

Assessment of Anxiety Level Related to Pregnancy Outcome among Primigravida Mother in Third Trimester

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ABSTRACT

Anxiety is an emotion characterized by feelings of tension, worried thoughts and physical changes like increased blood pressure. People with anxiety disorders usually have recurring intrusive thoughts and concerns. While pregnant, it is common for women to have anxiety. A first-time mother is likely to worry about many impending changes to occur in her life. Women also worry about birth defects.

This study was conducted to assess the level of anxiety related to pregnancy outcome among primi-gravida mothers in 3rd trimester of pregnancy attending antenatal OPD at Government Medical College and Hospital, Chandigarh. The objectives of the study were to assess the level of anxiety related to pregnancy outcome among primi-gravida mothers in 3rd trimester of pregnancy and to find out the association between level of anxiety related to pregnancy outcome with selected socio-demographic variables. The research approach adopted in the study was the cross-sectional. The research design for this study was non-experimental. Written permission was taken from the Department of Gynaecology and the study was conducted in the antenatal OPD at Government Medical College and Hospital, Chandigarh. Consecutive Sampling technique was applied on a sample of 60 mothers in 3rd trimester of pregnancy attending the antenatal OPD. For data collection, the tool was divided into 2 parts:

Part-A – Socio-demographic profile, and, part- B– Hamilton Anxiety Rating Scale (HAM – A).

The analysis was done by using differential and inferential statistics.

The findings of the study revealed that maximum primi-gravida mothers in 3rd trimester included the age-group of 30-35 years. Majority of the mothers were having mild anxiety i.e., 48%, 40% were having moderate level of anxiety and only 12% were having severe anxiety. The relationship between selected demographic variables with level of anxiety showed that socio-economic status and residential areas have statistically significant association with the level of anxiety.

KEYWORDS: GMCH - Government Medical College and Hospital, OPD - Out-Patient Department, PSA – Pregnancy Specific Anxiety, LMP – Last Menstrual Period, CBT – Cognitive Behaviour Therapy, AD – Antenatal Depression, APGAR - Appearance, Pulse, Grimace, Activity and Respiration

INTRODUCTION

Pregnancy is a time of great happiness and joy in a women's life. Anxiety in pregnancy is a commonly seen disadvantage of being pregnant. Anxiety during pregnancy is intense, excessive and persistent worry and fear about its outcome which precedes to increased heart rate, rapid breathing, sweating and tiredness. In addition, it is body's natural response to stress and a feeling of fear and apprehension about what's soon to be. This study was conducted to assess the level of anxiety related to pregnancy outcome among primi-gravida mothers in 3rd trimester of pregnancy

attending antenatal OPD at Government Medical College and Hospital, Chandigarh.

AIMS AND OBJECTIVES

1. To assess the level of anxiety related to pregnancy outcome among primi-gravida mothers in 3rd trimester of pregnancy.
2. To find out the association between level of anxiety related to pregnancy outcome with selected socio-demographic variables.

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ASSUMPTION

We assume that primi-gravida mothers in 3rd trimester of pregnancy, will have anxiety related to pregnancy outcome.

METHODOLOGY

- **Research approach-** The research approach adopted in the study was cross-sectional research approach.
- **Research Design-**The research design for this study was non-experimental study to assess the level of anxiety
- **Research setting-** The research was conducted at the antenatal OPD at Gmch-32, Chd
- **Target population-** Target population for this study was primigravida mothers in 3rd trimester of pregnancy attending antenatal OPD at Gmch-32, Chd.
- **Sampling techniques-** Consecutive sampling technique was adopted for data collection **Sample size-** The sample size of study was 60 primigravida mothers in 3rd trimester of pregnancy.
- **Inclusion criteria**
 1. Primi-gravida mothers in their 3rd trimester.
 2. Women willing to participate, and had given consent for the same.
 3. Women who can read and/or understand English, Hindi or Punjabi languages.
 4. Women attending antenatal OPD at Government Medical College and Hospital, Chandigarh.
 5. Women who are conscious and are able to follow verbal instructions.

Exclusion criteria-

1. Intellectually challenged or subjects with mental illness.
2. Women in their 1st or 2nd trimester.
3. Pregnant women having medical and/or obstetric complications

Tool of data collection- The tool was divided into 2 parts:

Part A: Socio-demographic Profile
Part B: Hamilton Anxiety Rating Scale (to assess the level of anxiety related to pregnancy outcome among primi-gravida mothers in 3rd trimester of pregnancy attending antenatal OPD at Government Medical College and Hospital, Chandigarh.)

Method of data collection- The data was collected through interview method

Analysis and Interpretation- Data analysis was done using Descriptive and Inferential statistics. Responses were analyzed in term of total score gained by the subject.

