



CHANGING TRENDS IN THE KNOWLEDGE, ATTITUDE AND PRACTICE TOWARDS COVID 19 MANAGEMENT IN PREGNANT WOMEN AMONG MEDICAL PROFESSIONAL

Obstetrics & Gynaecology

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ABSTRACT

COVID 19 pandemic is more stressful period for antenatal and postnatal women. There is limited evidence and research about the effect of COVID 19 in pregnant women and fetus since it is a new pandemic. Knowledge, attitude and practice regarding COVID 19 management and breast feeding assessed by online questionnaire. Analysed at two different period April 2020 and October 2020 and the data compared by proper statistical analysis. Study population included only medical professional. This study shows that based on the research and data, knowledge, attitude and practice keeps changing.

KEYWORDS

INTRODUCTION:

Coronaviruses (CoVs) represent a major group of viruses mostly affecting human beings through zoonotic transmission. This disease was named as COVID-19 by the WHO, and the causative virus was named as SARS-CoV-2 by the International Committee on Taxonomy of Viruses. This problem started as a single animal-to-human transmission in Wuhan, and was followed by continued human-to-human spread. Sustained local transmission of the disease all over the world led the WHO to declare COVID-19 as a pandemic. The Incubation Period (IP) of COVID-19 is about 1–14 days, and the period from the onset of symptoms to death was estimated to range from 6 to 41 days.

The sources of infection are patients with symptomatic COVID-19 and asymptomatic patients and patients in IP who are carriers of SARS-CoV-2. According to a study done in Wuhan city, the most common symptoms of COVID-19 were fever, fatigue, dry cough, myalgias, and dyspnea. Of the confirmed cases, 81% suffered mild to moderate disease, 14% suffered severe disease, and only 5% suffered critical illness, with an overall case fatality rate ranging from 2.3% to 5%. Recovery in mild cases occurred after 1 week, while in severe cases, death may be the fate. Those who were at a higher risk for severe illness and death were patients with age >60 years and those having pre-existing diseases as hypertension, diabetes, etc.

The overall risk of COVID-19 to pregnant women is low. However, pregnancy increases the risk for severe illness with COVID-19. Pregnant women who have COVID-19 appear more likely to develop respiratory complications requiring intensive care than women who aren't pregnant, according to the Centers for Disease Control and Prevention. Pregnant women are also more likely to be placed on a ventilator. In addition, pregnant women who are Black or Hispanic appear to be disproportionately affected by infection with the COVID-19 virus.

KAP is an important cognitive key in public health regarding health prevention and promotion. It involves a range of beliefs about the causes of the disease and exacerbating factors, identification of symptoms, and available methods of treatments and consequences. Beliefs about COVID-19 come from different sources, such as stereotypes concerning similar viral diseases, governmental information, social media and internet, previous personal experiences, and medical sources. The accuracy of these beliefs may determine different behaviors about prevention and could vary in the population. In many cases, the absence of knowledge, or if most of the medical-related beliefs are actually misconstrued or false, these may carry a potential risk. In Hubei, China, one of the first studies analyzing attitudes and knowledge about COVID-19 concluded that attitudes towards government measures to contain the epidemic were highly associated with the level of knowledge about COVID-19. The authors reported that higher levels of information and education were associated with more positive attitudes towards COVID-19 preventive practices

METHODOLOGY:

This is a cross sectional comparative study done among medical professional in analysing knowledge, attitude and practice towards covid 19 management in pregnant women. The online questionnaire was developed and administered to medical professional of sree balaji medical college and hospital through email in April 2020 and October 2020. Number of responses received were 520, after a period in October 2020 same questionnaire was sent to same professional and were asked for response. Number of response received were 480 and so the non responder for second data collection were excluded from the study.

Datas were entered in Microsoft excel 2019 and statistical analysis was done using Epi info 7.2

Categorical variables are expressed as frequencies and continuous variables are expressed as mean and standard deviation. For comparison of mean scores within groups paired t test were used.

RESULTS:

Table 1: Distribution Of Age, Gender And Qualification Among Study Population

Socio demographic variable		Frequency	Percent
Age Group	18 – 25 years	308	64.2
	25 – 30 years	156	32.5
	More than 30 years	16	3.3
Gender	Female	262	54.6
	Male	218	45.4
Qualification	Medical officer	191	39.8
	Post Graduate	76	15.8
	Undergraduate	213	44.4

Table 2: Distribution Of Knowledge, Attitude And Practice In April 2020

Socio – demographic variables		Mean	F	P value
Gender	Female	10.45 (±1.812)	0.14	0.905
	Male	10.43 (±1.695)		
Qualification	Doctors	10.48 (±1.735)	0.85	0.919
	Post graduate	10.38 (±1.616)		
	Undergraduate	10.43 (±1.833)		

Table 3: Distribution Of Knowledge, Attitude And Practice In October 2020

Socio – demographic variables		Mean	F	P value
Gender	Female	14.70 (±1.888)	2.14	0.144
	Male	14.44 (±2.025)		
Qualification	Doctors	14.95 (±1.735)	6.499	0.002
	Post graduate	14.83 (±1.982)		
	Undergraduate	10.23 (±1.933)		

Table 4: Comparison Of Kap Towards Covid 19 In Pregnant Women Between Two Groups (April 2020 And October 2020)

Scores	Mean ($\pm$ SD)	Minimum	Maximum	T	Df	P value
APRIL 2020	10.44 ($\pm$ 1.758)	5	16	-34.621	479	< 0.001
OCTOBER 2020	14.58 ($\pm$ 1.954)	7	18			

DISCUSSION:

This is a comparative crosssectional study carried out in medical professionals of 480 people. Online questionnaire generated and everyone asked to fill the questionnaire between two different time period of April 2020 and October 2020. This study showed almost equal number of male and female participation.

In this study 64.2% were between age group 18-25 years. In this study, 44% were undergraduate students and 39.8% were medical officer. The knowledge, attitude and practice in the young population can create huge awareness to the community.

DISTRIBUTION OF KNOWLEDGE, ATTITUDE AND PRACTICE IN APRIL 2020 AND OCTOBER 2020:

Analysis in April 2020 showed the mean value in females 10.45(1.812), males 10.43(1.695). The mean value of KAP in doctors 10.48(1.735), undergraduates 10.43(1.833) and post graduates 10.38(1.616).

Analysis in October 2020 showed the mean values in females 14.70(1.888) and males 14.44(2.025). The mean value of KAP in doctors 14.95(1.735), undergraduates 14.23(1.933) and post graduates 14.83(1.982).

COMPARISON OF KNOWLEDGE, ATTITUDE AND PRACTICE BETWEEN TWO GROUPS:

The mean value of April 2020 group is 10.44(1.758) with a minimum difference of 5 and maximum difference of 16. The mean value of October 2020 group is 14.58(1.954) with a minimum difference of 7 and maximum of 18. The difference in mean between two groups is 4.14.

Comparison of both group showed a p value of <0.001 which is statistically significant.

CONCLUSION:

There is a limited data to describe the effect of COVID 19 in pregnant women and fetus. This study shows that there is adequate knowledge, attitude and practice towards COVID 19 among medical professional. Initially when the pandemic was declared, it was suggested as droplet infection, then WHO declared it as air borne infection. Analysis in October 2020 showed 74% of study population were aware of it. Study population has good attitude towards COVID 19 and all the study population has good practice like social distancing, handwashing and wearing mask. Routine awareness and broadcasting made by government and all the initiatives towards management has good impact.