



“A COMPARATIVE STUDY TO ASSESS THE EFFECTIVENESS OF BETADINE SITZ BATH VERSUS NEEM EXTRACT SITZBATH ON EPISIOTOMY WOUND HEALING AMONG POST NATAL MOTHRES IN CIVIL HOSPITAL AT MAHESANA ”

¹Ms. Thakkar disha jagdishchandra, ² Ms Rekha B., ³ Mr. Rajesh Joshi

¹Student Of S.Y M.Sc. Nursing Obstretics and gynecological Nursing (2023-2024), ² Associate Professor Department Of Obstretics and gynecological Nursing, ³ Principal Of Rpmi Ratna Parbha Nursing College Vadnagar Affiliated By Hemchandracharya North Gujarat University, Patan

ABSTRACT . A comparative study to assess the effectiveness of betadine sitz bath versus neem extract sitz bath on episiotomy wound healing among primi postnatal mothers, in General hospital at mehsana. **OBJECTIVE:** 1.To Assess the episiotomy wound healing level. 2.To evaluate the effectiveness of Betadine sitzbath (experimental group I) on episiotomy wound healing. 3. To evaluate the effectiveness of Neem extract sitzbath (experimental group II) on episiotomy wound. 4. To compare the level of wound healing among postnatal mothers between experimental group I&II. 5. To find out the association between the post test level of episiotomy wound healing scores with their selected demographic variables in experimental group I (Betadine sitzbath) & experimental group II(Neem extract sitzbath). **Method:** The data was collected at General hospital at mehsana for a period of four weeks .The investigator selected 60 samples on the basis of inclusion criteria, and the samples were divided in to two groups (I&II). Among that 30 samples were experimental group I and other 30 samples were experimental group II, who met the inclusion criteria were selected by convenient sampling technique. **Result:**The data were analyzed and tabulated using descriptive and inferential statistics. The findings shows that the mean wound healing score in experimental group I in before Betadine sitzbath is 3.40 (SD±2.61) and after Betadine sitzhbath is 0.83 (SD±1.53) respectively. The paired t-test value is 5.71, which is significant at P<0.05 Level. And the mean wound healing score in experimental group II , before Neem extract sitzbath is 2.93 (SD±1.98) and after Neem extract sitzhbath is 0.37 (SD±1.03) respectively. The paired t test value is 8.60 , which is significant at P<0.05 The results shows that there is a significant difference between the mean post test score of Betadine sitzbath and mean post test score of Neem extract sitzbath on episiotomy wound healing among postnatal mothers .Therefore it is clearly proved by this study that Neem Extract Sitzbath is effective more than Betadine sitz bath on episiotomy wound healing.

Key Words- Effectiveness, comparative study, episiotomy, sitzbath, wound healing.

Introduction

Background of the Study

Motherhood is more than a premium birth centre – It is a way of experiencing birth as a normal, natural, completely unique and personal event in a family. Post partum period lasts from delivery to six weeks afterward, it is also known as fourth trimester. The postnatal mothers experience various physiological and psychological changes when she makes the transition from the pregnant woman to a mother. Early discharge plan for the postnatal mother can be confirmed by the evaluation of the mother's health status and comfort level, selfcare education. Assessment at the time of discharge includes vital signs, fundus, breast, uterus, bladder, bowel, lochia, episiotomy, Homan's sign and emotional status of the women. Episiotomy infection can be observed by persistent redness and swelling, separation of wound edges, purulent discharge and persistent pain. Episiotomy wound can cause a considerable discomfort and pain the perineum is extremely tender area and the muscles of perineum are involved in many activities. e.g sitting, walking, controlling urination and defecation. This discomfort interferes with the rest and sleep. Specific measures to control infection and promote wound healing are use of soap and water to wash vulva and perineum, change the perineal pad every 2 to 3 hours, place ice packs against the episiotomy for 1 hour period every 2 hours during the first 24 hours following birth, sit in warm sitz bath for 15 to 20 minutes, apply a topical anesthetic to the episiotomy at every pad change. pharmacological treatment on episiotomy wound healing, the pramoxine hydrochloride 1% and hydrocortisone acetate 1% in a meso-adhesive foam, were relieving episiotomy discomfort and wound healing for postnatal mothers. Sitzbath is one of the oldest, cheapest, and safest treatments for curing many common ailments. The technique exploits the reaction of the body to hot stimulus. Povidine Iodine is an antiseptic solution that is usually used in Iran for episiotomy wound healing. Previous research suggested that povidine- iodine has anti-inflammatory effects and anti-septic effects and pre- wound healing effects, by increasing the mRNA transcripts of growth factor - beta I and fibronectin, so povidine- iodine solutions are very effective for episiotomy wound healing.

