# A Descriptive study to assess postnatal maternal data of infant jaundice in rural areas of Rama hospital and Research Centre, Mandhana, Kanpur (UP)

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## ABSTRACT

**Background:** Jaundice is that the most common disease requiring treatment in newborns. The yellow discoloration of jaundiced neonatal skin and albudinia is the result of unconjugated accumulation. Animal pigment. Infant jaundice was initial represented in Chinese textbooks in all probability one thousand years agone. Eighteenth-century and his nineteenth-century medical treatises, essays, and textbooks contain discussions of the causes and cure of infant jaundice. Some texts conjointly describe the fatal consequences of presumptively Rh-Iso vaccination in infants. In 1875, Orth was the primary to explain yellowing of the brain in an exceedingly pattern Schmoll later known as icterus.

**Objectives:** 1) to present the data regarding physiological jaundice among postpartum mothers in elite hospitals' postpartum wards.

2) To associate the values of the data to demographic variables.

**Material and Method:** A quantitative, non-experimental and descriptive study the study style was prone to reaching conclusions and delivering results. The postnatal ward of elite hospitals served as the setting for this study, which employed a survey-based analysis strategy. 100 postnatal mothers were elite for the study. Information was collected with the assistance of a structured data form.

**Result:** Results showed that the bulk of postnatal mothers (58%) had average, (26%) good, (15%) bad, and (1%) excellent data concerning physiological jaundice. showed. Conclusion; and in depth analysis disclosed important variations in data and finished that postnatal mothers had average data of physiological jaundice.

Keywords: postnatal mothers; Physiological jaundice; data.

## Introduction

The amount {time of life} is that the period up to twenty-eight days once birth. this can be the foremost necessary time in your life. Varied complications and deaths will occur once newborns area unit bereft of their wants. Newborns should adapt to life outside the uterus to keep up traditional physiological activity.

- Concerning five hundredth of term babies and eightieth of premature babies develop jaundice. Jaundice typically happens two to four days once birth and is caused by deposition of animal pigment within the skin. Most infant jaundice is that the results of exaggerated breakdown of red blood cells and reduced animal pigment secretion.
- 2. Jaundice in infants can be a serious medical problem all over the world, especially in Asia and the South. Asia East region. Infant jaundice is frequently caused by G6PD deficiency, Aussie incompatibility, low birth weight, and infection. While unidentified environmental factors may also contribute to the prevalence of infant jaundice, genetic factors may also support ethnic differences in the capacity to remove animal pigment.

- 3. Jaundice may be a common downside that affects quite 1/2 all term infants and most preterm infants. Jaundice describes a yellow, orange tinge to the skin caused by excessive current levels of animal pigment accumulating within the skin. Jaundice is visible in most healthy term newborns among the primary week of life.
- 4. The optimum treatment for jaundice is sustained shut observation and frequent feeding, followed by actinotherapy and at last, in severe or refractory cases, transfusion. actinotherapy will be performed in several things, however ought to solely be performed by knowledgeable and trained people.
- 5. Jaundice in infants can be a serious medical problem all over the world, especially in Asia and the South. Asia East region. Infant jaundice is frequently caused by G6PD deficiency, Aussie incompatibility, low birth weight, and infection. While unidentified environmental factors may also contribute to the prevalence of infant jaundice, genetic factors may also support ethnic differences in the capacity to remove animal pigment. However, in some infants, liquid body substance animal pigment levels will be to a

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fault elevated, and unconjugated animal pigment is toxin, resulting in death and wombto-tomb medical specialty sequelae (kernicterus) within the extant child. Will be cause for concern as a result of it causes for these reasons, the presence of infant jaundice typically prompts diagnostic analysis.

hyperbilirubinemia of the newborn is that the 6. most typical reason for hospitalization within the time of life (first month of life) and SMRU. A newborn's skin becomes jaundiced, that is caused by high levels of animal pigment within the blood. In some newborns, animal pigment levels rise to levels which will cause brain harm and death. There area unit varied celebrated causes which will cause elevated animal pigment levels, as well as G6PD immaturity. deficiency and For hyperbilirubinemia of the newborn, the newborn ought to be treated with actinotherapy (blue lightweight therapy). If jaundice persists (more than twenty one days), more analysis ought to be done.

