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# A STUDY TO ASSESS THE KNOWLEDGE OF WOMEN REGARDING DYSFUNCTIONAL UTERINE BLEEDING IN SELECTED OPD AT MATERNITY HOSPITAL, TIRUPATHI.

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### **ABSTRACT:**

Dysfunctional uterine bleeding it includes menorrhagia, metrorrhagia, polymenorrhea, fibroids, The research approach adopted for this study is quantitative approach. The research design adopted for the study was descriptive design. The sample consist of 100 women aged 30-45 years selected at maternity hospital, Tirupathi. The knowledge was assessed by using self-structured questionnaire. Booklet was given to the study participants on the same day. The result shows that 50% had inadequate knowledge and 35% had moderate knowledge and 15% had adequate knowledge. The calculated Standard deviation 14.50 mean value (47.31). The result clearly showed that women had lack of knowledge regarding dysfunctional uterine bleeding.

**Key words**: Assess, knowledge, Dysfunctional uterine bleeding, women

### INTRODUCTION

Dysfunctional uterine bleeding (DUB) is irregular menstrual bleeding that is not caused by a serious condition such as disease or pregnancy complications it is usually caused by changing hormone levels which may affect ovulation DUB is the most common problem faced by gynecologist today with many treatment options with existing and new ones being developed.

DUB is the most common cause of abnormal uterine bleeding near the beginning and end of womens reproductive life. It occurs most often in women above 40 years (50%) of causes and in adolescents (20%) of causes. in united states DUB is a common diagnosis is making up to 5-10% of cases in clinical outpatient setting, obese females tend to have irregular menstrual cycle due to production of estrogen related to degree of adipose tissue.

Now a days uterine bleeding is very common among women and adolescent age group.

Many women in hospital gynec affected by abnormal uterine bleeding and came to know that they don't have enough knowledge regarding dysfunctional uterine bleeding (DUB). In united states about 5-10% of cases in clinical outpatient setting were diagnosed to have dysfunctional uterine bleeding in which 50% of cases occurred in the age group of more than 40years women. 20% of dysfunctional uterine bleeding cases are seen among

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adolescent girls and 40% of cases among women above 35-45 years of age. Dysfunctional uterine bleeding is defined as excessive heavy 80ml per month or prolonged uterine bleeding in the absence of systemic or genital tract pathology. it affects 10% of women and is the most common cause of iron deficiency anemia and gynecologist referral although upto 30% of women report symptoms. it has been shown that 55.7 of adolescent experience abnormal menstrual bleeding in the first year or so after the onset of menarche because of immaturity of the hypothalamus pituitary ovarian axis leading to anovulatory cycle. it generally takes 18 months to 2 years for regular cycles.

Awomen is one of gods greatest and complex creation. Women health is one of the mosthighest priority. a healthy women makes happy family which builds up nation. in concern to the women menstruation dysfunctional uterine bleeding is a common gynecological disorder that affect any women during her reproductive years. The earliest reference to the problem of dysfunctional uterine bleeding are in ancient works (1400BC). Hippocrates applied to the breast as a cure for bleeding.

Recurrent vaginal bleeding is a rare symptoms in pre pubertal girls. When the vaginal bleeding is cyclic and lasts for two to five days, isolated menses should be considered the first menstruation normally appears approximately two years after the breast development. The occurrence of menstrual – like bleeding before telarche is very rare and has also been defined as premature menarche analogous to premature pubarche and premature telarche.

There are various words used to refer to the quality of being women, the term women hood merely means the state of being awomen, having passed the menarche. Feminity is used to refer to set of typical female qualities, every women has a nature for caring others and nurturing life. Having reached women hood, no women feels complete without becoming a mother. Nurturing life and bringing up children forms an important part in her life, to bear a child the women plays a vital role and this organ is what is anatomically termed as uterus.

