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## A study to assess the knowledge on uterine prolapse among reproductive age group women's in Kudamoakkam

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### Abstract

Uterine prolapse is always accompanied by some degree of vaginal wall prolapse. No one definite cause of the problem has been firmly established, as women from different economic strata, a wide range of ages, belonging to various ethnic groups and from all ecological regions from east to west suffer from it. The aim of the study is to assess the knowledge on risk factors of uterine prolapse among reproductive age group women at rural area. A quantitative research approach with descriptive study design. The study was conducted in Kondenjeri area of 120 families of all reproductive age women with 185 reproductive age group women in the Kondanjeri area with simple random sampling technique was used. The statistical methods show that majority of the respondents were of age group 25-29 (47%) followed by 20-24 (26.5%) with the mean age 26.7 years $\pm$ 4.69 SD. about 21.2% respondents were illiterate and 22.16% have basic informal education whereas 13.51, 29.19% and 14.05% have attended primary, secondary and higher education respectively. in the same way, 49.7% respondents were either housewife, 35.7% were wages based labourer's, 9.2% have their own business and only 5.4% of respondents were involved in public service. Women had poor knowledge about uterine prolapse. Many women had never heard about uterine prolapse and who had heard, most of them didn't know any knowledge about it. The vast majority of women didn't practice any measures to protect or prevent occurrence of uterine prolapse.

**Keywords:** knowledge risk factors uterine prolapse, reproductive age group women.

### Introduction

Uterine prolapse is a health concern affecting millions of women worldwide. The global prevalence of it (2007) was 2-20% under the age of 45 years. In United States of America U.S.A (2002) was 11.4% and in Egypt (1993) was 56%. Even though prolapse is not considered a life threatening condition, but it affect the women physically, psychologically, sexually and lead to occupational and social limitations, it also increase the risk of reproductive and urinary tract infection. Uterine prolapse is one of the most common causes of reproductive morbidity which influence the women quality of life. Even though prolapse is not considered a life threatening condition, but it affect the women physically, psychologically, sexually and lead to occupational and social limitations, it also increase the risk of reproductive and urinary tract infection. [Rojina Bhurtel *et al.*, 2019] <sup>[7]</sup>

There are several factors that may contribute to the weakening of the pelvic muscles and lead to uterine prolapse such as, mismanagement or improper care during childbirth, especially among multi para women more than three times, delivery of macrosomic fetus, obesity, chronic constipation and chronic coughing. All of these factors place added tension on the pelvic muscles, and may contribute to development of uterine prolapse. Although women suffering from uterine prolapse experience many symptoms, but the most specific symptoms for the condition are the feeling of something bulging out of the vagina, sensation of heaviness in the pelvis, vaginal bleeding, increased vaginal discharge, dyspareunia low backache, urine incontinence, stress incontinence and constipation it is obvious that uterine prolapse not only results in physical pain, unbearable distress and extended infection but also has social implication which affects the women quality of life. Pelvic organ prolapse is consider as one of the most common cause of reproductive health morbidity which influence the women quality of life. Uterine prolapse is a very common condition, particularly among because many women don't seek medical help because of the shame from the condition which affects a sensitive part of the women body. Uterine prolapse is a health concern affecting millions of women worldwide. The global prevalence of it (2007) was 2-20% under the age of 45 years. In United States of America U.S.A (2002) was 11.4% and in Egypt (1993)

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**Materials and Methods**

Research approach indicates the procedure for conducting the study. In order to accomplish the objective of this study, a quantitative research approach was adopted. The research design adopted for this present study was descriptive study design. The independent variables of this study was the uterine prolapse. The dependent variables of this study was the reproductive age group women The study refers to the area where the study was conducted. The study was conducted in kondenjari area. In kondenjari of 120 families are present. Population includes all reproductive age womens. Sample size was 185 reproductive age group women. In the kondanjari area, who participate the inclusion criteria were selected as a sample for the study. Women who fulfilled the inclusion criteria were selected as a sample for the study using purposive sampling technique with simple random sampling technique was used. The criteria of sample selection is those who are willing to participate in the study, Women who are available at the time of data collection, Individuals who can read Tamil and English. The exclusion criteria are those who are not willing to participate, those who are not available at the time of study. The study duration was 5 days. A priority permission was obtained from the community head members in the panchayat. The data were analysed using descriptive and inferential statistics. Descriptive statistics such as frequency, Mean, Percentage and standard deviation will be used for assessing demographic data. Chi square test will be used to associate the knowledge with their selected demographic variable. Analysed data will be presented in the form of tables, diagrams and graphs based on findings.

**Result and Discussion**

**Section A:**

**To assess the description of the demographic variables of the reproductive age group womens**

**Frequency and percentage distribution of demographic variables of reproductive age group women**

The study findings shows that majority of the respondents were of age group 25-29(47%) followed by 20-24 (26.5%) with the mean age 26.7 years ±4.69 SD. about 21.2% respondents were illiterate and 22.16% have basic informal

education whereas 13.51, 29.19% and 14.05% have attended primary, secondary and higher education respectively. in the same way, 49.7% respondents were either housewife, 35.7% were wages based laborers, 9.2% have their own business and only 5.4% of respondents were involved in public service. Total respondents 42.16% respondents were married at early ages of 12-19 years. similarly, about 29% respondent had already first child before age of 19 years of age. Also more 28% of respondents had second child with less than 2 years of child spacing.

