



# URINARY TRACT INFECTIONS DURING PREGNANCY AMONG ANTENATAL MOTHERS

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**Abstract:** Urinary tract infections are common during pregnancy. That's because the growing fetus can put pressure on the bladder and urinary tract. This traps bacteria or causes urine to leak. Here, the aim of the study is to assess the knowledge of antenatal mother regarding urinary tract infection during pregnancy in selected hospitals of Moradabad with a view to develop a self-instructional module on prevention of urinary tract infections based on the knowledge of the antenatal mothers. A descriptive research approach was used. The target population for the study was the antenatal mothers. Total 50 samples were selected using simple random sampling technique. A structure questionnaire was used to assess the level of knowledge regarding urinary tract infection during pregnancy in selected Hospitals of, Moradabad. Collected data was analysed by using descriptive and inferential statistics.

Majority of the antenatal mothers have moderate level of knowledge (64%) regarding urinary tract infection among antenatal mothers. There is no significant association between the level of knowledge regarding urinary tract infection among antenatal mothers with selected demographical variable was not found at  $p < 0.05$  level. The present study concluded that antenatal mother have moderate level of knowledge. Hence, the present study concluded that there is a moderate level of need to create awareness of urinary tract infection among the antenatal mothers.

**Keywords:** Urinary tract infection

## INTRODUCTION

UTI is a common problem in pregnant women. Around 8.3 million pregnancy cases are reported every year. It is because of changes in the urinary tract. The uterus sits directly on top of the bladder. As the uterus grows, its increased weight can block the drainage of urine from the bladder causing infection. The most common organisms that implicate UTI is E.coli (80%), staphylococcus aureus and staphylococcus saprophyticus. Depending on the site of infection UTI can produce different symptoms such as burning micturition, feeling of urgency, lower abdominal pain, fever, urinary incontinence, urine looks cloudy and so on.

Untreated UTI can lead to complications such as abortion, prematurity, low birth weight baby, still birth, preterm labour, preeclampsia, chronic pyelonephritis and rarely kidney failure. If it is treated early, then it will not harm the baby. Prevention of UTI is through drinking minimum 8 glasses of water in a day, empty the bladder before and after the sex, wash genital area with warm water before sex, take showers instead of bath, avoid tight fitting clothing and pantyhose, so on. It is typically treated with cephalexin or nitrofurantoin for 7 days.

Urinary tract infection can lead to poor maternal and perinatal outcomes. Investigating the epidemiology of UTI and antibiotics sensitivity among pregnant women is fundamental for care givers and health planners. A woman's health and behaviour in pregnancy affect the baby. Mother should not only take good care of her own health, but also go for regular checkups with health care professionals. In modern era, obstetric nurse care begins with antenatal care which is vital for satisfactory perinatal outcomes. They need to identify high risk factors and should give suitable interventions with care competence. Effective nursing care during UTI has shown more maternal fetal wellbeing and enhance their safety.

## THE PROBLEM

A study to assess the knowledge regarding urinary tract infections during pregnancy among antenatal mother in selected hospitals of Moradabad with a view to develop self-instructional module.

## OBJECTIVES

1. To assess the knowledge of antenatal mother regarding urinary tract infection during pregnancy.
2. To find out the association between the knowledge score of mothers regarding urinary tract infections and selected demographic variables.

## MATERIALS AND METHODS

A descriptive research design was used in this study to determine the antenatal mother knowledge towards urinary tract infection during pregnancy. The study was conducted in District Hospital of Moradabad district, Uttar Pradesh (India). Using purposive sampling technique, 50 antenatal mothers meeting the criteria and willing to participate in the study were selected. Self Structured Questionnaire on knowledge regarding urinary tract infection was used to assess the knowledge of mothers. Permission was obtained from the Medical Superintendent of District Hospital. Data were collected from March 4<sup>th</sup> to March 7<sup>th</sup> 2020 after obtaining consent from the participants. The data were analysed by using descriptive and inferential statistics.

## MAJOR FINDINGS AND DISCUSSION

Frequency (f) and Percentage (%) distribution of knowledge on Urinary Tract Infection among antenatal mothers.