## **Objectives of the Study**

- To assess the data of postnatal maternal concerning physiological Jaundice in postnatal wards of elite hospitals in Kanpur
- 2) To link elite demographic variables to the data score.

## Methodology

A quantitative, non-experimental and descriptive study style was utilized in this study. This study was conducted within the postnatal ward of elite hospitals. A survey studies technique became used on this study. 100 postnatal mothers were elite for the study. We have a tendency to collected knowledge employing a structured data form and sampled the population exploitation nonprobabilistic sampling.

#### Results

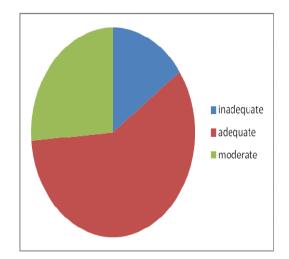
Table I: Distribution of subjects according to their age

S.No.	Age Groups	Result
1.	18-22 years	23%
2.	23-27 years	51%
3.	28-32 years	26%
4.	33-37 years	0%

Table No. I above show that the age distribution of mothers after birth is 23% aged 18-22, 51% aged 23-27 and 26% aged 23-27. The 28-32 age groups and the remaining 0% belonged to the 33-37 age groups, respectively. After birth, 44% of mothers were primiparous and 56% were multiparous. Looking at the distribution of postnatal mothers by

28% educational background, completed elementary school, 49% completed secondary school, 16% completed university, and 07% completed graduate school. Looking at the occupational distribution of postpartum mothers, 43% were housewives, 39% were workers, 11% were self-employed, and 07% were service providers. Looking at postpartum mothers by family type, 41% are nuclear families and 59% are community families. Looking at the distribution of postpartum mothers by place of residence, 37% are from metropolitan regions and 63% are from provincial regions. Dissemination by post pregnancy mother's month to month pay is 58% Rs. 3000-8000, 21% Rs. 8001-13000, 09% Rs. 13001-18000, 12% Rs.18001 from there, the sky is the limit.

Table II: Postpartum mothers' knowledge of physiological jaundice is as follows: n=100



The pie chart above shows that 15% have a low level of knowledge, 58% have an average level of knowledge, 26% have a high level of knowledge, and 1%) have a very high level of knowledge. Increase Knowledge the minimum score was 1, the maximum score was 13, the average test score was 7.00  $\pm$  2.61, and the average knowledge percent was 43.75  $\pm$  16.31.

#### Discussion

According to this study, 58% of postpartum mothers have an average level of knowledge about physiological jaundice and their source of information.

The study's mean and standard deviation are 7.01 and 2.61, respectively, according to its findings. Additionally, the postpartum mothers' mean percentages of knowledge values were  $43.75\pm16.31$ , respectively. This leads us to the conclusion that postpartum mothers have a typical understanding of physiological jaundice.

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A study was conducted to determine mothers' knowledge of how much they already knew about neonatal jaundice. This was done between January 2010 and April 2010, where 161 mothers who delivered healthy babies at Izmir Aegean Gynecology and Obstetrics Hospital were the subjects of this study. The mothers' knowledge of jaundice in neonates was assessed using a questionnaire method.

Based on the responses, knowledge was rated as "sufficient" or "insufficient." A group of mothers were compared to well-informed mothers with inadequate knowledge of neonatal jaundice. She had 53.6% of uninformed mothers. We found that a mother with a lower level of education was 2.1 times more likely than her to have an inadequate level of knowledge. Prior information from previous children with jaundice doubled the likelihood that maternal knowledge was adequate. It was found that the mothers have inadequate knowledge.

A cross-sectional observational study was conducted to determine postnatal maternal knowledge, attitudes, and behaviors regarding neonatal jaundice at the Provincial General Hospital (PGH) in Badulla. Her 396 mothers who gave birth at her PGH Badulla between 1 May 2010 and her 15 June 2010 were interviewed with a structured questionnaire. The knowledge, attitudes, and behaviours of the participants were assessed using a questionnaire. The mean knowledge score was 3115, the mean attitude score was 65.718.6, and the mean behaviour score was 66.119.8 for neonatal jaundice. Postpartum mothers lacked knowledge of neonatal jaundice. Knowledge scores and maternal attitude and behaviour scores were significantly correlated.