A healthy women usually reaches the stage of menarche and attains womanhood in a normal manner and a women health is considered to be asset not only to her but also to her family. The one has health has hope, and the one who has two hope has everything. Among the condition affecting women, the uterus is affected by various diseases which can either be communicable or Non-communicable. By the year 2015, 54% of all deaths in the world will be due to Non-communicable diseases.

Dysfunctional uterine bleeding (DUB) is irregular menstrual bleeding that is not caused by a serious condition such as disease or pregnancy complications. it is usually caused by changing harmone levels which may affect ovulation. DUB is the most common problem faced by gynecologist today with many treatment options with existing and new ones being developed. DUB is the most common cause of abnormal uterine bleeding near the beginning and end of womens reproductive life. It occurs most often in women above 45 years (50%) of cases and in adolescent (20%) of cases. DUB is common diagnosis making up to 5-10% of cases in clinical outpatient setting, the etiological factors responsible for DUB include genital tract infertility, uterine fibroids, endometrial cancer, blood dyscrasias, thyroid and adrenal gland dysfunction, liver and kidney problem as well as stress emotional stress, excessive exercises and obesity increases the risk of DUB.

The clinical manifestation of DUB involves menstrual bleeding that occurs more often than every 21 days, bleeding which lasts longer than 7 days, blood loss more than 80ml including passage of clots. These symptoms are sign of serious problems.

### STATEMENT OF THE STUDY

A study to assess the knowledge of women regarding dysfunctional uterine bleeding in selected OPD at maternity hospital, Tirupathi.

### **OBJECTIVES OF THE STUDY**

To assess the knowledge regarding dysfunctional uterine bleeding among women.

To determine the association between the knowledge on dysfunctional uterine bleeding among women with demographic variables.

To develop an information booklet regarding dysfunctional uterine bleeding.

### **MATERIALS AND METHODS:**

The quantitative research approach which is most appropriate in the field of education for its practicability in real life situations. The present study was conducted in the OPD at maternity hospital Tirupathi. The population were 100 women aged 30-45 years using sampling technique was non-probability sampling technique who fulfill the inclusion criteria from the selected maternity hospital tirupathi, after obtaining formal permission from the institution and ethical board. The selected maternity hospital were approached to obtain permission. The total 100 women were selected for the study. After conducting the exam we educate through information booklet. The demographic data were collected from the women which include Age, married, marriage in years, religion, educational status, occupation, annual income, family type, number of children, are you undergo tubectomy, source of information. The structured questionnaire was provided to the women to assess their knowledge regarding dysfunctional uterine bleeding. The questionnaire contains 30 multiple choice questions which covers definition, causes, signs and symptoms, management, prevention. 50% had inadequate knowledge 51-75 had moderate knowledge >75% had adequate knowledge.

### **DESCRIPTION OF INTERVENTION:**

Through information booklet we educate the women it include definition, causes, symptoms, management, prevention.

## **RESULTS:**

# Distribution of demographic variables of women regarding dysfunctional uterine bleeding

S.NO	DEMOGRAPHIC CHARACTERISTICS		FREQUENCY (N)	PERCENTAGE(%)	
1	Age in years	30-35	6	6.00	
		36-40	32	32.00	
		41-45	32	32.00	
		46-50	30	30.00	

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2	Marital status	Single Married Widow Separated	4 94 1 1	4.00 94.00 1.00 1.00
3	Duration of marital life	<2 years 3-5 years 6-8 years > 8 years	4 17 13 66	4.00 17.00 13.00 66.00
4	Religion	Hindu Muslim Christian Others	80 9 10 1	8.00 9.00 10.00 1.00
5.	Educational status	Illiterate Primary Education Secondary Education HigherSecondaryEducation Graduation Post-Graduation	42 42 12 2 1	42.00 42.00 12.00 2.00 1.00 1.00
6	occupation	Home maker Coolie Self-Employee Private employee Govt employee	41 33 4 19 3	41.00 33.00 4.00 19.00 3.00
7	Monthly income	Below 3000 3001-6000 6001-9000 More than 9000	5 5 14 76	5.00 5.00 14.00 76.00
8	Type of family	Nuclear Joint Extended	57 41 2	57.00 41.00 2.00
9	Number of children	None One Two More than 2	8 41 45 6	8.00 41.00 45.00 6.00

