

Effectiveness of Hot Application on Episiotomy Wound Among the Postnatal Mothers at Selected Hospitals, Indore

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Introduction

An incision (also known as an episiotomy) may have to be made in the perineum of a woman giving birth vaginally in order to facilitate the delivery of the baby and prevent a perineal tear. Despite the fact that the number of episiotomies done during delivery has been continuously declining over the course of the last several decades, many hospitals continue to conduct the procedure routinely. According to the research, the percentage of births that include an episiotomy has dropped to between 8 and 10 percent in affluent nations like the United States and the United Kingdom. In India, the overall rate of episiotomy was 42.6%, with the rate being lower among midwives (23.2%) and higher among academics (31.4%) and private care providers (31.4%). (34.2 percent). When an episiotomy has been performed, wound care should start as soon as feasible after the suturing has been completed in order to facilitate quicker healing and less pain. Ice packs and cold compresses should be applied to the perineum for the first twenty-four hours of any therapy for general perineal care. In order to expedite the healing process of wounds, nurses often instruct patients in kegel exercises, which help strengthen the muscles in the pelvic floor. Hot application, also known as a sitz bath with one gramme of

potassium permanganate, is widely used in a variety of hospitals and has been demonstrated to be effective in the treatment of episiotomy wound pain and healing, as well as in reducing the likelihood of following complications. Based on the results of the study, a hot application of potassium permanganate can be used to treat an episiotomy wound in a number of different medical situations.

However, there is a lack of standardised treatment protocols due to the fact that any institution that uses hot application of potassium permanganate either creates its own way or borrows the procedures of other facilities without testing whether or not they are accurate.

In spite of the lack of standard techniques, the study reveals that potassium permanganate is an effective treatment for episiotomy wound healing. The researcher is confident that hot applications of potassium permanganate should be used to treat episiotomies at our facility in order to provide patients with comfort, prevent infections, reduce pain, and enhance wound healing, which will ultimately result in shorter hospital stays for patients. The nurses who work in the maternity ward will benefit from this research as an extra perk since it will contribute to the creation of best practises that are used throughout the whole hospital. And all of this is taking place at a time when the cost of medical treatment is rising at an alarming pace. If nurses and midwives understand the importance of their care and the possible influence that the suggested approach

might have on wound healing, they will be able to give episiotomy patients high-quality treatment at a price that is accessible to them.

Methodology

In the course of this research, a real experiment was carried out (post-test only design). The purpose of this research was to investigate the efficacy of applying heat therapy to postpartum mothers' episiotomy wounds by conducting a survey at many hospitals in Indore and gathering the responses from the respondents. There were a total of sixty students who took part in the study; of them, thirty were assigned to the experimental group and thirty to the control group. Both the hospitals and the samples were chosen at random for this study (lottery and table methods). Women who had just given birth took part in the study, and they came from hospitals located all across Indore. The samples were selected using a lottery system that was completely random. A post-test using REEDA and a numerical pain rating scale was carried out in order to assess the level of wound healing and discomfort experienced by postnatal mothers. Use with extreme caution (sitz bath with potassium permanganate mixed with 5 litres of warm water heated to 110 degrees Fahrenheit). It is administered three times daily, once every four hours, with a ten-minute break in between each administration.

Results

The post-wound healing test had a mean value of 6.6, a standard deviation of 1.52, and a t value of 16.08, which was significantly higher than the post-pain

test's mean value of 4.28 and a standard deviation of 1.83. These findings were gleaned using statistical analysis. The mean and standard deviation were both 6, with the control group having a standard deviation of 1.13 and the pain group having a standard deviation of 1.26, yielding a t value of 5.99. At the 0.05 level of analysis, it was concluded that both were significantly different from zero. The use of heat proved to be effective as a result of this.

It was determined that there was a correlation of 0.62 within the group that was under control. It was discovered that there is a significant and beneficial association between the alleviation of pain and the healing of wounds. Within the control group, there was a positive correlation between wound healing and pain that was pretty strong ($r = 0.31$).

In the control group, there was no connection found between age, education, domicile, kind of episiotomy, occupation, or the composition of the family; nor was there a connection between wound-healing body type and any of these factors. On the other hand, the experience of pain is independent of variables such as a person's age, the number of children they have, their level of education, the kind of episiotomy they had, or their physical build. There is not a statistically significant correlation between any of these factors and age, parity, domicile, history of current medical disease, birth weight of the infant, profession, family type, or body build in the control group. Other factors that do not show a correlation include the birth weight of the infant.

In contrast, research has found that none of the following characteristics are related to chronic pain: age, parity, education, domicile, previous medical history, kind of episiotomy, occupation, family structure, or body type.

Conclusion

The primary objective of this study was to investigate the impact that the application of heat had on the rate of healing and the level of pain felt by postpartum mothers who had undergone an episiotomy at one of the many hospitals located in Indore. The post-test analysis of wound healing and pain ratings revealed a statistically significant improvement in the experimental group, indicating that the given heat therapy was effective.

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