Need of the study

The episiotomy wound has some risk which includes blood loss, pain, infections, delayed healing, dyspareunia and may contribute to maternal blues. (occur in 60% women. Pain and edema may inhibit urination and defecation after delivery. Therefore it is necessary to reduce episiotomy pain. The investigator from her personal experience during her clinical postings at postnatal wards identified many complications like resuturing, purulent discharge and mothers felt more discomfort due to episiotomy among postnatal mothers with episiotomy.

In worldwide there is considerable international variation in the rate of episiotomy. The rate is of 15% in England, 13% in Scotland, 10% in Wales and 22% in Northern Ireland, it is 8% in Holland, 50% in the USA and 99% in Eastern Europe. (2004)

- ◆ In united states, percentage of episiotomy performed out of all vaginal deliveries is 24.4%. episiotomy rate were higher among white women 37.9 than black women 26.9%. in united state the rate of episiotomy for operational deliveries was 15.3% in 2004. Overall episiotomy rate at Denmark was 3.7% . (2022)
- ◆ Overall rate of episiotomy was 20.1% including among nulliparas 34.9% and multiparas 9.8% (2016) ◆ India has documented high episiotomy rates of around 40% with over 90% in primigravida. (2023).
- ◆ Over all episiotomy rate was 67% for women whose delivery was conducted by doctors and for nurses it was 53.1%. episiotomy rate was very high 91.8% when delivery was conducted in private hospitals and rate were lower when conducted in secondary and primary level institution.(2014)
- ◆ In india the incidence of institutional normal vaginal deliveries 61.5% with 58.4% normal vaginal deliveries with episiotomy. among that midwives performed episiotomy at a lower rate (31.4%).

The researcher felt that, when postnatal mothers are cared with definite nursing measures during postpartum period, the severity of infections are reduced. So the researcher intended to do a study on postnatal mothers with episiotomy using two specific nursing procedures, in a view to reduce the complicating of episiotomy

Problem Statement

“A COMPARATIVE STUDY TO ASSESS THE EFFECTIVENESS OF BETADINE SITZ BATH VERSUS NEEM EXTRACT SITZBATH ON EPISIOTOMY WOUND HEALING AMONG POST NATAL MOTHRES IN CIVIL HOSPITAL AT MAHESANA ”

Objectives of the study

1. To Assess the episiotomy wound healing level.
2. To evaluate the effectiveness of Betadine sitzbath (experimental group I) on episiotomy wound healing.
3. To evaluate the effectiveness of Neem extract sitzbath (experimental group II) on episiotomy wound.
4. To compare the level of wound healing among postnatal mothers between experimental group I&II.
5. To find out the association between the post test level of episiotomy wound healing scores with their selected demographic variables in experimental group I (Betadine sitzbath) & experimental group II(Neem extract sitzbath).

Hypothesis

H1: There is a significant difference between episiotomy wound healing level.

H2: There is a significant difference between the mean pretest and posttest score on episiotomy wound healing among post natal mothers in experimental group I.

H3: There is a significant difference between the mean pre test and post test scores on episiotomy wound healing among post natal mothers in experimental group II.

H4: There is a significant difference between the mean post test score on episiotomy wound healing among post natal mothers between experimental group I&II.

H5: There will be a significant association between mean post test score on episiotomy wound healing among post natal mothers with their selected demographic variables in experimental group I and II.

