

Original Research Article

Effectiveness of Breast Feeding Protocol among Caesarean Mothers Admitted in Narayana Medical College Hospital, Nellore

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ABSTRACT

Background: Every child born in a family with a bundle of joy. The bond with the baby gets stronger day by day. When the mother breast-feeds, she gives adequate warmth, affection and security as well as food and protection to her baby. Caesarean section is one of the barriers for early initiation of breast-feeding. Initiation of breast-feeding is often delayed because mothers who delivered through caesarean section often need some extra time to recover before they physically feel like holding and nursing their baby. The nurse must help the mother to develop the necessary skills so that she is able to feed her baby by herself.

Aim: The aim of the study was to evaluate the effectiveness of breast feeding protocol among caesarean mothers admitted in Narayana General Hospital, Nellore.

Objectives: 1. To identify the barriers for initiation of breast feeding among caesarean mother. 2. To develop and implement breast feeding protocol for caesarean mothers. 3. To evaluate the effectiveness of breast feeding protocol among cesarean mothers. 4. To determine the association between the post tests score of breast feeding protocol among caesarean mothers and selected socio demographic variables.

Methods: A quantitative approach with quasi experimental non equivalent control group design, 60 post LSCS mothers were selected by using Non-Probability convenient sampling technique.

Results: Study revealed that, In experimental group 43.3% of the mothers were doing moderately effective breast feeding and 56.7% of them were noted to practice ineffective breast feeding technique. Whereas in post test, 66.7% of them were doing effective breast feeding and 30% of them were doing moderately effective feeding and only 3.3% of them was noted to have ineffective feeding practice. In control group majority of the mothers were found to follow ineffective breast feeding techniques. And very few were noted to follow moderate feeding techniques in both experimental and control.

Conclusion: It is evident that there was a improvement in breast feeding method after the teaching program on effective breast feeding.

Key Words: Breast feeding protocol, caesarean mothers.

INTRODUCTION

Breast feeding is fundamental to health and development of the children and also important for mother's health and there is no substitute for mothers love. Children

are our future and our most precious resource. Mother's milk is the first and most precious gift to her offspring. The first year of life is critical in laying the foundation of good health. At this time certain biological

and psychological needs must be met to ensure the survival and healthy development of the child into the future adult. Breast-feeding is the ideal method suited for the psychological and physiological needs of the infants. [1]

Mother's milk is like nectar, the name given by Homer to beverages offered by god by giving life and beauty. Nothing else is comparable to this first offering during the life time of a person and very rightly it has been given great importance in religious teachings literature and folk lore. Breast feeding is as old as human kind. Breast feeding is accepted as the unique, natural and nutritious food provided by nature for newborn. It is universally acknowledged to be the best and complete food for the infants including sick and pre term neonates. It is the best food for the neonates due to its unique physical, biochemical and immunological qualities. [3]

WHO recommended that, globally over one million new born infants could be saved each year by initiating breast feeding within the first hour of life each year by reducing deaths mainly due to diarrheal disorders and lower respiratory tract infections in children. In south Asia, 24-26% of babies born in India are breastfed within first hour of birth. The effect of these breastfeeding patterns is reflected in the neonatal mortality rates for 40-50 per 1000 live births. The India's early breast feeding initiation rate is among the less than a quarter of mother's i.e. just 24.5%. [2]

NEED FOR THE STUDY

Breastfeeding advocates have long promoted the idea that women who have had a caesarean need extra support and help to establish breastfeeding. However, few hospitals routinely offer extra breastfeeding support to women who have had a difficult birth or who have had a caesarean. Many hospitals have protocols that actively interfere with breastfeeding under these conditions. Breast feeding protocols will help the women to plan for breastfeed in future pregnancies, and in unplanned

caesarean, or planned repeat caesarean. If they know ahead of time the problems to watch for, they can develop a plan of action to prevent these problems from occurring, or a plan of action to get help if problems do occur. Many women have found that they are able to breastfeed much more easily the second time around with good resources and planning. [4]

