

ISSN 2278 – 0211 (Online)

Prevention and Management of PCOS among the Female Health Workers

Sijo Koshy								
H.O.D. Department of Obstetrics & Gynaecology, Sumandeep Nursing College, Sumandeep Vidyapeeth,								
Piparia, Vadodara, Gujarat, India								
Rita Thapa								
Associate Professor, Department of Obstetrics & Gynaecology, Sumandeep Nursing College,								
Sumandeep Vidyapeeth, Piparia, Vadodara, Gujarat, India								
Vruti Patel								
Student, Sumandeep Nursing College, Vadodara, Gujarat, India								
Priyal K. Patel								
Student, Sumandeep Nursing College, Vadodara, Gujarat, India								
Rajeshwari Patidar								
Student, Sumandeep Nursing College, Vadodara, Gujarat, India								
Simonta Rathod								
Student, Sumandeep Nursing College, Vadodara, Gujarat, India								
Priyal Roy								
Student, Sumandeep Nursing College, Vadodara, Gujarat, India								

Abstract:

 \rightarrow Objective: The study was conducted to assess the effectiveness of planned teaching program on knowledge regarding prevention and management of PCOS among the female health workers of selected PHC of Waghodia taluka.

- \rightarrow Setting: The study is conducted at selected PHC of Waghodia taluka, Vadodara, Gujarat.
- \rightarrow Design: A pre-experimental one group pretest posttest design was used.

 \rightarrow Sampling technique: The samples of this study are selected by using non probability convenient sampling technique.

 \rightarrow Sample: The sample for the present study comprises of 60 female health workers of selected PHC of Waghodia taluka.

 \rightarrow Tools for data collection: The structured questionnaire was used as an instrument to measure the level of knowledge regarding prevention and management of PCOS among female health workers.

→ Findings & Results: The findings of pre-test data showed that 11.66% of female health workers had adequate knowledge, 45% were having moderately adequate knowledge while 43.33% had inadequate knowledge. Findings of post-test data show that 78.33% of the respondents possess adequate knowledge as compared to 21.66% of the respondent noticed with moderately adequate knowledge. Finally, its shows that 78.33% has gained knowledge and raised to adequate. The mean post-test knowledge score (23.05) also was higher than the mean pre-test score (11.90). The comparison of pre-test and post-test knowledge scores of female health workers shows the obtained 't' value 19.73 is greater than the table value at 0.05 (2.00) level of significance. Therefore "t" value is found to be significant indicating that there is a significant difference between pre-test and post-test knowledge of female health workers. Chi-square test was calculated to find out the association between the demographic variables and the level of knowledge regarding prevention and management of PCOS among female health workers of selected PHC of Waghodia taluka. The findings indicates that all the variables such as Age ($\chi^2 = 1.58$), Monthly Income ($\chi^2 = 2.76$), Religion ($\chi^2 = 1.24$), Number of Children ($\chi^2 = 6.95$) were found to be significant at 0.05 level of significance. Thus it can be interpreted that there is a significant association between pre-test level of knowledge among female health workers with their selected socio-demographic variables such as Age, Monthly Income, Religion, and Number of children.

 \rightarrow Conclusion: So we can conclude that the planned teaching program on prevention and management of PCOS has shown its impact as there is a remarkable increase in the knowledge of female health workers regarding prevention and management of PCOS after providing the planned teaching program.

Keywords: Assess, effectiveness, planned teaching program, knowledge, prevention, PCOS

1. Introduction

We believe there is hope for cure, we believe in clear skin and healthy bodies. We believe in life without anxiety, we believe in miracle babies. We believe in life without pain, we believe it is possible to overcome PCOS.PCOS is a hard disease to live with, where every day is a battle. PCOS is a complex, heterogeneous and one of the most common female endocrine disorder. It affects about 5-10% of the child bearing age (20-40years) and produces symptoms and is thought to be one of the leading causes of infertility. It is estimated that 22 to 33 per cent of women have polycystic ovaries. If untreated, PCOS can lead to complications. So early recognition, prevention, and treatment are important to prevent long-term sequelae.