Operational Definitions

1.COMPARATIVE STUDY: It refers to the statistical comparison of episiotomy wound healing between two groups.

2. EFFECTIVENESS: Effectiveness means producing an intended result. In this study it refers to the significant difference brought between the betadine sitzbath and neem extract sitzbath and it is measured in terms of wound healing process by using statistical measurements and its scores.

3.EPISIOTOMY: Episiotomy is defined as surgical enlargement of the vulval orifice for obstetrical purposes during parturition. In this study episiotomy is refers to a surgical incision made on perineum to facilitate the birth of the baby and it is measured by REEDA scale and its scores.

4. POSTNATAL MOTHERS: Postnatal mothers belongs to the period of beginning immediately after the child birth of a child and extending for about six weeks. In this study, it refers to primi mothers who have undergone normal vaginal delivery with episiotomy after a period of six hours to two weeks.

5. SITZ BATH: Sitzbath is a form of hydrotherapy given by using hot (or) cold, steam (or) ice to restore and maintain health. It increases blood flow to the pelvic and abdominal areas and alleviates a variety of problems. In this study it refers to immersing the perineum in a basin of warm water at a temperature of 105 o F for 10 minutes every morning and evening for 4 days.

6. WOUND HEALING: Restoration of integrity to injured tissue by replacement of dead tissue with viable tissue. CON... In this study it refers to absence of symptoms such as redness edema, echymosis, discharge, approximation as measured by REEDA scale and its scores .

7.NEEM EXTRACT: In this study it refers to a solution in which 30gms of neem paste is added in 5litre of water then the boiled solution is filtered and called as Neem Extract.

8.BETADINE SOLUTION: It is the pharmacologically available 10% povidine- iodine topical antiseptic solution.

Delimitations

- This study is delimited to:

1. The study is delimited to 60 samples.
2. Four weeks of data collection

Assumptions

1. Improper care of episiotomy may lead to infection.
2. Nurses have an important role in reducing episiotomy pain and promotion of wound healing.

ORGANIZATION OF FINDINGS

The data is analyzed and presented under the following headings

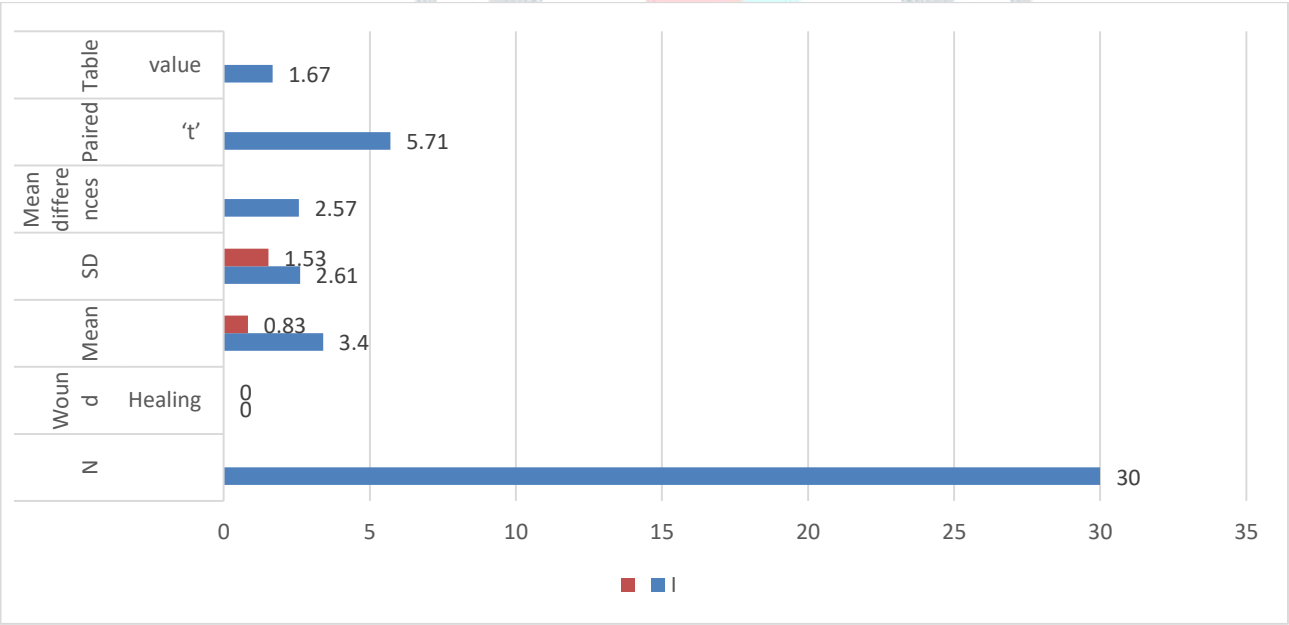
Comparison of Mean, Standard deviation, Mean difference and Paired "t" value between pretest and posttest score on wound healing in Group-I.

