RESEARCH ARTICLE

Effectiveness of pre-operative instructional program on knowledge regarding post-operative care among women undergoing abdominal hysterectomy

Deepika Thakur, Jaswinder Kaur

Department of Obstetrical and Gynecological Nursing, Akal College of Nursing, Eternal University, Baru Sahib, Himachal Pradesh, India

Correspondence to: Deepika Thakur, E-mail: d4dipiit@gmail.com

Received: May 26, 2021; Accepted: June 10, 2021

ABSTRACT

Background: Hysterectomy is a surgical procedure used to remove the uterus. There are increasing the number of uterine sparing practices for identifying many conditions. Now a day’s hysterectomy is procedure performed in the healthcare centers, which helps to reduce a lot of gynecological complications in women. Aim and Objectives: The objective of this study is to assess the pre-test knowledge regarding post-operative care among women and to compare the effectiveness of instructional program regarding post-operative care. Materials and Methods: Quasi-experimental design used to evaluate the effectiveness of the preoperative education program with respect to postoperative care knowledge among women undergoing abdominal hysterectomy. A total of 60 samples were taken from 30 treatment groups and 30 control groups were selected using purposive sampling techniques. Self-administered questionnaire was administered to collect the data and data were analyzed by descriptive and inferential statistics. Results: Prior to the test, 2 (6.7%), 6 (20%), 22 (73.3%) had good, moderate, and poor knowledge, respectively. Moreover, in the posttest, 8 (26.7%), 19 (63.3%), 3 (10%) had good, average poor knowledge, respectively, whereas the knowledge score of control group was showing that 1 (3.3%), 7 (23.3%), 22 (73.3%) women had good, average poor knowledge in pre-test whereas in post-test, 3 (10%), 13 (43.3), 14 (46.6%) women had good, average and poor knowledge. Pre-test mean ± SD of the both groups were 10.43 ± 4.732 and 10.9 ± 4.110. The mean ± SD of experimental group was 19.10 ± 4.551 in post-test knowledge score and 12.6 ± 4.780 of control group. P-value P = 0.05 level of significance that depicted there was significant difference between pre-test and post-test knowledge. Conclusion: The result has shown that pre-operative instructions are important to raise women’s awareness about post-operative care after hysterectomy.

KEY WORDS: Knowledge; Pre-operative Instructional Program; Post-operative Hysterectomy

INTRODUCTION

Hysterectomy is the surgical procedure for deduction of the uterus with or both ovaries and fallopian tubes. But the removal of tubes and ovaries, this decision depends upon the individual who is going to be operated,[1] includes extraction of uterus parts, cervix, ovaries, fallopian tube, and other structures also. This procedure may be total or partial.[2] Hysterectomy was used during the medieval age for the complete excision as to inverted uterus. In the earlier time after the hysterectomies, the patients usually lose their lives due to many complications such as hemorrhage, infections, pus formation, and exhaustion.[3] The procedure came about followed for excision was the full whole total abdominal hysterectomy (TAH) in few years ago. But currently, some
less-invasive procedures have been introduced such as vaginal hysterectomy and laparoscopic hysterectomy. The whole uterus is removing with the cervix, tissue, and upper part of the vagina in radical hysterectomy. In radical hysterectomy, the entire uterus with the cervix, tissues, and upper vagina is removed. Laxatives, enema as well suggested before going for the surgery. Hysterectomy results in permanent cessation of menstrual cycles Hysterectomy is usually non-pregnancy related major operation done on women. Cervical cancer is other most common disease up to 65 years of age in women. It is major cause of mortality from Gynecological cancers in the world. Virtually 50% of women had menopause manifestation of hot flashes, mood swings, vaginal dryness, and depression. Other post-operative problem were fatigue, abdominal discomfort, anorexia, sleep interference because of pain, etc.

In South India (2016), a study exposed the knowledge of female on hysterectomy. That showed there were total of 40 women. Among them, 42.5% of women were no knowledge about hysterectomy. About 57.7% of women have average knowledge and no one has superior knowledge. The mean score of knowledge was 10.15 about the various aspect of hysterectomy.

MATERIALS AND METHODS

Research Approach and Design

The investigator obtained formal permission from the Principal of the Akal College of Nursing and principal of the IGMC hospital (Shimla) to conduct the study. The quantitative research approach was adopted (as it explains the connection between the selected variable) with regards quasi-experimental design (pre-test, post-test, control group) had selected to obtain responses to the question and to evaluate its effectiveness of pre-operative instructional program. Purposive sampling technique (non-probability sampling method) was used for selection of two groups, 30 experimental and 30 control groups, whose went for TAH in Kamla Nehru Hospital Shimla. The tool was constructed into three sections. The section “A” includes socio demographic variables, i.e. age, religion, marital status, education, occupation, monthly income, family history of hysterectomy, and number of children. In section “B”, it consists of the 04 questions about structured knowledge questionnaires on hysterectomy. Moreover, section “C” consists of a total of 26 knowledge questionnaire concerned to post-operative hysterectomy care. Reliability of tool was assessed using split help method (Cronbach’s alpha). The reliability of tool was 0.72. Sample had done using formula which was primarily depend on previous studies

\[ n = \frac{(\alpha_1 + \alpha_2)x}{Z_1^2 - \alpha_2 + Z_1 - \beta^2} \alpha_1 \times m \]

The consent was obtained from participant after giving explanation about the purpose of this research, assuming their anonymity and confidentiality. Women age group of 30–70 years was decided on for this research. Pre-test was taken from both experimental and control group on day 1st before undergoing hysterectomy. Forty min were given to participants for completion of datasheet. Intervention was given to the experimental group on same day. The post-test was performed using the experimental and control groups on day 7. Following the collection of the data, the analysis of the data was made by descriptive and inferential statistics.