Delay in first breastfeeding can cause critical differences in hormone levels and impact milk supply. It also helps delay the appearance of mature milk, putting the baby at risk for dehydration or excessive weight loss after birth, which often leads to supplementary formula. All of this combines to undermine a woman's confidence and desire to breastfeed. Early and frequent breastfeeding is extremely important for establishing breastfeeding. Studies show that the more the first breastfeeding are delayed, the higher the rate of problems. Similarly, frequent breastfeeding (every 2-3 hours or so) in the first day is very important in helping the mature milk to come in more quickly. Problems associated with breast feeding during hospitalization are unsuccessful latching on, positioning problems, and the perception that the milk supply is inadequate, sore and damaged nipples, dermatitis, mastitis, breast engorgement, inverted nipples. Early initiation of breast feeding would decrease common breast feeding problems during hospitalization. [5]

A cross-sectional study was done with the objective to examine the relationship between cesarean section delivery and the initiation of breastfeeding in a representative sample of 1695 women aged 15 to 49 years, Bivariate and multivariate logistic regression analyses were used to examine the crude and covariate adjusted association between type of childbirth and initiation of breastfeeding. The study showed Overall, 36% of all births were performed by cesarean section, while initiation of breastfeeding was achieved by 61.5% of the women. Cesarean section was

positively related to breastfeeding initiation in multivariable logistic regression models (odds ratio .64; 95% CI 0.51-0.81) after controlling for confounding variables. [6]

PROBLEM STATEMENT

“A study to assess the effectiveness of breast feeding protocol among caesarean mothers admitted in Narayana Medical College Hospital at Nellore”.

OBJECTIVES

- To identify the barriers for initiation of breast feeding among caesarean mother
- To develop and implement breast feeding protocol for caesarean mothers.
- To evaluate the effectiveness of breast feeding protocol among caesarean mothers
- To determine the association between the post test score of breast feeding protocol among caesarean mothers with selected socio demographic variables.

Hypotheses:

Null hypothesis

H₀ 1: There is no statistically significant difference in the effectiveness of breast feeding among caesarian mothers and newborns after administering breast feeding protocols.

H₀ 2: There is no significant association between the post test score of experimental and control group with selected socio demographic variables

Research hypothesis

H₁: There is a significant difference in the post test score on the effectiveness of breast feeding between the experimental group and control group.

H₂: There is a significant association between the post test score of experimental and control group with selected socio demographic variables

METHODOLOGY

Research approach: Quantitative research approach

Research design: Quasi experimental Non equivalent control group design

Setting: The study is conducted in Narayana Medical College Hospital, Nellore.

Population: In the present study, the population consist of mothers who underwent lower segment caesarean section.

Target population: Mothers who underwent LSCS.

Accessible population: Mothers who underwent caesarean section in Narayana Medical College Hospital.

Sample: Mothers who underwent caesarean section.

Sampling technique: Non-probability convenience sampling technique.

SAMPLE SIZE: 60 post LSCS mothers out of which 30 were assigned to experimental group and 30 to control group.

SAMPLING CRITERIA:

Inclusion criteria:

- Mothers who underwent LSCS
- Mothers who are willing to participate in this study.

Exclusion criteria:

- Mothers who are contraindicated for breast feeding.
- Mothers of babies placed in NICU.

VARIABLES:

Independent variables: Breast feeding protocol

Dependent variables: outcome on effectiveness of breast feeding among mothers and babies.

DESCRIPTION OF THE TOOL:

The tool consists of three parts.

Part-I: Consists of Demographic data

Demographic variables including age, education, occupation, income, religion, place of residence, parity, family type and source of health information.

Part-II: It consists of semi-structured questionnaire to identify the barriers to breast feeding among LSCS mothers. It consists of 15 items.

Part-III (a): It consists of observational check list to assess the effectiveness of breast feeding. The components of the check list include breast hygiene, techniques of breast feeding and maintenance of lactation. It consists of 18 items.