10	Age at menarche	11 years 12 years 13 years 14 years	4 78 14 4	4.00 78.00 14.00 4.00
11	Undergone tubectomy	Yes No	95 5	95.00 5.00
12	Source of information	Newspaper and Magazines Radio & Television Healthprofessionals& Family members Friends and Relatives	4 4 44 48	4.00 4.00 44.00 48.00

Distribution of knowledge scores on dysfunctional uterine bleeding among women in selected OPD in maternity hospital Tirupathi.

Aspects of knowledge		Knowledge score						
Knowledge on dysfunctional uterine		IN-Adequate mode		moderate	oderate		adequate	
bleeding		knowledge		knowledge				
		know	<mark>ledg</mark> e					
		N	%	N	%		N	%
		50	50	35	35		15	15
OVERALL			50		35			15

Shows that out of 100 women majority 50% had inadequate knowledge 35% had moderate knowledge 15% had adequate knowledge on dysfunctional uterine bleeding.

MEAN, STANDARD DEVIATION AND STD. ERROR MEAN, T-VALUE OF KNOWLEDGE SCORES ON DYSFUNCTIONAL UTERINE BLEEDING AMONG WOMEN IN SELECTED OPD IN MATERNITY HOSPITAL TIRUPATHI

S.no	Level of Knowledge	Mean	Std. Deviation	Frequency	Percent
1	Inadequate	35.76	3.107	50	50.00
2	Moderate	51.89	5.95	35	35.00
3	Adequate	15.13	3.248	15	15.00
	Total			100	100.00

### **DISCUSSION:**

In the study out of 100 reproductive age women's majority 50(50%) had inadequate knowledge, 35(35%) had moderate knowledge 15(15%) had adequate knowledge on dysfunctional uterine bleeding the researcher revealed that there was statistically significant association between the knowledge scores on demographic variables it include age in years, occupation significantly p< 0.05 level, educational status significantly p<0.01. item analysis also done for my study.

### **CONCLUSION:**

It was concluded that knowledge of Dysfunctional uterine bleeding, riskfactors, etiology and its management was moderate so, there is a need to educate the rural women to increase awareness about Dysfunctional uterine bleeding. Intensive enlightenment of population using the mass media by trained personnel is recommended. Information booklet also provided for my study.

### REFERENCE

- 1. Dutta DC..," text book of gynecology". New centeral book agency, 5th edition .2001:171.
- 2. B.C, incidence and prevalence world wide .US.2005 :http://www.pubmed.com.
- 3. Fayez JA. Dysfunctional uterine bleeding. Am fam physician 1982:25:109-15.
- 4. Wathen PI, Handerson MC, witz CA, division of general internal medicine university of texas health center, san Antonio.
- 5. P.G crosignani and B.rubin ..,"human reproduction ",vol 5.1999 italy :637.
- 6. Lowdermilk LD. Perry TE, bobak IK."essential of maternity nursing",5th edition, mosby;2002.
- 7. Patel SR, sheth MS, Rawal MY. Dysfunctional uterine bleeding –place for hysterectomy in its management. Mumbai ;2009.
- 8. Yukio sonoda ,R. Richard , baraket A. Best practice and research .clinical obstertrics and gynecology .2006 ;20.
- 9. Park K. "textbook of preventive and social medicine". 19th edition 2008.
- 10. Bourque J, Gaspard U, bourguignon JP, Lambotte R.D. Dysfunctional uterine bleeding in the adolescent . J Gynecol Obstet Biol Reprod (paris).1986;15(2):173-84.