**Section B:**

**Study participants response regarding knowledge variables of uterine prolapse**

**Frequency and percentage distribution of participants response regarding knowledge variables of uterine prolapse. (n=156)**

The results shows that nearly 85% of respondents have heard about uterus prolapse however our that about 28% of respondent were not able to responses even single risk factors associated to uterus prolapse. Similarly, about 68% of respondents were not able to response any single sign and symptoms of uterus prolapse.

**Section C:**

**Assessment of level of knowledge on risk factors of uterine prolapse among reproductive age group womens:**

**Frequency and percentage distribution of level of knowledge regarding uterine prolapse among reproductive age group women**

Knowledge level	Frequency	Percentage
Inadequate knowledge (<75%)	99	53.5
Adequate knowledge (>75%)	86	46.5
Total	185	100

The results in this table shows out of total respondents 46.5% of respondents have adequate knowledge regarding risk factors of uterus prolapse and 53.5% of respondents have inadequate knowledge about risks factors of uterus prolapse

**Section D:**

**Association between Uterine Polapse Knowledge Categories and Selected Study Variables:**

**Table:** Association between knowledge regarding uterine prolapse among reproductive age group women

Variables	Inadequate knowledge		Adequate knowledge		X2	p-value
	N	%	N	%		
<b>Age of the respondent years</b>						
15-19	7	100	0	0		
20-24	21	42.9	28	57.1		
25-29	44	50.6	43	49.4	11..54	0.021
30-34	17	70.8	7	29.2		
35-39	10	55.6	8	44.4		
<b>Age at marriage</b>						
12-15	16	69.6	7	30.4		
16-19	31	56.4	24	43.6	11.14	0.011
20-23	35	41.7	49	58.3		
24-27	17	73.9	6	26.1		
<b>Family type</b>						
Nuclear	67	54.4	56	45.5	0.13	0.713
Joint	32	51.6	30	48.3		

<b>Educational status</b>						
Literate	27	65.9	14	34.1		
Illiterate	28	71.8	11	28.2		
Primary level	17	68	8	32	22.43	0.001
Secondary level	18	33.3	36	66.7		
Higher level	9	34.6	17	65.3		
<b>Occupation</b>						
House wife	49	53.2	43	46.7		
Labour	36	54.6	30	45.4	3.1	0.375
Service	3	30	7	70		
Business	11	64.7	6	35.3		
<b>Age at 1<sup>st</sup> child birth</b>						
10-14	0	0	3	100		
15-19	37	74	13	26		
20-24	32	37.6	53	62.3	23.77	0.001
25-29	28	66.7	14	33.3		
30-34	2	40	3	60		

It shows the multivariate analysis of selected variables with knowledge categories on risk factors of uterus prolapse. The result shows, age of respondents, age at marriage of respondents, education status of respondents, education status of respondents, age at first child birth of respondent, were significantly associated (p-value <0.05) with the knowledge on risk factors of uterus prolapse among respondents.

### Conclusion

Women had poor knowledge about uterine prolapse Many women had never heard about uterine prolapse and who had heard, most of them didn't know any knowledge about it The vast majority of women didn't practice any measures to protect or prevent occurrence of uterine prolapse.

### References

- Ashma Baruwal, Ratana Somronthong *et al.* knowledge, attitude and preventive measures amongst married women of reproductive age towards uterine prolapse, journal of health research 2011;25(3):129-13.
- Sharmila Neupane. Effectiveness of self-instructional module on level of knowledge regarding prevention and management of uterine prolapse 2013;52(2):147
- Shobamani. Effectiveness of structured teaching programme regarding knowledge on preventive measures of uterine prolapse among multiparous women, 2012.
- Christina Radi M *et al.* uterine prolapse prevention in nepal: the prevalence of perspectives of women and health care professionals. 2012;4:373-382.
- Abdul hakeem jokhio *et al.* Prevalence of pelvic organ prolapse in women, associated factors and impact on quality of life in rural area at Pakistan, 2020, PMID:24684695
- Hridaya Raj Devkota *et al.* Bio mechanical risk factors for uterine prolapse among women living in the hills of west nepal 2020;16:1-9.
- Rojina Bhurtel, Reena Mandal *et al.* Knowledge on uterine prolapse among reproductive age group women in Nepal international journal of health and research. 2019;9(11):2249-9571.
- Abha Sharma *et al.* Risk factors and symptoms of uterine prolapse, 2014, 30(1).
- Gyhagen M, Bullarbo M, Nielsen TF *et al.* Prevalence and risk factors for pelvic organ prolapse 20 years after child birth: a national cohort study in singleton primiparae after vaginal of caesarean delivery 2013;120:152-160.
- Walker GJA, Gunasekara P. pelvic organ prolapse and incontinence in developing countries: Review of prevalence and risk factors 2011;22(2):127-135.
- Kuncharapu I, Majeroni BA, Johnson DW. Pelvic organ prolapse, American family physician. 2010;81(9):111-7
- Shrestha BO, Choulagai B, Shrestha KB, Petzold M, Krettek A *et al.* prevalence and treatment practices of uterine prolapse among women of reproductive age in Jhaukhel-Duwakot health demographic surveillance site, Bhaktapur, Nepal. J Kathamndu med college 2014;3(4):136-143.
- Sita KA, Neraula. Awareness regarding utero vaginal prolapse among newarparous women, research practice 2014;1(1):15-9.
- Barber MD, Maher C. Epidemiology and outcome assessment of pelvic organ prolapse. Int Urogynecology J 2013; 24(11):1783-90.