N=30

SI NO	Group	N	Wound Healing	Mean	SD	Mean differences	Paired 't'	Table value
1	I	30	Pretest	3.40	2.61	2.57	5.71	1.67
			Posttest	0.83	1.53			

df=29 P

<0.05'''



The table indicates that the pretest means core is 3.4(SD=2.56) and posttest mean score is 0.83(SD=1.50) and the Paired "t" value is 5.71 which is significant at P<0.05level.

From the mean scores it is clear that the patients in group I have a lower level of wound healing score in posttest score than the pretest score and this indicates that there is an improvement of wound healing after betadine sitzbath.

Comparison of Mean, Standard deviation, Mean difference and Paired "t" Value between pretest and posttest score on wound healing in group-II

N=30

SI NO	Group	N	Wound Healing	Mean	SD	Mean differences	Paired 't'	Table value
1	II	30	Pretest	2.93	1.98	2.57	8.60	1.67
			Posttest	0.37	1.03			

df=29 P<0.05'''

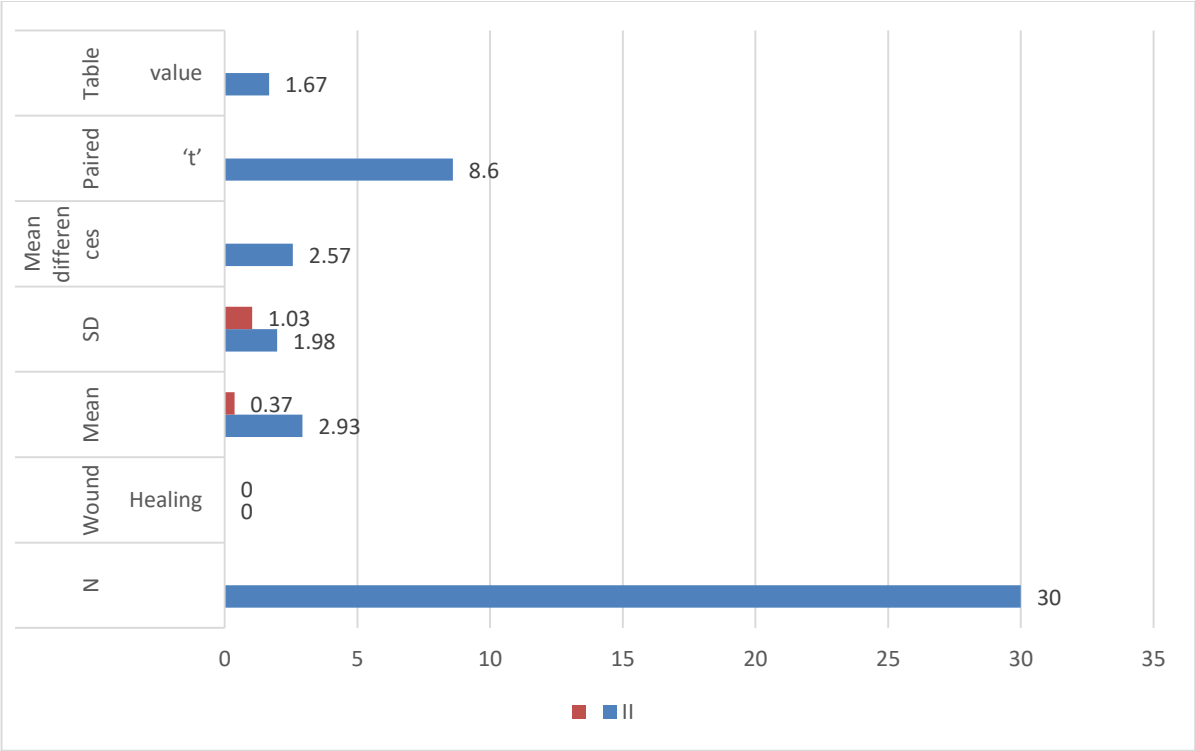


Table indicates that the pretest mean score is 2.93(SD=1.94) and posttest mean score is 0.36(SD=1.01) and the Paired "t" value is 8.60, which is significantat P<0.05'''LEVEL.

From the mean scores it is clear that the mothers in group I have a lower level of wound healing score in posttest score than the pretest score and this indicates that there is an improvement of wound healing after neem extract sitzbath.

REFERENCES

1. Bobar Lowdermilk, et.al.,(1995).”Maternity nursing”, (4th ed.). Mosbys company. Pp 302-304.

2. Daftary,(2004).”Manuel of obstetrics”,(1st ed.). New Delhi: Elsevier India private ltd. Pp 204.

3. Duttta. D.C.,(2004).”Textbook of Obstetrics”,(4thed). Calcutta: New central book agency. Pp 568-571

4. Marriner Ann.,(202). ”Nursing theories and its Work”, (3rd ed.). Philadelphia: Mosby Publication. Pp 184.

