



A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING POLYCYSTIC OVARIAN DISEASE AMONG THE ADOLESCENT GIRLS IN A SELECTED SCHOOL OF INDORE

Nursing

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ABSTRACT

PCOD is a genetically determined ovarian disorder. Excessive exposure to androgens during intrauterine life have a permanent effect on gene expression leading to PCOD and later to insulin resistance. No exact cause of PCOD or PCOS has been found yet, but yes there are certain points, which correlate the cause of PCOD and these are the patient's family history (genetic), her change in lifestyle, lack of daily routine exercise, changes in dietary habits, loss of work-life balance, exposure to environmental pollution, exposure to mobile phone radiations, and the most important of all is stress. Stress levels in humans are increasing day by day and, thus, it has now developed as one of the primary causes of PCOD, which can ultimately lead to a rise in blood pressure (hypertension), diabetes mellitus (most commonly Type-2 diabetes), increased risk of uterine cancer and many cardiovascular diseases. In this study quantitative evaluative approach is used. Pre experimental One group pre-test post-test research design was used. In this study Non probability convenient sampling techniques are used. The size of population is 60 Adolescent girls which were selected according to inclusive and exclusive criteria and who were present at the time of study. They were given a structured teaching programme to give their response to assess the knowledge regarding polycystic ovarian disease. The average (Mean $\pm$ Standard Deviation) knowledge scoring in pre-test to measure the pre-existed knowledge about polycystic ovarian disease found to be 4.37 ± 2.285 points. There was a change noticed in knowledge score at post-test stage and the knowledge score found to be higher after administration of structured teaching programme on knowledge. However, the knowledge score at post-test stage found to be 15.08 ± 2.157 points. The mean difference of 10.71 points in knowledge scoring between pre-test and post-test was statistically strongly significant ($p < 0.001$) which clearly showed the effectiveness of structured teaching programme on knowledge of adolescent girls regarding polycystic ovarian disease.

KEYWORDS

INTRODUCTION -

PCOD is a reproductive and metabolic disorder concerned with the ovaries. An ovary is an active organ that changes its form, appearance, and shape according to its hormonal ambience. PCOD is a condition in which ovary of women of childbearing age is enlarged and starts producing an excessive amount of male hormones (androgens) and is the main cause of infertility, diabetes, irregular menstrual periods, and hirsutism. No exact cause of the disease has been found yet but the change in lifestyle, change in dietary needs, lack of exercise, and the most important of all, i.e. stress level induces the disease. There are medicines, which can induce an artificial menstrual cycle and regulate the level of hormones and ultimately treat the three signs of PCOD i.e. Acne, Hirsutism, and Obesity.

Review Of Literature - National Library of Medicine (NIH), Robin J Bell (2023) Understanding variation in prevalence estimates of polycystic ovarian disease a systematic review and meta-analysis the aim was to investigate the impact on prevalence reporting of different definitions of the clinical elements for PCOD diagnosis. The random-effects pooled prevalence of PCOD in studies that used the NIH criteria (7% [95% CI: 6-7%]), was significantly different from that identified in studies that used the Rotterdam criteria (12% [95% CI: 10-15%], $P < 0.0001$) but not studies that used the AE-PCOD criteria (10% [95% CI: 6-13%], $P = 0.075$). The pooled estimates for Rotterdam and AE-PCOD were not significantly different from each other ($P = 0.201$). Pooled prevalence estimates were compared between studies separated on the basis of: oligo-amenorrhoea vs oligo-amenorrhoea plus short cycles, clinical androgen excess requiring hirsutism vs any clinical androgen excess, use of different versions and cut-offs for the Ferriman-Gallwey (F-G) score, and inclusion vs non-inclusion of oral contraceptive users.

Problem Statement-

A study to assess the effectiveness of structured teaching programme on knowledge regarding polycystic ovarian disease among the adolescent girls in a selected school of indore

1.4 Objectives

1. To assess the pre intervention knowledge score regarding polycystic ovarian disease among the adolescent girls in a selected school of Indore
2. To evaluate the effectiveness of structured teaching programme on polycystic ovarian disease among the adolescent girls in a selected school of Indore

3. To find out the association between pre-interventional and post interventional knowledge score regarding polycystic ovarian disease among the adolescent girls with their selected demographic variable.

Operational Definitions

Effectiveness- In this study effectiveness means objective are achieved and the extent to which a structured teaching programme on knowledge regarding polycystic ovarian disease.

