



## Knowledge of Women Regarding Complications of Caesarean Section in AL- Najaf City Hospitals.

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### Abstract:

**Objective:** to assess women's knowledge toward complication of caesarean section and to find out the relationship between women's knowledge and their demographic data.

**Methodology** A cross-sectional descriptive approach was carried out through the present study in order to achieve the early stated objectives. The study was begun from January, 1<sup>st</sup>, 2019 to April, 10<sup>th</sup>, 2019. The study is conducted in Al-Najaf City in Iraq in Cesarean room of Al Zahraa' Teaching hospital.

**Results:** revealed that majority of women have acceptable knowledge regarding cesarean section complication. There was non-significant association between the women knowledge toward cesarean section complication and their age, Economic status. The study result indicates that there was significant association between the overall women knowledge toward cesarean section complications and their Occupational status. Also there is highly significant relationship between the women knowledge toward cesarean section complications and their level of education.

**Conclusion:** majority of the women had acceptable knowledge concerning complications of cesarean section.

**Recommendation:** The study recommends that the Nurses need to be joining in special courses in order to improve their knowledge toward cesarean section complications so they will participate in educating patients through information obtained from the courses above because they feel more comfortable especially with the nurses and A population-based study should be conducted to increase women's awareness about the cesarean section complication.

**Key words:** Knowledge, Caesarean Section.

### Introduction

In the United States, about one of every three deliveries is by cesarean section. Although this procedure has become routine, it is not benign. Cesarean section brings an increased risk of maternal morbidity and mortality when compared to vaginal deliveries. One of the most commonly evaluated areas of maternal morbidity is wound infection/complications. There have been numerous studies evaluating these factors which increase the risk of infections as well as the best form of wound closure for prevention. <sup>(1) (2)</sup>

The majority of these proceed smoothly and safely; however, caesarean section is a major, open abdominal procedure, often performed in an emergency setting. The incidence of re-laparotomy after caesarean section is 0.12–1.04%.<sup>(3)(4)</sup>

The most common indications being intra-abdominal bleeding, intra-abdominal abscess or bladder and bowel complications. As such, there are a number of immediate and delayed complications that may be encountered and the obstetrician must be familiar with and able to rectify these.<sup>(4)</sup>

General Anesthesia and spinal anesthesia are the options that are available for procedures like cesarean section in developing countries. Pregnant women's knowledge and attitude about these techniques are very important for mothers to come to hospital and deliver because they may have fear of complications and even up to death.<sup>(5)</sup>

Even though this procedure is relatively safe, there are reports of major complications that have been attributed to human errors like lack of vigilance, wrong labeling or presentation of syringes and ampoules, or underestimation of the double-checking concept. In our center, 4000 caesarean sections are done in a year with 85% under spinal anesthesia. This is the first report of uncontrollable jerking of the lower limbs followed by hyper-tension and arrhythmias following administration of spinal anesthesia.<sup>(6)</sup>

### **Statement of study:**

Knowledge of Women Regarding Complications of Caesarean Section in AL- Najaf City Hospitals.

1. To assess women's knowledge about complication of caesarean section in Al-Najaf city.
2. To find out relationship between women's knowledge and their demographic data.

### **Design of the study:**

A cross-sectional descriptive approach was designed to meet the previously mentioned objectives of the current study the period of the study is from 1<sup>st</sup>, 2018 to April, 10<sup>th</sup>, 2018.

### **Setting of the study:**

The study was carried out at AL-Zahraa hospital in AL-Najaf city.

### **Sample of the study:**

A purposive sample of (100) pregnant women was taken in the study.

## Results:

**Table (1): Statistical distribution of study group by their Socio-Demographic Data.**

Items	Sub-groups	Study group	
		Total = 50	
		Frequency	Percentage
Age / Years	17-26	52	52.0
	27-36	32	32.0
	37-46	16	16.0
Levels of Education	Illiterate	15	15.0
	Primary school	46	46.0
	Secondary school	22	22.0
	Institute	11	11.0
	College	5	5.0
	Higher Studies	1	1.0
Occupation Status	Governmental Employee	15	15.0
	Private Sector Employee	0	0.0
	Housewife	83	83.0
	Free Job	2	2.0
Economic Status	adequate	32	32.0
	Adequate to Some Extent	52	52.0
	Inadequate	16	16.0

This table shows statistical distribution of patients group by their socio demographic data, it explains that the majority of the patients subgroup are: patients with ages between (17-26) years old (52%), those who have a primary school education (46%), and those that are housewives (83%), and finally those with somewhat adequate economic status (52%).

**Table (2): Statistical distribution and differences among study groups by their Reproductive and Clinical Data.**

Items	Sub-groups	Patients group Total = 50		Chi-Square (P value)
		Frequency	Percentage	
No. of Gravida	0-3	75	75.0	1.28 (0.25)
	4-7	25	25.0	
Para	0	35	70.0	8 (0.004)
	≥ 1	15	30.0	
Type of SC	Emergency	79	79.0	25.48 (0.000)
	Elective	21	21.0	
Previous SC	Yes	62	62	10 (0.018)
	No	38	38	
No. of SC	0	65	65.0	
	1-3	31	31.0	
	4	4	4.0	
Previous Surgery	Yes	12	12	
	No	88	88	
Type of Surgery	Appendicitis	83	83.0	
	Tonsillitis	6	6.0	
	Uterine Cystectomy	7	7.0	
	Thyroidectomy	4	4.0	
Chronic Disease	Yes	34	34	
	No	66	66	
Type of Chronic Disease	Diabetes Mellitus	64	64.0	
	Hypertension	8	8.0	
	Ischemic Heart Disease	28	28.0	

This table shows statistical distribution and differences among patients groups by their clinical data, it explains that the majority of the patient's subgroup is patients with no previous cases of abortion (58%), patients that had previous births (70%). Inferential statistical analysis shows that there is no effect for the previous cases of abortion on the occurrence of the current abortion (p value = 0.25). The same table also shows that the first trimester is the period of pregnancy in which most cases of abortion occur.