RESULTS & DISCUSSION

I. Frequency and percentage distribution of identified barriers of breast feeding:

In experimental group, almost all the mothers (96.7%) had failed to initiate the breast feeding within half an hour, had difficulty to breast feed due to pain and had

difficulty latching on the baby. In control group, all mothers (100%) had failed to initiate breast feeding within half an hour, Difficulty to resume position to feed the baby (96.7%) and all mothers (100%) had difficulty latching on the baby.

Table-1: Frequency & percentage of pre test and post test score on effective breast feeding among mothers in experimental group and control group. (N=60)

S.No	Criteria	Experimental group (n=30)				Control group (n=30)			
		Pre test		Post test		Pre test		Post test	
		F	%	F	%	F	%	F	%
1.	Effective B.F (14-18)	-	-	20	66.7	-	-	-	-
2.	Moderate B.F (9-13)	13	43.4	9	30	10	33.3	12	40
3.	Ineffective B.F (<9)	17	56.7	1	3.3	20	66.7	18	60

Table -2: Comparison of pre-test and post-test mean score of mothers in experimental group and control group (N=60)

S. No	Criteria	Pre test		Post test		Paired 't' test
		Mean	Standard deviation	Mean	Standard deviation	
1.	Exp. group	8.2	2.2	14.1	2.9	17.9***
2.	Control group	8.7	2.7	8.9	2.8	5.5**

*- Level of significance (***- P<0.001, **- P<0.01)

Table-3: Comparison of post test mean and S.D between experimental group and control group (N=60)

S. no	Breast feeding outcome	Experimental group (n)=30		Control group (n)=30		Independent 't' test
		Mean	SD	Mean	SD	
1.	Mother	14.1	2.9	8.9	2.8	8.5***
2.	Baby	28.8	4.5	17.6	2.9	10.1**

*- Level of significance (***- P<0.001, **- P<0.01)

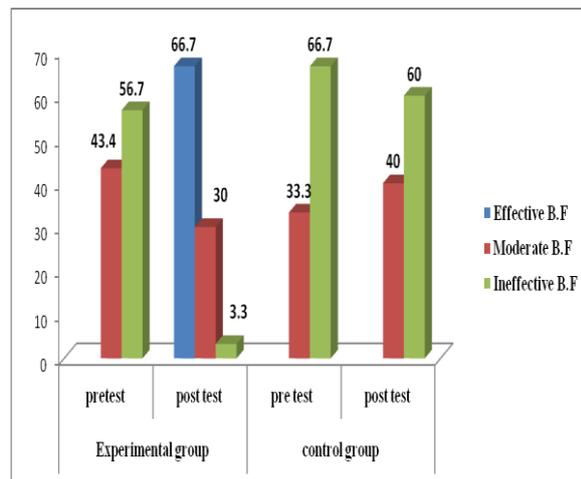


Fig No-1: Percentage of pre-test and post-test score on effective breast feeding among mothers in experimental group and control group.

V. Association between effectiveness of the breast feeding among caesarean mothers with selected socio demographic variables in experimental and control group:

In experimental group, there was a statistically significant association between demographic variables such as age, education, religion, place of residence, parity and source of information. In control group, there was a statistically significant association between demographic variables in control group such as education, occupation, family income and type of family.

MAJOR FINDINGS OF THE STUDY

Study revealed that, in experimental group 43.3% of the mothers were doing moderately effective breast feeding and 56.7% of them were noted to practice ineffective breast feeding technique. Whereas in post test, 66.7% of them were doing effective breast feeding and 30% of them were doing moderately effective feeding and only 3.3% of them was noted to have ineffective feeding practice. In control

group, majority of the mothers were found to follow ineffective breast feeding techniques. And very few were noted to follow moderate feeding techniques in both experimental and control.

CONCLUSION

It is evident that there was an improvement in breast feeding method after the teaching program on effective breast feeding.

RECOMMENDATIONS

Similar study can be initiated in other colleges in various districts and states.

Similar study can be conducted on other reproductive age groups.

Similar study can be conducted with other non-pharmacologic measures to reduce cyclic pelvic pain.

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