**N=50**

Observation	Adequate		Moderate		Inadequate	
	F	%	F	%	f	%
Pre Test	18	36%	32	64%	0	0%

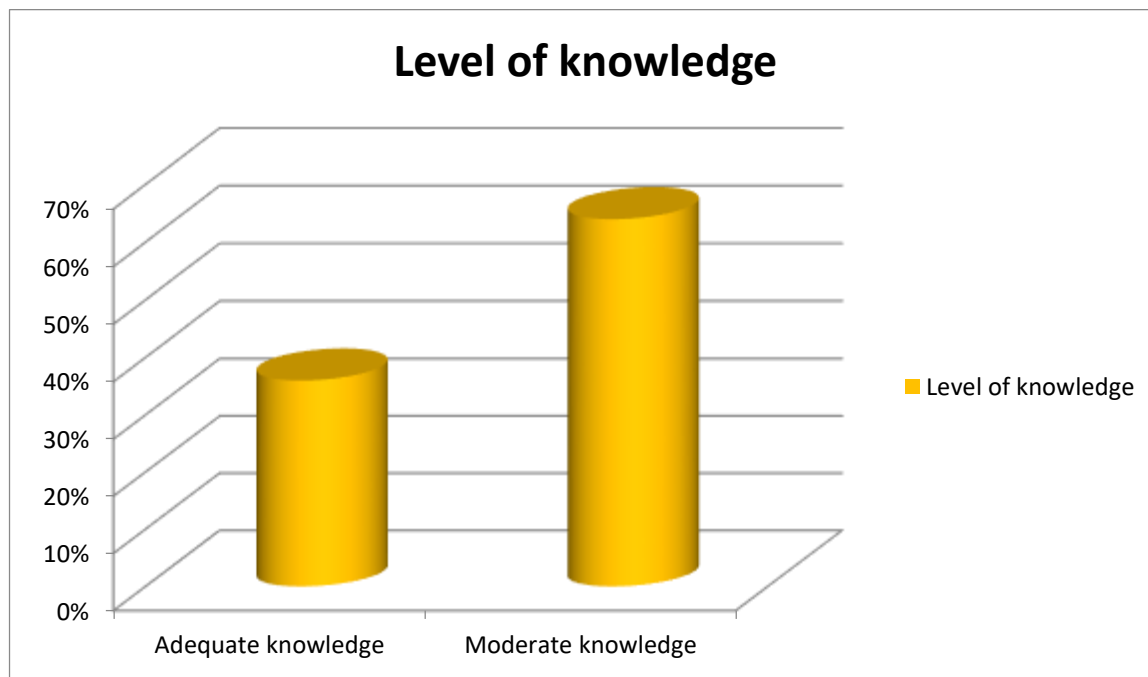


Figure: Bar diagram showing percentage distribution of knowledge on urinary tract infection.

### Association between the level of knowledge regarding urinary tract infection and selected demographic variables.

This section describes the association with demographic variables with the level of knowledge regarding the urinary tract infections during pregnancy among antenatal mother. To determine the statistical significance chi-square test was computed and the following research hypothesis “ $RH_1$  - There will be a significant association between knowledge score of mothers regarding urinary tract infection and selected demographic variables” was tested at 0.05 level of significance.

Table

**Association of demographic characteristics of antenatal mothers with the level of knowledge regarding urinary tract infection during pregnancy.**

N=50

Demographic Variable	Total sample no.	Level of knowledge pre-test						Chi-square	Df	P-value	Significant at p<0.05 level
		Adequate		Moderate		Inadequate					
Age in years		f	%	f	%	f	%				
18-22	17	9	18%	8	16%	0	0%	3.83	3	0.364	NS
23-28	26	17	34%	9	18%	0	0%				
29-31	3	2	4%	1	2%	0	0%				
32-35	4	4	8%	0	0%	0	0%				
<b>Religion</b>											
Hindu	28	19	36.5%	9	18%	0	0%	0.413	2	0.813	NS
Muslim	17	10	20%	7	14%	0	0%				
Christian	5	3	6%	2	4%	0	0%				

<b>Gestational age</b>											
1 <sup>st</sup> trimester	22	11	22 %	11	22%	0	0%	3.3	2	0.184	NS
2 <sup>nd</sup> trimester	17	13	26 %	4	8%	0	0%				
3 <sup>rd</sup> trimester	11	8	16 %	3	6%	0	0%				
<b>Area of residence</b>											
Rural	28	21	42 %	7	14%	0	0%	3.3	1	0.068	NS
Urban	22	11	22 %	11	22%	0	0%				
<b>Education of mother</b>											
Primary school	21	14	28 %	7	14%	0	0%	3.1	2	0.211	NS
Middle school	18	9	18 %	9	18%	0	0%				
High	11	9	18 %	2	4%	0	0%				

school and above			%								
<b>Education of husband</b>											
Primary school	16	8	16%	8	16%	0	0%	5.783	3	0.123	NS
Middle school	12	11	22%	1	2%	0	0%				
High school	16	9	18%	7	14%	0	0%				
Graduation and above	6	4	8%	2	4%	0	0%				
<b>Occupation of the mother</b>											
Home maker	46	29	58%	17	34%	0	0%	1.313	2	0.519	NS
Private	2	1	2%	1	2%	0	0%				
Government	2	2	4%	0	0%	0	0%				