A cross-sectional study of Malaysian mothers' knowledge and practices regarding the care of neonatal jaundice was conducted. The study included 400 mothers who were admitted to general hospital obstetrics or attending obstetric clinics. Using a structured set of questionnaires, they were interviewed. As a result, the majority (93.6%) knew about the neonatal jaundice, and 71.4% also knew that the neonatal jaundice lasting more than 2 weeks was abnormal. However, only 34.5% of them found jaundice to be abnormal in the first 36 hours of life. This study reveals a major lack of knowledge gap among Malaysian mothers in terms of the care of neonatal jaundice. It was still common to expose young children to direct sunlight.

A cross-sectional study done to find out what pregnant mothers in Seberang Perai Utara state know, believe, and think about neonatal jaundice. A total of 150 mothers visiting the Seberang Perai Utara clinic were selected by systematic random sampling of hers and interviewed with pre-tested questionnaires. The

results showed that approximately 50.0% of respondents lacked general knowledge about neonatal jaundice. Specifically, knowledge of complications and determination of the best method to detect jaundice. Infants weighing ≥2000 g and born at ≥35 weeks' gestation at 12 Kaiser Hospitals in Northern California from 1995 to 2004. 2, of the 81,898, we identified 22,547 infants with "eligible total serum bilirubin levels" of less than 3 mg/dl Phototherapy Threshold Guidelines from the American Academy of Pediatrics in 2004. 5,251 of the 22,547 eligible newborns had reached eligible bilirubin levels within 48 hours of her receiving phototherapy within 8 hours of hospital admission. We concluded that although in-hospital phototherapy is effective, the number required for treatment according to current guidelines varies greatly among subgroups of infants.

The effect of phototherapy on the risk of total serum bilirubin (TSB) was estimated through a study. All infants whose TSB was 25 mg/dL or higher were selected as study cases. From a cohort of 285,295 infants born between 1995 and 2004 who were at least 34 weeks' gestation and weighed ≥2000 g at Kaiser Hospital in Northern California, 17,986 had TSB between 17 and 22.9 mg/dL at 48 hours of age. It has been confirmed that all infants with TSB values greater than or equal to 25 mg/dL were chosen as study cases. Based on the difference between the eligible TSB and the American Academy of Paediatrics phototherapy threshold, each case received four randomly selected controls. There were 62 cases all together. Within eight hours, six of them received patient phototherapy. The effectiveness of phototherapy in preventing TSB greater than or equal to 25 mg/dL was 85 percent.

In neonates with jaundice, a study was conducted to compare LED phototherapy to conventional phototherapy in terms of reducing total serum bilirubin levels and treatment duration. A method of quasi-randomization was used. The Neonatal Review Group and The Cochrane Collaboration's standard methods were utilized for data collection and analysis. The criteria were met by six randomized controlled trials. LED and halogen light sources were contrasted in four studies. LEDs and compact fluorescent lamps were compared in two studies. The LED and non-LED phototherapy groups had similar durations of phototherapy (six studies, 630 newborns). The rates of reduction in serum total bilirubin (STB) were comparable in both groups (four studies, 511 The findings demonstrate that neonates). phototherapy with an LED light source is as effective as phototherapy with a conventional light source (CFL or halogen) at reducing serum total bilirubin levels.

### Recommendations

- 1) A similar study can be undertaken for large sample to generalize the findings.
- 2) A similar study can be conducted in staff nurses on a large population.
- A study can be undertaken to identify the existing Knowledge and attitude of postnatal mothers regarding Physiological jaundice.
- 4) A comparative study to assess the knowledge of urban and rural postnatal mother.
- 5) A comparative study to assess the knowledge of the Literate and illiterate postnatal mothers can be done.

#### Conclusion

Analysis of the data indicates that most mothers belong to the age group of 23 to 27 years old, most belong to parous women, and most have completed secondary education. Most of the postpartum mothers were housewives and their monthly income was between her 3,000 and 8,000 rupees. Most of the mothers belonged to common families and lived in rural areas. Overall, postpartum maternal knowledge of physiological jaundice was average. We found that associations between variables such as postnatal maternal parity and family type were not significant. Age, education, occupation, family income, and region of residence were found to be important.

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