

# [Studies related to obstetrical emergencies nursing essay](https://assignbuster.com/studies-related-to-obstetrical-emergencies-nursing-essay/)

Review of literature is an essential component of research study as it provides a broad understanding of the research problem. A review of related literature involves the systematic identification, location, scrutiny and summary of written materials that contain information on research problem (Polit and Hungler, 1998). Keeping this in mind, the investigator studied and analyzed into the accessible sources and gained in-depth understanding from the related studies about the first aid management of obstetrical emergencies.

The role of midwife is unique in the care and treatment of a mother and child. Throughout the birth process; the role is comprehensive and involves education treatment and collaboration with a more skilled medical team. The estimate of mortality due to poor delivery practices was over 110 maternal deaths/100, 000 live births. About 40 -60 % of death of women aged 15- 34 years were attributed to pregnancy and childbirth. The medical complications precipitating death, haemorrhage, hypertension and infection were also major causes of mortality related to abortion. The midwife must be prepared for all emergencies, including medical factors such as obstetric complications, referral problems such as transportation, inadequacies, and belief factors such as fear of hospitals. Risk can be reduced by frequent consultations with health workers during pregnancy, using trained attendant at every birth, being aware of danger signs, spacing pregnancies over two years apart, avoiding pregnancies at young or old ages, maintaining proper nutrition and work load, and involving midwifes at all levels of care. – Kebe. Y(2000)

## STUDIES RELATED TO OBSTETRICAL EMERGENCIES

Obi SN, Ozumba BC.. et. al (2001), conducted a retrospective study to identify the factors of unbooked obstetric emergency cases which increases the maternal mortality at University of Nigeria Teaching Hospital, Nigeria. The study concludes that lack of basic education and poverty are the major identifiable risk factors. Improving health care facilities, female education and regular training courses of medical personnels will help to reduce the maternal mortality.

Ray. A. M, Salihu. H.(2004) conducted a study to review the results of 15 Traditional birth attendants(TBA) and midwife based interventions that aim to improve skilled assistance in delivery and recognition and referral of complications. Outcome measures used to evaluate the impact of the programmes varied. Five of the five programmes reviewed that evaluated the impact on maternal mortality demonstrated decline in maternal mortality ratios. Two of three studies measuring morbidity related indicators found improvement of some but not all morbidity outcomes. Six of seven showed a trend of improved referral rates. Three of three found high levels of knowledge retention among trained TBAs. Programmes with the greatest impact utilised TBAs and village midwives with multisectorial interventions. These findings suggest that TBAs and village midwives contribute to positive programme outcomes.

Sharon Maslovit, Gad Barkai(2004) conducted a study to assess the effectiveness of simulation based training programme among midwives and obstetricians in Israeli Center for Medical Simulation, United Kingdom. One hundred and sixty five samples were selected by random method. Among the samples 77 were obstetricians and 88 were midwives. Questionnaire responses showed that post-test score (79. 4 ± 4. 3) were more than pre-test score (70 ± 5. 3). The study concluded that employing high fidelity simulations of obstetrical emergencies has great teaching and learning potential and simulation can provide a learning experience that facilitates knowledge application to midwifery practice.

Kildea S, Kruske S, Bowell L (2006), conducted a descriptive study to improve the maternity emergency skills and knowledge of health service providers, without midwifery qualification at Institute of Advanced Studies, Charles Darvin University, Northern Territory Australia. The samples were given multidisciplinary short course aimed at improving knowledge and skills in detection, management and referral of obstetrical emergencies. The study concluded that the course was an effective strategy to improve the maternity services offered to women in remote Australia.

Draycott. T, Sibanda. T…et. al (2006), conducted a cohort observational study to evaluate whether obstetrical emergency care improves the neonatal outcomes. The samples are the term, cephalic presenting singleton infant. The study reveals that the infants born with 5-minute Apgar scores of Crofts. Eills…et. al (2007), conducted a study to assess the effectiveness of obstetric emergency training programme on knowledge regarding obstetric emergencies among medical graduates in Bristol Medical Simulation Centre, England. The result of the study showed significant difference between pre-test and post-test. Post-test score was (23. 1) more while comparing to pre-test score (18. 1) and p < 0. 001.

Prem Kumar (2009), conducted a study to evaluate the risk factors and management of maternal and perinatal outcome of uterine rupture was conducted in Department of Obstetrics and Gynaecology, JIPMER, Pondicherry. Two fifty three case of uterine rupture was managed in 10 years. The result showed that 128 cases (50. 8%) of uterine rupture occurred in a scarred uterus and 125 (49. 40%) occurred in unscarred uterus. The predisposing factors include cephalopelvic disproportion in 69 cases (27. 25%), malpresentation in 20 (7. 90%) cases, labour induction in 14 cases (11. 64%) and multiparity in 20 cases (7. 90%). Repair of uterus was done in 147 cases (58. 33%) and hysterectomy in 105 cases (41. 51%). The study concluded that there were 7 maternal deaths (2. 76%) and perinatal mortality was 94. 07%. This study reveals that the warning of the impending complications was not detected and treated in time.

Partamin, Kim.. et. al (2010), conducted a study to assess knowledge and performance of skilled birth attendants providing emergency obstetric and newborn care in Afghanistan. Midwives and doctors scored similarly in assessments of decision making and performance of technical skills. Skilled birth attendants showed weakness in specific steps to manage common high risk emergencies. The study concludes that midwives and doctors in Afghanistan are similarly competent. In-service training and job rotation could help skilled birth attendants retain their emergency obstetric care skills.

Sabitha Nayak(2011) – to assess the knowledge on first aid measures of obstetrical emergencies among health members in Natekal PHC(Mangalore). The study finding revealed that majority of the samples 55% were in the age group of 25-30 years and 39 % received information from the teaching programs, 20% from mass media 13% from friends and 17% of them do not have exposure to any source of information about the first aid practices. The results showed that majority of the samples 62% had good knowledge, and 38% had average knowledge about the first aid practice. There is significant association between knowledge and demographic variables like age, educational status, and no significant association with membership in any social organisation, occupation and place of living.

Puri R, Rulisa S. et. al (2012), conducted a study to determine the knowledge, attitude and practice of obstetric care providers in Bugesera District, Rwanda. The study captured 87% of obstetric care provider, most expressed a need to improve their knowledge (60. 6%) and skill confidence (72. 2%) in safe motherhood. The mean percentage of correct answers for 50 questions assessing overall knowledge was 46. 6%, in which 39. 3% was correct on normal labour and 37. 1% was correct on obstetrical complications. The study had identified that there was a need to improve safe motherhood knowledge and practices of obstetric care providers.

Ameh C, Hofman J.. et. al (2012), conducted a study to assess the impact of emergency obstetric care training in Somaliland, Somalia. The study result showed that healthcare providers reacted positively to the training, with a significant improvement in 50% of knowledge and 100% of skills. The study concludes that the training impacted positively on the availability and quality of emergency obstetric care and resulted in “ up skilling” of midwives.

The above studies reveal that midwives do lack knowledge on obstetrical emergencies and based on their knowledge training programmes are recommended to improve their level of knowledge to practice effective care during obstetrical emergencies. From these studies the investigator gained in-depth knowledge and thus it helped in discussion and comparing the level of knowledge of the midwives with the present study.