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# STATEMENT OF THE PROBLEM A STUDY TO EVALUATE THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING HOME CARE

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#### ARTICLE INFO ABSTRACT

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#### Key words:

Antenatal mothers, Nausea, Vomiting, Miscarriage, Antacids.

Motherhood is an inevitable part of a woman's life. It's a natural law that a woman should carry her baby in her womb for 9 months and to undergo the process of labour. From the time the mother starts conceiving the baby, it is called pregnancy and the mother elicits describable and undifferentiated changes in the physical and physiological process of life. The mother experiences some signs and symptoms right from the first trimester of pregnancy. As each woman are unique, different mothers experience and present different signs and symptoms and it is not a must that all women should have the same manifestations.

About 90% of the women experience nausea and vomiting during pregnancy. The intensity of nausea and vomiting depends in the individuals according to other predisposing factors which are still remaining unknown. Some argue about the role of familial predisposing factors as the cause relating to nausea and vomiting, while others contradict. Even though the factors remain unknown, the problems faced by the pregnant ladies due to nausea and vomiting make it difficult for them to manage the time of pregnancy as well as to succeed in maintain normal and recommended nutritional status which in its absence can create complications for the mother and the baby.

Since each woman is different and each pregnancy is different, the severity of nausea and vomiting of pregnancy (NVP) will vary from woman to woman. Among the pregnant ladies with nausea and vomiting during pregnancy, the intensity and the effect of the nausea and vomiting can be varied. In up to 20% of the ladies with nausea and vomiting, the intensity can be very high and can be explained intolerable. Hyperemesis gravidarum is a severe and intractable form of nausea and vomiting in pregnancy. It is a diagnosis of exclusion and may result in weight loss; nutritional deficiencies; and abnormalities in fluids, electrolyte levels, and acid-base balance. The peak incidence is at 8-12 weeks of pregnancy, and symptoms usually resolve by week 20 in all but 10% of patients. Uncomplicated nausea and vomiting of pregnancy is generally associated with a lower rate of miscarriage, but hyperemesis gravidarum may affect the health and well-being of both the pregnant woman and the fetus. Mild cases are treated with dietary changes, rest and antacids. More severe cases often require a stay in the hospital so that the mother can receive fluid and nutrition through an intravenous line (IV). Do not take any medications to solve this problem without first consulting your health care provider.

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# **INTRODUCTION**

### **Objectives of the Study**

- To assess the pretest knowledge regarding home care 1 management of hyperemesis gravidarum among primigravida mothers before the structured teaching programme.
- To assess the posttest knowledge regarding home care management of hyperemesis gravidaram among primigravid mothers after structured teaching programme

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- 3. To determine the effectiveness of structured teaching programme regarding home care management of hyperemesis gravidaram among antenatal mothers.
- To associate the post test knowledge score with 4. selected demographical variables.

#### Null Hypothesis

NH<sub>1</sub> There is no significant difference between pre-test and post test level of knowledge of primigravida mothers.

NH<sub>2</sub>: There is no significant association between the post-test level of knowledge with demographic variables.

# **METHODOLOGY**

This chapter deals with research design, the setting, the population, sample size, the criteria for selection of sample, development and descriptive of tool, pilot study, data collection and plan for data analysis.

In that pre testmajority of the antenatal mothers 25(83.3%) have inadequate knowledge and 5(16.7) have moderately adequate knowledge. No one has adequate knowledge about Hyperemesis gravidarum.

In the post-assessment scores of the antenatal mothers after the planned educational awareness package on Hyperemesis gravidarum. Regarding the post- assessment, majority of the antenatal mothers 20(66.7%) gained moderately adequate knowledge, 10(33.3%) gained adequate knowledge.

In thatcomparison the pre-test mean was 3.7with standard deviation 1.6, and the post-test mean score was 8.3 with standard deviation 1.55 The obtained paired 't' value was 12.55 which reveals there was statistically significant difference between the pre-test and post-test. Hence, the educational awareness regarding Hyperemesis gravidarum among antenatal mothers is found effective.

Association of post assessment the level of knowledge regarding assessment on Hyperemisisgravidarum with selected demographical variables among mothers in experimental group, showed that there is no statistical significant associate was found between post-test knowledge score with selected demographic variable like age, religion, education, occupation, income of the family, types of family.

# CONCLUSION

The study concluded that majority of the antenatal mothers have gained moderately adequate and adequate knowledge after the educational awareness Hyperemesis gravidarum. Furthermore, with the help of healthcare professionals, medical students and NGOs the awareness and knowledge regarding the Hyperemesis gravidarum and its emerging importance among the antenatal mothers and the community can be maximized. Regular seminars or conferences can be conducted as a part of in service education in the health care institutions to update the health care professionals.

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