RESULTS

Demographic Characteristic

There was no statistical significant association between pre-test knowledge score with selected socio demographic variables in both groups. It was calculated with selected socio-demographic variables at P < 0.05 level of significance. Hence, it was concluded that research hypothesis was rejected as P < 0.05.

Knowledge

Table 1 depicted that, the pre-test knowledge score of experimental group was, 2 (6.7%), 6 (20%), 22 (73.3%) had good, average, and poor knowledge respectively. Moreover in the post test knowledge score, 8 (26.7%), 19 (63.3%), 3 (10%) had good, average, and poor knowledge, respectively. In the control group findings showed that the pre-test knowledge score of control group was, 1 (3.3%), 7 (23.3%), 22 (73.3%) women had good, average, and poor knowledge, respectively. Moreover in the post test knowledge score, 3 (10%), 13 (43.3%), 14 (46.6%) women had good, average, and poor knowledge [Figure 1].

Comparison of Effectiveness

Table 2 shown that the pre-test mean ± SD of the experimental group was 10.43 ± 4.732 and 10.9 ± 4.110 of control group. The mean ± SD post-test knowledge score of experimental group was 19.10 ± 5.551 and 12.6 ± 4.780 of control group. The mean difference of both groups was –8.667 in experimental group and 29 in control group. “t” value was 8.518 and –1.516 in experimental and control group. P = 0.001 in experimental group that was less P-value (0.05) and (0.140) in control group that was more than table value (P < 0.05). These findings revealed that the pre-operative instructional program was effective among women of experimental group.

The hypothesis, there was significant difference between the pre-test knowledge and post-test knowledge mean score in the experimental group after intervention regarding post-operative care at P < 0.05 level of significance. Hence, the research hypothesis was accepted at P < 0.05 level of significance. Table 3 revealed that compare mean and SD of both groups in the experimental and control group was
10.439 ± 4.732 and 10.933 ± 4.110 whereas in post-test, it was 19.100 ± 5.731 and 12.667 ± 4.780. In the post-test of groups mean difference of post-test was 6.433. 0.000 was P-value. t-value was 4.721 and df was 58 in post-test. There was significant difference between post-test knowledge score of experimental and control group at P < 0.05 level of significance. Hence, the research hypothesis was accepted as P < 0.05 level of significance.

**DISCUSSION**

The study results showed that intervention on post-operative TAH was effective in the improvement of knowledge level in terms of post-operative nursing care. This result was proven by similar study found out in relation with demographic variables that 14 (46%) in interventional group and 18 (60%) in non-interventional were belonging to 45–54 years of age. Women who belonged to the Hindu religion were 23 (76%) in interventional group and 26 (80%) in non-interventional group. Majority of women had maximum level of education in both groups.[13] The knowledge score was also supported by a similar study result’s, In experimental group, the average pre-test knowledge score was 13 (65%) and poor among 7 (35%) whereas in post-test 12 (60%) sample were having good knowledge and 8 (40%) were average knowledge. The post-test score (19.95 ± 3.268) was more than pre-test experimental knowledge score (10.80 ± 3.84) and control group score (9.5 ± 4.2). The dissimilarity in both means was significant to the level of <0.05.[14] There was no significant association between pre-test knowledge score with selected sociodemographic variables of experimental and control groups.

**Strength of the Study**

1. This study had used non-invasive, non-pharmaceutical methods.
2. The research study was cost effective.
3. The research study was beneficial impact on knowledge regarding post-operative TAH care.
Limitations of the Study

1. Time period was very short to collect the data
2. It was difficult to arrange all the patient at the same time for intervention.

CONCLUSION

The study attempted to assess the effectiveness pre-operative instructional program on post-operative TAH. This preoperative intervention was given to mothers which became very powerful in enhancing the understanding post-operative abdominal care. So the researcher believed, this could advantageous the postoperative mothers. Based upon study findings and through statistics evaluation that conclusion had been drawn that intervention on post-operative TAH care was helpful for improve knowledge of women undergoing TAH and reduce their complications.

REFERENCES

11. George S. Conducted a Descriptive Study on Assess the Post-Operative Problem of Patients Undergoing Hysterectomy in AIMS Kochi; 2014.

How to cite this article: Thakur D, Kaur J. Effectiveness of pre-operative instructional program on knowledge regarding post-operative care among women undergoing abdominal hysterectomy. Natl J Physiol Pharm Pharmacol 2021;11(11):1237-1240.

Source of Support: Nil, Conflicts of Interest: None declared.