A SURVEY ON KNOWLEDGE AND ATTITUDE TOWARDS LABOUR ANALGESIA AMONG PREGNANT WOMEN ATTENDING ANTENATAL CLINIC

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ABSTRACT

Services for labour pain relief are available in most of the centers. The number of patients who demand labour analgesia is remarkably low. The aim of this study was to find out the awareness and attitude of pregnant women towards labour analgesia.

METHODOLOGY

One thirty five pregnant women attending the antenatal clinic of Yenepoya Medical College were approached and those who volunteer to take part in the study were interviewed using a questionnaire that determined their knowledge and attitudes regarding labour analgesia.

RESULTS

Majority of the participants, 63.7% of them belonged to the rural area. Most of them had no idea about labour analgesia, but all the participants expressed their interest to learn about the technique and its advantages. Level of acceptance of labour analgesia after full information was found to be inadequate.

CONCLUSION

Most of the participants suffer from agony of labour pains due to lack of proper knowledge and awareness. The awareness level needs to be improved about the availability of the labour analgesia service.

KEYWORDS


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INTRODUCTION

Labour pain is one of the most severe pains that women experience during their life. Lack of knowledge regarding birth process can influence a woman’s attitude to pain relief. Pain relief management during labour has undergone various advancement since 1847, when Simpson found that chloroform could help relieve the pain during the labour.1 Many pharmacological and non-pharmacological methods have been developed to alleviate the labour pains. Epidural analgesia is the technique capable of relieving labour pain satisfactorily and is the most effective method for restoration of normal uterine activity.2 The patients do not demand for it and the obstetricians are not keen to routinely practice it for several reasons. The important reasons are paucity of qualified anaesthesiologists and budgetary constraints. The existing attitudes and knowledge of obstetricians regarding labour analgesia, emphasized the need for better coordination and communication between the triad of obstetricians, anaesthesiologists and patients.3 This study was designed to assess the pregnant women’s knowledge of pain relief during labour and their beliefs, fears, source of information and misconceptions regarding epidural labour analgesia.

METHODOLOGY

This study was conducted at Yenepoya Medical College, Mangalore city of South India. After obtaining ethical committee clearance, the work was started. One hundred and thirty five pregnant women attending the Antenatal Clinic of Yenepoya Medical College were approached and those who volunteer to take part in the study were given a set of questionnaire. Each pregnant woman was asked to mention their name, age, sex, gestational age, education and then were asked to answer the questionnaire. Each set of questionnaire had twenty one multiple choice questions. Each woman was asked to mark (Encircle) the most appropriate answer. Questions were taken from a study conducted previously by Shidhaye et al. all questions are designed to evaluate the knowledge and attitude towards labor analgesia.1

RESULTS

One hundred and thirty five pregnant patients attending Antenatal Clinic who were willing to participate in the survey were given a set of questionnaire.
Fear of delivery complications: 2.2% of patients had no fear of delivery complications, 5.2% had very little fear, 3% had mild fear, 10% had moderate fear, 95% had much fear, and 3% did not know.

Fear of labour pains: Very much 21%, much 12%, moderate 6%, mild 6%.

Is delivery possible without pains: Yes 66%, no 26%, don’t know 18%.

Duration of last delivery: Twelve to eighteen hours 6%, four to twelve hours 90%, no prior delivery 5%.

Perception of intensity of labour pains: Severe 39%, excruciating 90%, moderate 5%.

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Is delivery possible without pains: Yes 66%, no 26%, don’t know 18%.
Awareness of labour analgesia: 79.3% did not know whether the delivery is possible without pains. Only 20.7% knew that delivery is possible without pain and 79.3% had information about labour analgesia, got it from their neighbourhood, relatives and doctors; 20.7% had little bit information.

Attitude of the participants towards labour analgesia: when we asked whether they would like to deliver without labour pains were 39.3% liked it, 11.9% did not want any labour analgesia. All the participants were ready to listen to the information about labour analgesia. In that 32.6% were ready for labour analgesia, 17.8% were ready to some extent, 49.6% were not at all ready for epidural analgesia. 70.4% were not at all ready to spend money. 29.6% were ready to some extent. 48.9% were ready if it is done without spending money.

Reasons for unwillingness, 30.4% said that labour is a natural process, 20% women were not confident about the procedure; 14.8% had information about other women who delivered by epidural analgesia.

DISCUSSION
Labour pain is the unbearable pain that women experiences during her child birth. Uterine contractions, cervical dilatation and stretching of the lower uterine segment are responsible for pain during the first stage of labour. Visceral afferent C-type fibres accompanying the sympathetic nerves carry the pain impulses and enter the spinal cord at the T10-L1 levels. In the second stage of labour, somatic afferent fibres from the vagina and perineum convey the pain impulses in the pudendal nerves to the S2-S4 spinal nerve roots. This pain can be relieved by labour analgesia. There are many methods to relieve labour pain, of which Epidural labour analgesia is the very effective pharmacological method to relieve the labour pain.5

In our study, most of the patients were from the rural area (63.7%) and all of them could read and write, almost all the patients belonged to lower socioeconomic status where their income was less than Rs. 10000 per month, only 5.2% of the patients had income of more than Rs. 10000 per month.

Only 7 patients in this study were primigravidas and 90.4% of the patients admitted that the labour pains lasted 4 to 12 hours during their last experience; 66.7% of the patients had excruciating pain where remaining patients had moderate pains. A 15.6% of the patients admitted that they had very much fear about complications of labour; 88.9% of the patients had fear of labour pains.

A 60% of the patients did not know that delivery was possible without any pains, only 20.7% of the patients knew that the labour pain can be controlled; 39.3% of the patients wanted to deliver without any labour pains.

All the patients agreed to listen to the information about labour analgesia and after listening to the information about epidural labour analgesia; 32.6% of the patients agreed for epidural analgesia, 49.6% refused for epidural labour analgesia and 17.8% were in doubt if they have to undergo labour analgesia.

A 29.6% of the patients agreed to spend some amount on labour analgesia, but 48.9% agreed for labour analgesia if it was provided for free. Of the patients who were unwilling for labour analgesia, majority of them told that labour is natural process and should be allowed to happen naturally; remaining patients were not confident about the procedure; 14.8% of the patients knew other women who delivered with labour analgesia and only 6.7% of the women were satisfied.

CONCLUSION
A total of 135 patients were studied and we conclude that awareness and knowledge regarding labour analgesia in study population was inadequate and even though few women who received information about what to expect during labour found the information useful, most of them expressed little confidence in labour pain relief.

REFERENCES