Treatment for PCOS is not curative. Treatment focuses on controlling symptoms and managing the condition to prevent complications particularly in those who are overweight. Certain life style changes such as diet and exercise are considered first line treatment for women with PCOS.

Although PCOS can be treated with standard medications and treatments, there is always the risk of potential side effect that could cause unnecessary harm to the body. In these cases, it is considered wise to opt for certain home remedies that offer the same benefits of standard medications, but without any potential side effects. Cinnamon can help to improve menstrual cycle in women with PCOS. Flaxseed can also be used to as it helps to decrease androgen level and treat hirsutism. Spearmint Tea can help to reduce hirsutism or excess body hair. Apple cider vinegar will help to lose weight and improve overall health. Fenugreek improves insulin resistance, helps to balance hormones and also helps to aid weight loss.

Pharmacological treatments include oral contraceptives, metformin, clomiphene citrate and spironolactone. Various laparoscopic methods including electrocautery, laser drilling and multiple biopsy have been used as surgical management.

Not much is said regarding this fact, but it has been observed that proper diet, yoga, meditation and exercise helps a lot to decrease the symptoms and severity of disease. Just making considerable changes in lifestyle and daily routine will help to stay fit and healthy. Avoiding stress in life and avoiding being isolated is necessary. There is no medication as such meant for curing PCOS and so these tips will help women to stay away from discomfort and embarrassment from the disease.

2. Need for the Study

Polycystic ovarian syndrome (PCOS) is the 4th gynecological problem of hospital admission. It is one of the most common female endocrine disorder and one of the leading cause of infertility. Polycystic ovarian syndrome (PCOS) is a major concern in women in their reproductive age. It affects 105 million women worldwide. In India, the prevalence of PCOS in adolescence is 9.13 %. India has witnessed about 30% rise in PCOS cases in the last couple of years. In 2002 it was estimated that 2 million women were affected with PCOS in U.S.

According to PCOS Foundation, established in the US to spread awareness regarding PCOS among public, a vast majority of US population has no knowledge of PCOS, including many women and adolescent girls affected by PCOS. Females must be aware of symptoms, health precautions, and risks for diseases associated with PCOS to help prevent future complications.

PCOS has drawn a lot of attention in the recent years being the leading cause of infertility among women. We found that women have lack of knowledge regarding PCOS and its prevention at the primary level as they are neglecting taking care of the disease. While on our community postings we have found that most of the women in community had irregular periods and still they were neglecting it. As PCOS is difficult to diagnose, its prevention and early management is necessary to prevent further future complications. Hence, we are interested to educate the health workers and improve their knowledge regarding PCOS and its prevention and management so that they can educate the women at community level to help them overcome PCOS.

3. Objectives of Study

- → Assess the preexisting knowledge regarding prevention and management of PCOS among female health worker at Waghodia PHC.
- \rightarrow Determine the effectiveness of planned teaching program on prevention and management of PCOS.
- → Find out association between pretest knowledge scores of female health workers regarding prevention and management of PCOS with selected demographical variables.

4. Hypotheses

- \rightarrow H₁: There will be significant difference in pretest and posttest knowledge level of female health workers regarding prevention and management of PCOS.
- \rightarrow H₂: There will be significant association between pretest knowledge scores of female health workers and their selected demographic variables.

5. Material and Methods

5.1. Research Design

Keeping in view the objectives of the study, the pre experimental one group pre test post test research design is selected as the research design for this study The design did not include any control group. The pre-experimental design is a design in which the pre-test and post test observations are made on different days with only one of selected groups and without a control group.

5.2. Setting

The study is conducted in selected PHC of Waghodia taluka, Vadodara, Gujarat.

5.3. Population

The target population for this study consisted of all the female health workers. The accessible population consist of female health workers of selected PHC of waghodia taluka.

5.4. Sample

Selected sample comprises of 60 female workers of selected PHC of Waghodia taluka.

5.5. Sampling Technique

The samples of this study are selected by using non probability convenient sampling technique.

5.6. Tools for Data Collection

The research tool was developed in English after an extensive of literature and experts opinion it was translated in to Gujarati by language experts. A self-reported structured questionnaire was used for collection of data. Questionnaire is considered to be the most efficient and objective method which is quick and generally inexpensive means of obtaining data from a large number of respondents.

