Awareness of Complications of First Trimester Pregnancy

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How to cite this article:

Sindhuja Murugaboopathi, Hephzibah Kirubamani. Awareness of Complications of First Trimester Pregnancy. Indian J Obstet Gynecol. 2019;7(4)(Part-II):627–631.

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Received on 31.07.2019; Accepted on 04.11.2019

Abstract

Introduction: Complications during first trimester pregnancy is a common problem which affects both the mother's and her child's health. Life-threatening complications like ectopic gestation can occur in early pregnancy. It is therefore important to assess the level of awareness in our communities.

Methods: This prospective cross sectional study was conducted among hundred women whose pregnancy test positive and pregnancy was confirmed with USG showing gestational sac and attending the outpatient department of obstetrics and gynecology department of Saveetha Medical College. Women were interviewed with semi-structured questioner. Early pregnant women were included. Pregnant women who were unable to communicate, psychiatric problem and very sick women were excluded.

Result: In this study maximum number of participants were between 20 and 25 years of age, about 45% were primi, about 50% of women belong to upper middle class and about 40% completed their primary school education and about 44% had vague knowledge about complication of first trimester pregnancy. Overall results showed insufficient knowledge and awareness about complications of first trimester pregnancy.

Conclusion: Our participants did not have ample knowledge and awareness about the complications. Rural women require more of awareness.

Keywords: Complications; Knowledge; Awareness; Practice; First trimester complication; Symptoms.

Introduction

Pregnancy, also known as gestation, is the time during which one or more offspring develops inside a woman.¹ A multiple pregnancy involves more than one offspring, such as with twins.2 Pregnancy is typically divided into three trimester. The first trimester is from week one through 12 and includes conception, which is when the sperm fertilizes the egg. The fertilized egg then travels down the fallopian tube and attaches to the inside of the uterus, where it begins to form the embryo and placenta second trimester is from week 13 through 28. Around the middle of the second trimester, movement of the fetus may be felt. At 28 weeks, more than 90% of babies can survive outside of the uterus if provided with high-quality medical care. The third trimester is from 29 weeks

through 40 weeks. Symptoms of early pregnancy may include missed periods, tender breasts, nausea and vomiting, hunger, and frequent urination.3 Pregnancy may be confirmed with a pregnancy test.4 About 213 million pregnancies occurred in 2012, of which, 190 million (89%) were in the developing world and 23 million (11%) were in the developed world.5 The number of pregnancies in women ages 15 to 44 is 133 per 1,000 women.⁵ About 10% to 15% of recognized pregnancies end in miscarriage. Common causes vaginal bleeding, hypertensive diseases of pregnancy, obstructed labor, and complications associated with misscarriage, ectopic pregnancy, or elective abortion.7 Globally, 44% of pregnancies are unplanned. Over half (56%) of unplanned pregnancies are aborted. Pregnancy and childbirth is one of the happiest events in all over the world. While childbirth is a positive experience for most of the women it can be traumatic for others. Complications of first trimester pregnancy are bleeding PV, excessive vomiting, fevers, burning micturition, white discharge PV usage of OTC (Over the counter) drugs which may act directly on the fetus causing birth defects, ectopic pregnancy. Signs like vaginal bleeding, pelvic pain or cramps on one side, shoulder pain and fainting will be another sideif women did not know the signs of ectopic pregnancy and did not report to doctor it is a life-threating condition.

Materials and Methods

This prospective cross sectional study was conducted among women whose pregnancy test positive and pregnancy was confirmed with USG showing gestational sac and attending the outpatient department of obstetrics and gynecology department of Saveetha Medical College. Hundred early pregnant women were recruited for the study with their prior consent. Interview was conducted with semi-structured questionnaire after describing the purpose of the study. The participants were assured that participation is voluntary and confidentiality would be maintained.

Inclusion Criteria

All the pregnant women available during the data collection period who are willing to participate in this study were included in this survey.

Exclusion Criteria

The pregnant ladies who have severe illness, who were unable to hear or communicate and not willing to participate in the study were excluded in the survey. The data was then analyzed and percentage were obtained.

Results

In this study 28% were between 20 and 25 years, 40% were between 26 and 30 years, 22% were between 31 and 35 years, 11% were above 35.

In this study 45% were primi, 40% were gravida 1, 12% were gravida 2, 3% were above. In this study 10% had no formal education, 40% attended primary school, 30% completed high school and 20% completed undergraduate.