SECTION-B ASSOCIATION BETWEEN LEVEL OF ANXIETY RELATED TO PREGNANCY OUTCOME WITH SOCIO-DEMOGRAPHIC VARIABLES

TABLE NO. 1

	VARIABLE	FREQUENCY (n)	PERCENTAGE (%)	CHI-SQUARE VALUE	df	REMARKS
RESIDENCE	Urban	35	58.3	71.874 p=0.002	6	Statistically significant
	Rural	25	41.7			

TABLE 1. Depicts the association between residence and level of anxiety related to pregnancy outcome. The value of chi-square is 71.874 and df value is 6. It is concluded that residence has high statistical significance with level of anxiety at p<0.05.

Analysis of the data was done in accordance with the objectives of the study.

FINDINGS

SECTION-A ASSESSMENT OF LEVEL OF ANXIETY RELATED TO PREGNANCY OUTCOME

TABLE NO 1 this section deals with the level of anxiety related to pregnancy outcome. Subjects studied were 60 primi-gravida mothers, who were in 3rd trimester of pregnancy (N=60)

LEVEL OF ANXIETY	RANGE	FREQUENCY (n)	PERCENTAGE (%)
MILD	<17	29	48
MODERATE	18-24	24	40
SEVERE	25-30	7	12

The table 1 revealed that 29 primi-gravida mothers had mild level of anxiety, 24 primi-gravida mothers had moderate level of anxiety and 7 primi-gravida mothers had severe level of anxiety. Hence, interpretation was that 48% study subjects had mild level of anxiety, 40% study subjects had moderate level of anxiety and 12% had severe level of anxiety.

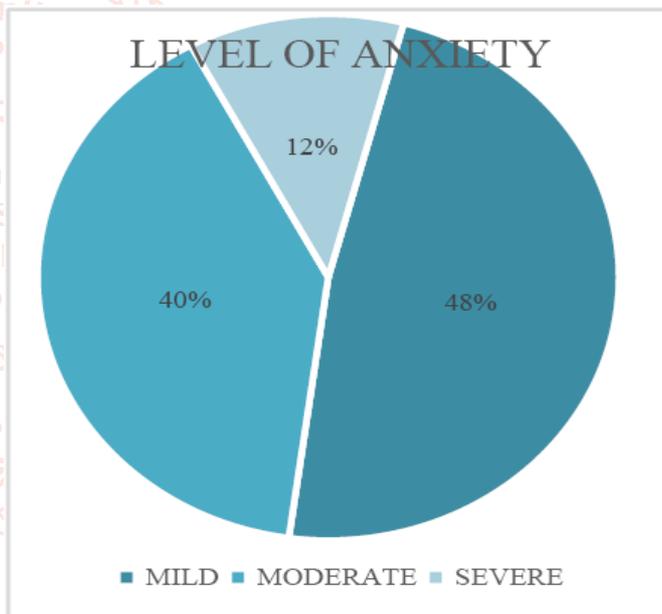


Figure 1: Percentage distribution of study subjects as per level of anxiety related to pregnancy outcome among primi-gravida mothers in 3rd trimester of pregnancy attending antenatal OPD at Government Medical College and Hospital, Chandigarh

TABLE NO. 2

VARIABLE	FREQUENCY (n)	PERCENTAGE (%)	CHI-SQUARE VALUE	df	REMARKS	
SOCIO-ECONOMIC STATUS	Upper class	0	0	72.803 p=0.026	12	Statistically significant
	Upper middle	19	31.7			
	Lower middle	38	63.3			
	Upper lower	2	3.3			
	Lower class	1	1.7			

TABLE 2. Depicts the association between socio-economic status and level of anxiety related to pregnancy outcome. The value of chi-square is 72.803 and df value is 12. It is concluded that socio-economic status has high statistical significance with level of anxiety at $p < 0.05$.

CONCLUSION

The present study was conducted on 60 primigravida mothers in 3rd trimester of pregnancy attending antenatal OPD at Government Medical College and Hospital, Chandigarh, to assess the level of anxiety related to pregnancy outcomes among primigravida mothers in 3rd trimester of pregnancy. The findings of the study revealed that maximum primigravida mothers in 3rd trimester included age group of 30-35 years. Majority of the mothers were having mild anxiety i.e., 48%, 40% were having moderate level of anxiety and only 12% were having severe anxiety. The relationship between selected demographic variables with level of anxiety showed that socioeconomic status and residential areas have statistically significant association with the level of anxiety.

DISCUSSION

This result could not be generalized due to small sample size and clinical setting of data collection. But based on the findings future studies can be done on large sample size by using comparative and/or exploratory research design.

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