High Risk Pregnancy: Counseling Program for Advanced Maternal Age's Mothers during Antepartum Period in Rural Areas

Chesis

Submitted in Partial Fulfillment of the Doctorate Degree in Nursing Science
(Community Health Nursing)

Submitted By

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2015

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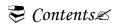
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List of Abbreviations

AB Antibodies(antiserum)

ABO Blood Group

AMA Advanced Maternal Age

B.M.I Body Mass IndexCS Caesarian Section

CST Contraction Stress Test

EDC Expected Date of Confinement Elisa Enzyme- Linked Immune Assay

FHR Fetal Heart Rate
FHS Fetal Heart Sound

FSH Follicle stimulating hormones

G.D. Growth & Development

HCG Human Chorionic Gonadotrophine

HGB hemoglobin

HRP High Risk PregnancyLH Luteinizing HormoneLMP Last Menstrual Period

M.C.H Maternal Child Health center

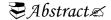
M.O.H Ministry of Health

M.O.H& P Ministry of Health & Population

NST
P.P. period
PG
Pregnancy Gastation
Resistance training
RBCs
RIA
Non Stress Test
Postpartum period
Pregnancy Gastation
Resistance training
Red Blood Cells
Radio Immune Assay

S1,S2,S3(S) Sound 1,2,3

STDs Sexually Transmitted Diseases



High Risk Pregnancy: Counseling Program for Advanced Maternal Age's Mothers during Antepartum in Rural Areas

By Tabia Bedier Shaban Sharaf

Abstract

Advanced maternal age was defined that, as any expectant mother who will have made her 35th birthday by the time she delivers. Because this begins a high-risk group with their own set of risk factors besides all of the other risks of pregnancy and delivery. Aim: This study was to evaluate the effect of counseling program for advanced maternal age's mothers during antepartum period in rural areas. Aquasi experimental design was conducted at antenatal care clinic for caring pregnant in Maternal and Child Health care center by El Sahal Al kably (from M. C. H. centers in health administration of Baltim). **Sampling**: This study composed of 84 pregnant women (advancement maternal age's mothers from 35 years & more) at 1st trimester and free from chronic diseases. Tools: For data collection two tools was used: 1) An interviewing questionnaire to assess: -Socio-demographic data - Advanced maternal age mothers' knowledge and practices related to antepartum care. 2) Record review to collect data about antepartum care (first, second and third trimester): a-Initial visit may include diagnosis of pregnancy. b- Subsequent antenatal visits monitoring, c- Outcome pregnancy monitoring, **Results**: The present study found that minority of total knowledge A.M.A.'s mothers had a good about anatomy &physiology of reproductive system, normal change & warning signs, hygiene, nutrition of pregnancy, physical exercises and immunizations in preprogram, increased to majority after taking counseling program, while decreased to more than three quarters in follow up. Also the results of complete total practices as stated find that the minority of A.M.A.'s mothers had a good about meals intake, physical exercises and care of dental, breast& perineum. High significant differences between pre& post-program and follow up about total knowledge and practices. Conclusion: The advanced maternal age mothers during antepartum period in rural area are need & continuous awareness counseling programs about A.M.A. and high risk pregnancy. **Recommendation**: Increase all women's awareness about preconception & appropriate health because preconception advice is often neglected. Preconception care for advanced maternal age mothers will prepare her for the role will soon under take in pregnancy or care prior to increasing use of contraception.

Key words: High Risk Pregnancy- Advanced Maternal Age's Mothers- Rural Areas

Introduction

Advanced maternal age was defined by (Bulletin of the World Health Organization, (2009) that, as any expectant mother who will have made her 35th birthday by the time she delivers. The magic number of 35 still stands as a turning point in prenatal surveillance, because this begins a high-risk group with their own set of risk factors besides all of the other risks of pregnancy and delivery. Becoming pregnant after the age of 35 puts women into a category that was a growing trend. The pregnancy rate for mothers over 35 is significantly rising.

Maternity mothers in rural areas face some different health issues than maternity mothers who live in towns and cities. Getting maternal health services can be a problem in rural areas. Pregnant woman might not be able to get to a hospital quickly in an emergency and want to travel long distances to get routine checkups and screenings. Because health problems in rural residents may be more serious by the time they are diagnosed. Pregnant woman in rural areas of the Egypt have higher rates of risk pregnancy than pregnant woman in urban areas, (*El-Zanaty and Way*, 2009).

High-risk pregnancy was generally thought of as one in which the mother or the developing fetus has a condition that places one or both of them at a higher-than-normal-risk for complications, either during the pregnancy (antepartum), during delivery (intrapartum), or following the birth (postpartum), (American College of Obstetricians and Gynecologists, 2009).

There are risks and concerns associated with advanced maternal age. All expectant women will experience complications during their pregnancy. Such as high blood pressure, gestational diabetes, preterm labor, miscarriage, placental abruption, placenta previa, low-birth weight baby, higher caesarean rate, higher chance of maternal death, stillbirth, ectopic pregnancy and birth defects, (*Fouad*, 2003).

Antenatal care was the name of the particular form of medical supervision given to a pregnant woman and her baby starting from the time of conception up to the delivery of the baby. It includes regular monitoring of the woman and her baby throughout pregnancy by various means including a variety of routine regular examinations and a number of simple tests of various kinds, (Maville and Huerta, 2007).

Counseling is defined as use of an interactive helping process focusing on the needs, problems, or feelings of the patient and significant others to enhance or support coping, problem solving, and advice offered by a counselor to the patient as a regular part of the healthcare process through interpersonal relationships, (*Janas*, 2005).

The community health nurse as a pregnancy counselor and health care provider should be knowledgeable enough to correct rumours and misbeliefs about problems of pregnancies. Another important role of the counselor is to empower the woman to make her own choices when needed, (*Fraser et al*, 2003).

Justification of the study:

Every day, 1600 women and more than 10 000 newborns die from preventable complications during pregnancy and childbirth occur in the developing world according to *WHO* (2007) and maternal mortality ratio in Egypt (per 10000 live births) 62.7 (2005), (*El-Zanaty and Way*, 2006).

Many studies in Egypt have shown the roughly 30% of admission and about 40-50% of death of occurring in pediatric hospitals are accounted for children with genetic disorder or congenital malformation, (*Gomaa*, 2007).

As well *El-Sobkey* (2007) mentioned that almost all this problems due to about 41.3% for advanced maternal age high risk pregnancy.

The Egyptian Demographic and Health Survey (DHS) (2006) mentioned that, advanced maternal age representing 39% of the high risk pregnancy, (*El-Zanaty and Way*, 2006).

Total females of the reproductive group 2288183 (from 15-45years) representing 30.6% of the total population in the Egypt which was 72,798,031 at 2006 from the last population count which done by Central Agency for Public Mobilization and Statistics (CAMPAS), (*M.O.H*, 2008).

The counseling program's approach focuses on evidence-based interventions that address the most prevalent health issues that affect mothers and newborns. Each focused antenatal care visit includes interventions that are appropriate to the woman's stage of pregnancy and that address her overall health and preparation for birth and care of the newborn, (World Health Organization, 2011).

The community health nurses play an important role in high risk pregnancy counseling because they are irregular contact with advanced maternal age, frequently