

Effectiveness of Nursing Care on Women with Prolapse Uterus

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Abstract: This paper presents the effectiveness of nursing care on women with prolapse uterus.

Keywords: nursing care, prolapse uterus

1. Introduction

The advancing age of population are likely to encounter women with pelvic organ prolapse with greater frequency. The life time risk for women are undergoing surgery, prolapse (or) incontinence. Prolapse uterus, most often, affects post-menopausal women who had one (or) more vaginal deliveries. Damage to supportive tissues incurred during pregnancy and childbirth plus the effects of gravity. Loss of oestrogen and repeated straining over the years can weaken the pelvic floor muscles and lead to prolapse This can be caused by many different reasons. Intense pressure on the stomach area, or if the tissues around the uterus lose their strength, can be causes for this condition. If women gave birth vaginally especially if women had several children naturally. Menopause is another factor as well as asthma or a condition that causes severe cough.

The other causes for prolapse uterus is genetic predisposition, high parity, advancing age, prior pelvic surgery, connective tissue disorder, elevated intra-abdominal pressure (obesity, chronic constipation accounts for 20 percent of the waiting list for major gynaecological surgery. Incidence of prolapse requiring surgical correction, which have had hysterectomy, is 3.6 per 1000 person per year of risk. The chance of prolapse increases with advancing age. In a multi centric cohort study done in Scotland and England among 17,032 women of age from 25 years to 39 years, done by Oxford Family Planning Association from 1968 to 1974 showed that incidence of genital prolapse among hospital admission was 2.04 per 1000 person-per year. In developed countries, prolapse is higher in elder age, where as in developing, it is higher in younger age. f women with mild prolapse uterus, any discomfort (or) interruption of life style might be benefited from surgery to repair the prolapse (or) may select to use a special supportive device (pessary) which will be inserted into the vagina.

The women with advanced age group (55 Years and above) is the common indication for hysterectomy. The discomfort of the prolapse uterus depends upon the degree of prolapse. For example, back pain, retention of urine, dyspareunia, white

discharge, constipation. The investigator interested to give nursing care on women with first and second degree prolapse uterus for improving the health status of these kinds of women for the project study.

2. Methodology

Evaluative research design was adopted to evaluate the nursing care on women with first and second degree prolapse uterus. The study was conducted in Gynaecology ward at selected Govt hospitals in Pathanamthitta Dist. The population of the study comprised of all the women with First and second degree prolapse uterus, who were admitted in Gynaecology ward at Govt hospitals in Pathanamthitta Dist. The total number of 20 women with first and second degree prolapse Uterus. The women who met inclusion criteria were selected by simple random sampling method The duration of the interview ranged from 20 to 30 minutes for each women. The investigator first introduced herself to the women and established rapport with them. The investigators explained about the purpose of the study and gain the confidence and then introduced the instruments to the woman. They were co-operative and attentive. The data collection was done at 10 minutes for collecting demographic data from each woman. Assessment was done with the help of rating scale. During the study period, the nursing care was given from eight A.M to four P.M. On the day of seven, effectiveness of nursing care was evaluated.

3. Result and discussion

The study reveals that among 20 women (31%) were in moderate health deterioration status and (79%) were in severe health deterioration status with mean 32.11 and standard deviation 4.41 on the assessment day

Evaluate the effectiveness of nursing care on women with first and second degree prolapse uterus The nursing care as per the protocol provided to each woman was observed by using check list. Comparison of assessment mean 32.11 and evaluation mean 19.13 and assessment standard deviation was 4.41, evaluation standard deviation of 3,11. The paired 't' value was 17.1 proved that the difference in health status between before and after the nursing care.

Data reveals that after giving nursing care on the evaluation day the overall mean was 17.67 with standard deviation was 3.45. The improvement score with the assessment and

evaluation showed that mean of 13.54 with the standard deviation of 1.61. Among 20 women (73.34%) had mild health deterioration and (26.66%) had moderate health deterioration on evaluation day. The calculated value was greater than the tabulated value. There was an improvement in health status on women with first and second degree prolapse uterus.

Correlation between selected demographic variables and effectiveness of nursing care on women with first and second degree prolapse uterus. There is a positive correlation between the effectiveness of nursing care such as vaginal douche, perineal care, vaginal plug, Kegel exercise, administration of drugs, comfort measures, health education and selected demographic variables such as age, occupation, number of child birth, history of mode of delivery, previous history of pelvic surgery.

4. Conclusion

This paper presented an overview on the effectiveness of nursing care on women with prolapse uterus.

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