate knowledge and 3 (7%) postnatal mothers scored moderate knowledge regarding anaemia. During the post test the majority of postnatal mothers 28 (62%) had shown improved to adequate knowledge, 15 (33.33%) postnatal mothers had moderate knowledge and no one scored inadequate knowledge regarding anemia.**Conclusion:** Educating antenatal women about the importance of diet and implementing this into practice will help in the prevention of anemia.**KEYWORDS :** Anemia, Knowledge, postnatal mothers**INTRODUCTION**

Anemia, also spelled anaemia, is usually defined as a decrease in the total amount of red blood cells (RBCs) or hemoglobin in the blood. It can also be defined as a lowered ability of the blood to carry oxygen. When anemia comes on slowly, the symptoms are often vague and may include feeling tired, weakness, shortness of breath or a poor ability to exercise. Anemia that comes on quickly often has greater symptoms, which may include confusion, feeling like one is going to pass out, loss of consciousness, or increased thirst. Anemia must be significant before a person becomes noticeably pale. Anaemia in pregnancy is one of the leading causes responsible for maternal and perinatal morbidity and mortality. WHO has estimated that prevalence of anaemia among pregnant women is 14% in developed and 51% in developing countries. 65-75% of population in India is affected with anaemia. In India; anaemia is directly or indirectly responsible for 40 per cent of maternal deaths. There is 8 to 10 fold increase in MMR when the Hb falls below 5 g/dl. Early detection and effective management of anaemia in pregnancy can contribute substantially to reduction in maternal mortality. Maternal anaemia is associated with poor intrauterine growth and increased risk of preterm births and low birth weight rates.

AIM

To assess the knowledge regarding anaemia among postnatal mothers.

MATERIALS AND METHODS

Knowledge and practice during antenatal was assessed using structured interview schedule which included questionnaire on knowledge and self reported rating scale to assess the practice regarding prevention of anaemia. Descriptive and inferential statistics was used to analyze the data. All the primigravida attending the postnatal OPD will be asked to fill a questionnaire regarding anemia during antenatal so as to test their knowledge, attitudes and practices pertaining to (a) Dietary sources of iron (b) Consumption of iron rich food (c) Consequences of low hemoglobin count in mother (maternal complications of anemia) (d) Effects of anemia on fetus and pregnancy outcome (e) Assessing their drug compliance (f) Importance of high protein diet in the correction of anemia (g) Sources of knowledge.

RESULTS

Age of the postnatal mother: Out of 45 samples 18 (40%) postnatal mothers belong to 30 - 35 years of age, 15 (33%) postnatal mothers belong to 21-24 years of age and 12(27%) postnatal mothers belong to 25-29 years of age. Educational status reveals that ,out of 45 postnatal mothers, the majority of postnatal mothers 23 (51%) had higher secondary education,12(27%) postnatal mothers were graduates, 6 (13%) postnatal mothers had primary education,4(9%) postnatal mothers were post graduates and none of them were illiterate. Occupational status results shows that, the majority 27 (60%) of

postnatal mothers are homemakers,6 (13%)postnatal mothers are doing business, 4 (9%) postnatal mothers are working as clerks, 3 (7%) postnatal mothers are teachers and tailors respectively and one postnatal mothers was a bank accountant and pharmacist respectively. Monthly income of families results shows that, the majority of 19 (42%) postnatal mothers family income was above Rs.15000/-, 16 (36%) postnatal mothers family income ranged between Rs.10000-15000/-, 8 (18%) postnatal mothers family income ranged between Rs.5000-10000/-, and 2 (4%) postnatal mothers family income was below Rs.5000/-. Number or children results depicts that ,more than half of the postnatal mothers 25 (56%) have one children, 15 (33%) have single child, 3 (7%) have 2 children and 2 (4%) have 3 children. The comparison of the level of knowledge regarding anaemia before and after administration of questionnaires. Result shows that, during the pretest the majority of 20 (45%) postnatal mothers scored extremely poor knowledge, 15 postnatal mothers (33%) scored inadequate knowledge and 3 (7%) postnatal mothers scored moderate knowledge regarding anaemia. During the post test the majority of postnatal mothers 28 (62%) had shown improved to adequate knowledge, 15 (33.33%) postnatal mothers had moderate knowledge and no one scored inadequate knowledge regarding anemia.

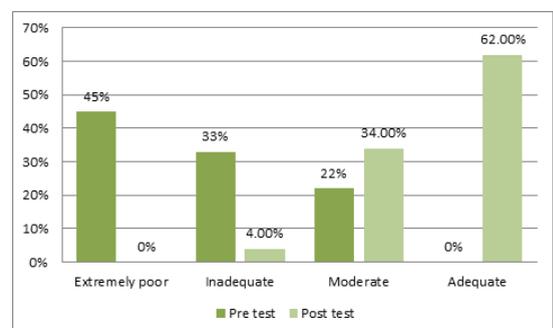


Figure 1 Comparison on the level of Knowledge regarding anaemia

CONCLUSION

Our study supports the conclusion that educating postnatal women about the importance of diet and implementing this into practice will help in the prevention of anemia. There should be mandatory preconception and postnatal counselling sessions for the women to identify the risk factors in pregnancy and structured teachings to reduce the enormous burden of anemia in pregnancy. Continuous reinforcement of knowledge to women by health workers may bring about a change in their nutritional habits, adopting contraceptive methods, and ensuring early registration and regular follow up which will go a long way to help in reducing the incidence of anemia.

REFERENCES

1. Sivapriya SM, Parida L. A study to assess the knowledge and practices regarding prevention of anemia among antenatal women attending a tertiary level hospital in Pune. *IJSR NET*. 2015;4(3):1210-14.
2. Khan KS, Wojdyla D, Say L, Gülmezoglu AM, Van Look PF. WHO analysis of causes of maternal death: a systematic review. *Lancet*. 2006;367:1066-74.
3. Alam AY, Qureshi AA, Adil MM, Ali H. Comparative study of knowledge, attitude and practices among antenatal care facilities utilizing and non-utilizing women. *J Pak Med ASSoc*. 2005;55(2):53-6.
4. Kulkarni KK. KAP study among Indian antenatal women: can we reduce the incidence of anemia? *The J Obstetr Gynecol India*. 2015;65(5):320-2.
5. Benoist DB, Mclean E, Egli I, Cogswell M. Worldwide prevalence of anemia 1993-2005: WHO Global Database on Anemia 2008.
6. Rizvi F. Impact of maternal education, and socioeconomic status on maternal nutritional knowledge and practices regarding iron rich foods and iron supplements. *Ann Pak Inst Med Sci*. 2012;8(2):101-5.
7. Kalaivani K. Prevalence and consequences of anemia in pregnancy. *Indian J Med Res*. 2009;130(5):627-33.
8. Sanghvi TG, Harvey PW, Wainwright E. Maternal iron-folic acid supplementation program: evidence of impact and implementation. *Food Nutr Bull*. 2010;31(2):100-7.
9. Noronha JA, Khasawneh EA, Seshan V, Ramasubramaniam S, Raman S. Anemia in pregnancy- consequences and challenges: A review of literature. *J SAFOG*. 2012;4(1):64-70.
10. Yajnik C, Coyaji K, Joglikar C, Kinare A, Rao S. Pune maternal and nutrition study. *Fife Epidemiology Unit* 2010.