Structured Teaching Programme- In this study structured teaching programme means giving a systematic organized teaching prepared and used by investigator to regarding polycystic ovarian disease

Knowledge- In this study knowledge refers to provide an information regarding Polycystic Ovarian Disease.

Polycystic Ovarian Disease -Polycystic ovarian disease is a condition which leads to enlargement of the ovary and formation of small follicular cysts this disease results in hormonal imbalance leading to the accumulation of mature eggs in the ovary as they cannot be discharged now, these kinds of immature follicles are known as cysts

Adolescent Girl- The World Health Organization (WHO) defines adolescents (or teenagers) as people in the age range of 10-19.

Assumptions-

1. Early adolescent girls may have deficit knowledge regarding polycystic ovarian disease.
2. The structured teaching programme may have improved knowledge of adolescent regarding polycystic ovarian disease
3. The knowledge creates awareness on polycystic ovarian disease among adolescent girls.

1.7 Hypothesis

1.7.1 Null Hypothesis

RH01: - There will be no significance difference between the mean pre-interventional and the mean post-interventional knowledge score regarding polycystic ovarian disease among adolescent girls

RH02: - There will be no significant association between the mean pre-interventional knowledge scores regarding polycystic ovarian disease among adolescent girls with their selected demographic variables.

RH03: - There will be no significant association between the mean post-interventional knowledge scores regarding polycystic ovarian disease among adolescent girls with their selected demographic variables.

1.7.2 Altered Research Hypothesis

RH1: - There will be significance difference between the mean pre-interventional and the mean post-interventional knowledge score regarding polycystic ovarian disease among adolescent girls.

RH2: - There will be significant association between the mean pre-interventional scores regarding polycystic ovarian disease among adolescent girls with their selected demographic variables.

RH3: -There will be significant association between the mean post-interventional scores regarding polycystic ovarian disease among adolescent girls with their selected demographic variables.

1.8 Delimitation

This Study Is Delimited To:

- This study is limited to adolescent girls
- The sample size is limited to 60.
- Data collection period is limited to 4-6 weeks.

Methodology -

In this study quantitative evaluative approach is used. Pre experimental One group pre-test post-test research design was used. In this study Non probability convenient sampling techniques are used. The size of population is 60 Adolescent girls which were selected according to inclusive and exclusive criteria and who were present at the time of study. They were given a structured teaching programme to give their response to assess the knowledge regarding polycystic ovarian disease.

RESULT -

The existing knowledge regarding Danger sign of newborn among mothers of newborn was shown by **pretest score** and it is observed that most of the newborn mothers **04 (6.66%) were poor (0-05)** knowledge, some mothers **52 (86.66%) were average (06- 10)**, some mothers **04 (6.66%) were good (11-15)**, some mothers **00(00%)** were excellent (16-20). And **post test score** was observed that the mothers were **00(00%)** were poor (0- 05) knowledge, mothers **0(00%) were average (06-10)**, 29 mothers **(48.33%) were good (11-15)**, some mothers **31(51.66%)** were excellent (16-20).

CONCLUSION -

The Participant were given a self-structured knowledge questionnaire of 20 questions for assessing the knowledge and skills other than the demographic variable such as Age, gravida, occupational status, educational status, religion nutritional status.

The score was observed by the investigator.

The knowledge gain (mean± Standard Deviation) pre-test score was **7.48±1.71** (Mean ± Standard Deviation) while in knowledge regarding Danger sign of newborn illness at SAIMS hospital Indore (M.P.). Hence, it is confirmed from the tables of section-II that there is an significant difference in mean of test scores which partially fulfill the first and second objective of the present study.

The knowledge in (mean± Standard Deviation) **post test score was 15.16±2.40** while in knowledge regarding Danger sign of newborn illness at SAIMS hospital, Indore (M.P.). Hence, it is confirmed from the tables of section-II that there is a significant difference in mean of test scores which partially fulfill the first second objective of the present study.

Recommendations:

On the basis of the findings of the study following recommendations have been made for further study.

1. Similar study can be conducted in larger sample to generalize findings.
2. A comparative study can be conducted to find out the effectiveness between structured teaching programme regarding the polycystic ovarian disease.
3. A study can be conducted to assess the prevalence of other complication and the risk factors associated with it.

4. A similar study can be carried out by using other teaching strategies, i.e. structured teaching programme, knowledge regarding polycystic ovarian disease.

Limitations Of The Study:

1. This study is limited to adolescent girls in a selected school of Indore.
2. The sample size is limited to 60.
3. Data collection period is limited to 4-6 weeks.

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