5. George.B,(1995).”Nursing Theories”,(4th ed.).California: A Pearson Education Company.Pp 468

6. Gurumani.N,(2005).” An Introduction To Biostatitics”, (2nd ed).Chennai: MJP Publishers. Pp 212-215.

7. Jacob Annamma,(2005).” A Comprehensive Text Book of Midwifery”, (1st ed.). New Delhi: Jaypee brothers. Pp 516.
8. Lewis, et.al.(2004). “Medical surgical nursing”, (7th ed.). London: Mosby company.
9. Littleton.Y.(2007). ”Maternity Nursing Care”, (1sted.). Haryana: Sanat printers. Pp 352-354.
10. Murray., and Mc Kinney.,(1998).”Foundation of Maternal –Newborn Nursing”, (2nd ed.). Pennyslavia: W.B Saunders Company. Pp 408-409.
11. Pillitteri adele .(2003).” Maternal and child health Nursing”, (8th ed.). Philadelphia: Lippincott Williams & Wilkims. Pp 512-514.
12. Polit. D.F.,(2008).” Introduction to Nursing Research”, (8th ed.). Philadelphia: Lippincott Publications. Pp 344-345, 592.
13. Polit, and Hungler.,(1999). “Nursing research”,(6th ed.). Philadelphia: Lippincott. Pp 308,343,472.
14. Sunder Rao.P.S.,(1999).”An Introduction to Biostatistics”, (3rd ed.). New Delhi: Vora Medical Publication. Pp 94,100.
15. Littleton.Y.(2007). ”Maternity Nursing Care”, (1sted.). Haryana: Sanat printers. Pp 352-354.
16. Marriner Ann.,(202). ”Nursing theories and its Work”, (3rd ed.). Philadelphia: Mosby Publication. Pp 184.
17. Martin., and Reader.,(1997). “Maternity Nursing”, (18th d.). New York: Lippincott. Pp 561-564.
18. Mahajan B.K.(2005).”Methods of Biostatistics,” (6th ed.). New Delhi: Jaypee Brothers Medical Publishers. Pp 128.
19. Calvert . Et al (2000), Review minimizing postpartum parvia of research pertaining to perineal care in child bearing women. Journal of advanced nursing ,32 (2) 407
20. Coats et . al (1980), A comparision between midline and mediolateral episiotomies. British Journals of obstetrics and gynaecology, 87, 407.