In this study 20% belong to lower socioeconomic status, 20% belong to lower middle class, 50% belong to upper middle class, 10% belong to upper class

Table 1: Distribution of age:

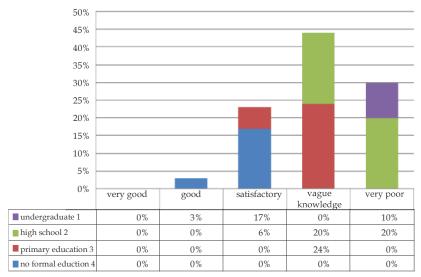
| Age | Percentage (%) |
|----------|----------------|
| 20-25 | 28 |
| 26-30 | 40 |
| 31-35 | 22 |
| Above 35 | 11 |

Table 2: Distribution of gravida

| Gravida | Percentage (%) |
|-----------|----------------|
| Primi | 45 |
| Gravida 1 | 40 |
| Gravida 2 | 12 |
| Above | 3 |

Table 3: Education status

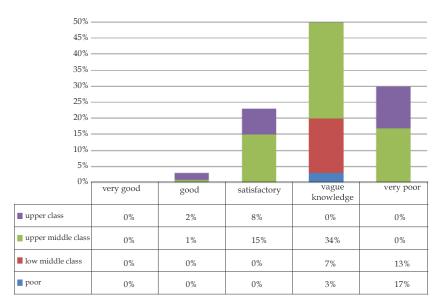
| Education status | Percentage (%) |
|-------------------------|----------------|
| No formal education | 10 |
| Primary school | 40 |
| High school | 30 |
| Undergraduate | 20 |



Graph 1: Showing about knowledge based on education

Table 4: Socioeconomic status

| Socioeconomic status | Percentage (%) |
|----------------------|----------------|
| Lower | 20 |
| Lower middle class | 20 |
| Upper middle class | 50 |
| Upper class | 10 |



Graph 2: Showing about knowledge based on socioeconomic status

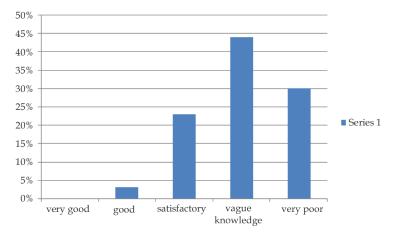
IJOG / Volume 7, Number 4 (Part - II)/ October - December 2019

Distribution of Knowledge

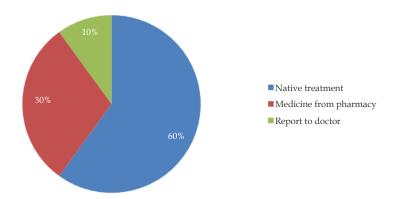
In this study no one had very good knowledge, 3% had good knowledge, 23% had satisfactory knowledge, 44% had vague knowledge and 30% had very poor knowledge about complications of first trimester pregnancy.

Practice

In this study 10% of them take native treatment, 30% will take medicine from pharmacy and 60% will report to doctor.



Graph 3: Showing about Distribution of knowledge



Graph 4: Showing about Practice

Discussion

Pregnancy is typically divided into three trimesters. The first trimester is from week one through 12 and includes conception, which is when the sperm fertilizes the egg. Pregnancy, also known as gestation, is the time during which one or more offspring develops inside a woman. Among women who know they are pregnant, the miscarriage rate is roughly 10% to 20%, while rates among all fertilisation is around 30% to 50%. In those under the age of 35 the risk is about 10% while it is about 45% in those over the age of 40. About 80% of miscarriages occur in the first 12 weeks of pregnancy (the first trimester). The most common symptom of a miscarriage is vaginal

bleeding with or without pain. The rate of ectopic pregnancy is about 1% and 2% that of live births in developed countries, though it may be as high as 4% among those using assisted reproductive technology.⁹

Our study showed that about 59% were aware that vaginal bleeding was a danger signs and a study by Gebrehiwot et al. also showed similar results around 60%. A study done in Balochistan showed that about more than 60% of participants were aware of signs of miscarriage whereas in our study only 23% were aware. Also more than 35% of the study participants were aware that painful abdominal cramps can be a danger sign whereas study done in Ethiopia showed that only 17.7% was so aware.

The increased awareness maybe due to increased educational qualification, i.e about 50% of our study participants had completed high school which is comparatively high when compared to study done in Ethiopia which showed only 19.7%.

Conclusion

Knowledge and awareness about the complications of first trimester pregnancy is poor among the study population. The main implications of the study was to emphasise the need to spread awareness among pregnant women about the first trimester complications. Awareness programmes should be conducted in rural areas where the socioeconomic status and education are low.

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