Occupation of husband											
Government	5	4	8%	1	2%	0	0%	1.196	2	0.550	NS
Private	27	18	36%	9	18%	0	0%				
Agriculture	18	10	20%	8	16%	0	0%				
Monthly income (in rupees)											
5000-10000	30	19	38%	11	22%	0	0%	6.5	3	0.083	NS
11000-15000	12	9	18%	3	6%	0	0%				
16000-20000	3	0	0%	3	6%	0	0%				
21000-25000	5	4	8%	1	2%	0	0%				
<b>First pregnan</b>											



cy											
Yes	33	21	42 %	12	24%	0	0%	0.006	1	0.94	NS
No	17	11	22 %	6	12%	0	0%				
Source of information											
Health professional	21	16	32 %	5	10%	0	0%	3.792	2	0.150	NS
Family members	19	9	18 %	10	20%	0	0%				
Friends	10	7	14 %	3	6%	0	0%				

Table depicts the association of the level of knowledge regarding the urinary tract infection with the selected demographic variables. It shows that there is no significant association between age, religion, gestational age, area of residence, education of mother, education of husband, occupation of mother, occupation of husband, monthly income, first pregnancy, source of information regarding urinary tract infection with level of knowledge. Hence the H1 hypothesis is rejected.

**REFERENCES:**

- Parveen, K., Momen, A., Begum, A., & Begum, M. (2012). Prevalence Of Urinary Tract Infection During Pregnancy. *Journal of Dhaka National Medical College & Hospital*, 17(2), 8-12. Sheikh,
- M.A. (2000) .Incidence of urinary tract infection during pregnancy. *EMHJ - Eastern Mediterranean Health Journal*, 6 (2-3) ,265-271 ,2000
- MasindeA., GumodokaB., KilonzoA., & MshanaS. (1). Prevalence of urinary tract infection among pregnant women at Bugando Medical Centre, Mwanza, Tanzania. *Tanzania Journal of Health Research*, 11(3).
- Tadesse, E., Teshome, M., Merid, Y. et al. Asymptomatic urinary tract infection among pregnant women attending the antenatal clinic of Hawassa Referral Hospital, Southern Ethiopia. *BMC Res Notes* 7, 155.
- Hamdan, H.Z., Ziad, A.H.M., Ali, S.K. et al. Epidemiology of urinary tract infections and antibiotics sensitivity among pregnant women at Khartoum North Hospital. *Ann Clin Microbiol Antimicrob* 10, 2 (2011)
- Haider G, Zehra N, Munir AA, Haider A. Risk factors of urinary tract infection in pregnancy. *J Pak Med Assoc.* 2010;60(3):213–6.
- Giraldo PC, Araújo ED, Junior JE, do Amaral RL, Passos MR, Gonçalves AK. The prevalence of urogenital infections in pregnant women experiencing preterm and full-term labor. *Infect Dis Obstet Gynecol.* 2012;2012:878241.
- Souza RB, Trevisol DJ, Schuelter-Trevisol F. Bacterial sensitivity to fosfomycin in pregnant women with urinary infection. *Braz J Infect Dis.* 2015;19(3):319-323.
- Dimetry SR, El-Tokhy HM, Abdo NM, Ebrahim MA, Eissa M. Urinary tract infection and adverse outcome of pregnancy. *J Egypt Public Health Assoc.* 2007;82(3-4):203-218.
- Hillebrand L, Harmanli OH, Whiteman V, Khandelwal M. Urinary tract infections in pregnant women with bacterial vaginosis. *Am J Obstet Gynecol.* 2002;186(5):916-917.
- Matalingana, R.A. (2015). The spectrum of bacteria causing urinary tract infection among pregnant women attending Sabasaba clinic and their susceptibility to antimicrobial agents.
- Wamalwa, P., Omolo, J., & Makokha, A. (2014). Prevalence and risk factors for urinary tract infections among pregnant women.

- Elkashif, Mirfat. (2019). Urinary Tract Infection among Pregnant Women and its Associated Risk Factors: A Cross-Sectional Study. Biomedical and Pharmacology Journal. 12. 2003-2010.
- Elzayat, Mohamed & Barnett-Vanes, Ashton & Dabour, Mohamed & Cheng, Feng. (2017). Prevalence of undiagnosed asymptomatic bacteriuria and associated risk factors during pregnancy: A cross-sectional study at two tertiary centres in Cairo, Egypt. BMJ Open. 7. e013198. 10.1136/bmjopen-2016-013198.