**Table (3): Assessment of women's responses about questions related to complication of caesarean section.**

Question	MS	RS	Assess.
1- Complications of the cesarean section sometimes	1.38	46	Fail
2- Caesarean section may lead to	1.66	55.33	Pass
3- Gets after caesarean section sometimes	1.86	62	Pass
4- Common complications after caesarean section	1.67	55.67	Pass
5- Caesarean section sometimes may lead to	1.81	60.33	Pass
6-It may happen after caesarean section sometimes	1.28	42.67	Fail
7- Caesarean section may sometimes lead to	1.34	44.67	Fail
8- From complications sometimes	1.79	59.67	Pass
9- Sometimes it may get	1.53	51	Pass
10- Caesarean section may sometimes lead to	1.62	54	Pass
11- Complications of spinal anesthesia sometimes	1.47	49	Fail
12- Spinal anesthesia sometimes may result	1.63	54.33	Pass
13- It may happen sometimes	1.41	47	Fail
14- From complications of spinal anesthesia are	1.17	39	Fail
15- Spinal anesthesia may sometimes lead to	1.19	39.67	Fail
16- Complications of general anesthesia sometimes	1.44	48	Fail
17- General anesthesia may sometimes lead to	1.54	51.33	Pass
18- Sometimes it may get	1.27	42.33	Fail
19- complications of general anesthesia sometimes	1.36	45.33	Fail
20- General anesthesia may sometimes lead to	1.64	54.67	Pass

This shows the descriptive statistics and assessment of women knowledge about questions related complication of caesarean section, it explains that the assessment of knowledge is (fail) according to the questions (1, 6 , 7 , 11 , 13 , 14 , 15 , 16 , 18 , 17) because the mean of scores of these questions are below the cut-off point (cut-off point = 1.5, ratio of scores (RS) = 50%), while the assessment of the other questions is (pass) as the mean of scores of these questions are higher than the cut-off point

**Table (4): Assessment of women's responses about questions related to postnatal care**

	MS	RS	Assess.
<b>Overall Knowledge Assessment</b>	1.503	50.1	<b>Pass</b>

This table is the overall assessment of women knowledge about questions related complication of caesarean section, it shows that the overall assessment of knowledge is pass (acceptable) as the mean of scores of all questions are higher than the cut-off point (cut-off point = 1.5) .

**Table (5): Association between overall knowledge and the demographic data.**

Demographic date	Chi Sq.	t-test	P value
<b>Age</b>	-	0.02	<b>0.98</b>
<b>Level of education</b>	13.23	-	<b>0.021</b>
<b>Occupational status</b>	8.39	-	<b>0.015</b>
<b>Economic status</b>	2.88	-	<b>0.23</b>

This table shows that there is a high significant relationship between overall knowledge of the women and each of (level of education and occupational status).

### **Discussion:**

According to Table 1 shows that, about half of the study samples are within group (17-25) years. **Jemal, et al., (2016)** agree with result. Regarding educational level about 46% from study sample are primary school education. <sup>(7)</sup>

Regarding to occupation, the majority of the study sample are housewives. This result is agree with (**Jemal, et al., 2016**) that show that majority of study sample are housewives. Concerning to economic status, the half percentage from them have adequate to some extent. <sup>(7)</sup>

According Table 2 shows that about over half of women have (0-3) children. Regarding of type of caesarean section majority of study sample is emergency caesarean section. Concerning to previous surgery majority of women are no previous surgery. This result is agreed with **Smaill and Grivell, (2014)** that show that majority of women are no previous surgery. Regarding to chronic diseases more than half of study sample have diabetes mellitus According to Tables. indicate that the knowledge women have efficient knowledge regarding to the items: (caesarean section may lead to, gets after caesarean section sometimes, common complications after caesarean section,

caesarean section sometimes may lead to, from complications sometimes, sometimes it may get, caesarean section may sometimes lead to, spinal anesthesia sometimes may result, general anesthesia may sometimes lead to, general anesthesia may sometimes lead to). While, the nurses have deficient knowledge with remaining items.

Regarding to overall assessment of women knowledge toward complication of caesarean section Table 5, indicate that the women have acceptable knowledge about complication of cesarean **Mittal, et al., (2005).** <sup>(8)</sup>

The study results indicate that there is a high significant relationship between women' knowledge toward complication of cesarean with level of education and occupation. This result is agree with **Fawcus and Moodley, (2013)** that show significant relationship between complication of cesarean with level of education and occupation. While, there is a non-significant relationship with remaining demographic variables. <sup>(9)</sup>

### **Conclusions:**

The result of study indicate that Majority of the study sample have acceptable knowledge toward complications of cesarean section, There is a strong relationship between (level of education and occupational status) with women's knowledge about complications of cesarean section and finally there is a non- significant relationship between women's knowledge about complication of cesarean section with remaining socio-demographic data.

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