5.7. Data Analysis

The demographic variables were organized by using descriptive measures (frequency and percentage). Mean and standard deviation was been used to assess the effectiveness of planned teaching programme on knowledge of female health workers regarding prevention and management of PCOS. The significance of difference between the mean pre-test and post-test knowledge score of female health workers has been calculated using paired 't' test. The association between the level of knowledge and the selected demographic variables were assessed by Chi-square test.

6. Findings & Results

6.1. Findings of Distribution of Female Health Workers Based on Socio-Demographic Variables

Majority of female health workers 27 (45%) are in the age group 36 years & above. 24 (40%) of them are in between 30-35 years and only 09 (15%) are in between the age group of 24-29 years. Majority of female health workers 59 (98.3%) belongs to Hindu religion & only 01 (1.7%) belongs to Muslim religion. About family income per month majority of female health workers 49 (81.7%) have monthly income of < 5000 Rs & only 11 (18.3%) of them have income between 5000 – 10000 Rs/Month. All 60 (100%) female health workers are married. Majority of female health workers 28 (46.7%) have two children, 21 (35%) of them have three or more children & only 11 (18.3%) female health workers have one child.

6.2. Knowledge Scores of Female Health Workers Regarding Prevention & Management of PCOS

The findings of pre-test data showed that 11.66% of female health workers had adequate knowledge, 45% were having moderately adequate knowledge while 43.33% had inadequate knowledge. Findings of post-test data show that 78.33% of the respondents possess adequate knowledge as compared to 21.66% of the respondent noticed with moderately adequate knowledge. Finally, it shows that 78.33% has gained knowledge and raised to adequate.

6.3. Evaluate the Effectiveness of Planned Teaching Programme

The comparison of pre-test and post-test knowledge scores of female health workers regarding PCOS shows the obtained 't' value 19.73 is greater than the table value at 0.05 (2.00) level of significance. Therefore "t" value is found to be significant indicating that there is a significant difference between pre-test and post-test knowledge of female health workers. The mean post-test knowledge score (23.05) also was higher than the mean pre-test score (11.90).



Figure 1: Overall aspect wise pre-test and post-test knowledge scores

6.4. Association between Pre-Test Level of Knowledge of Female Health Workers with Selected Socio-Demographic Variables The findings indicates all the variables such as Age ($\chi^2 = 1.58$), Monthly Income ($\chi^2 = 2.76$), Religion ($\chi^2 = 1.24$), Number of Children ($\chi^2 = 6.95$) were found to be significant at 0.05 level of significance. Thus it can be interpreted that there is a significant association between pre-test level of knowledge among female health workers with their selected socio-demographic variables such as Age, Monthly Income, Religion, and Number of children.

Sr	Variables		Pre test knowledge			χ^2	df	Inference
No.			Inadequate	Moderate	Adequate	Value		
01	Age	22-29	03	05	01			
	(in	30-35	10	10	04	1.58	4	S
	Years)	36 & above	13	12	02			
02	Monthly	< 5000	22	20	07			
	income	5000-10000	04	07	00	2.76	2	S
	(in Rs)	10000-15000	00	00	00			
		Joint	9	5				
03	Religion	Hindu	26	26	07			
		Muslim	00	00	00	1.24	2	S
04	Number	One	03	06	02			
	of	Two	10	16	02	6.95	4	S
1	Children	Three & above	13	05	03			

Table 1: Association of pre-test level of knowledge among female health workers with their selected socio demographic variablesN=60

7. Conclusion

Initially the female health workers did not have adequate knowledge regarding prevention and management of PCOS. The planned teaching program has shown remarkably increase in the knowledge score of the female health workers. Using the statistical formulas, we have computed the difference between pre test and post test knowledge scores, and highly significant difference is shown in knowledge score of the female health workers in all the segments. So we can conclude that the planned teaching program on prevention and management of PCOS has shown its impact as there is remarkable increase in the knowledge level of female health workers regarding prevention and management of PCOS after providing the planned teaching program.

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