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RESEARCH ARTICLE

“EFFECTIVENESS OF INITIATION OF BREAST FEEDING ON THIRD STAGE OF LABOUR AMONG PARTURIENT MOTHERS AT SELECTED HOSPITAL, CHENNAI”

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Abstract

Introduction: The health care provides to encourage the mothers to breast feed the new-born as early as possible during third stage of labour to enhance impacts of breastfeeding and minimize the duration of third stage of labour. **Objectives:** 1. Assess the initiation of breast feeding on the third stage of labour among parturient mother. 2. Associate the third stage of labour among parturient mother with the demographic variables. **Hypothesis:** There was a significant difference in the duration of the placental delivery among primi parturient mothers after initiation early breast feeding. **Material and method:** The design adopted for this study was pre experimental post-test design. 30 Samples were selected by using convenient sampling technique. Initiation of breast feeding time and placental delivery was recorded by using structured observation record. The data were analysed by using descriptive and inferential statistics. **Result:** Among 30 parturient mothers 9(30%) had delivered the placenta within 5 minutes, 13(43.3%) within 6-10 minutes, 6(20%) within 11-15 minutes and 2(6.6%) had more than 20 minutes to deliver the placenta. **Conclusion:** The benefits of breast feeding can have a significant impact on total health for both mother and new-born. Hence the study proves that to reduce the duration of third stage of labour, will improve maternal and foetal bonding and prevents the complication of third stage of labour and it may help in increase the uterine contraction.

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INTRODUCTION

Breastfeeding is the best natural feeding and breast milk is the best milk. The basic food of infant is mother's milk. Breastfeeding is the most effective way to provide a baby with a caring environmental and complete food. The nutritional immunological emotional and psychological benefits of breast feeding should be enough to encourage mothers to want to breast feed this new born and for all health care provides to strongly encourage breast feeding. The benefits of breast feeding can have a significant impact on total health. It meets the nutritional as well as emotional and psychological needs of the infant. So breastfeeding deserves encouragement from all concerned in the welfare of children.

The world health organisation (WHO) recommends that all infants be exclusively breast fed from birth to 6 months of age followed by the gradual introduction of other forms of nutrition and continued breast feeding into the second year and beyond. In the United States, approximately 70% of women initiate breast feeding but by 6 months, less than 40% feed their infant's breast milk at all. The US healthy people 2010 initiative has set objectives that 75% of

babies are to be breast fed initially; than 50% receive some breast milk by 6 months of age and that 25% of babies receive some breast milk by 12 months age.

The third stage of labor begins upon the birth of the baby and ends with the birth of the placenta. The third stage of labour averages between fifteen to thirty minutes. It is important that breast feeding is to be initiated as early as possible during the neonatal period. The mechanism of initiation of breast feeding on third stage of labour, when initiating of breastfeeding during third stage the oxytocin release from the pituitary cause induces contraction, so the separation of placenta is faster.

OBJECTIVES:

This study is to

1. Assess the initiation of breast feeding on the third stage of labour among parturient mother.
2. Associate the third stage of labour among parturient mother with the selected demographic variables.

HYPOTHESIS:

There was a significant difference in the duration of the placental delivery among primi parturient mothers after initiation early breast feeding.

MATERIALS AND METHOD:

The research approach utilized in this study was quantitative research approach and pre experimental one group post-test design. It was conducted in maternal and child hospital Poonamallee at Chennai 30 primi parturient women admitted for delivery who undergo normal labour and are in third stage of labour during the study period and who met the inclusion and exclusion criteria. Samples were selected by using convenient sampling technique.

INCLUSION CRITERIA

- Primi Parturient women who are undergoing normal vaginal delivery.
- Parturient women those who are in third stage of labour
- Parturient women who can understand Tamil or English

EXCLUSION CRITERIA

- Primi Parturient women with systemic and psychiatric illness
- Primi Parturient women with nipple abnormalities.
- Baby with APGAR score below 7
- Parturient women not willing to participate

DESCRIPTION OF THE TOOL

Section A: Socio demographic data consists of 9 items, includes age, education, occupation, type of family, age at menarche, type delivery, total duration of first stage of labour, total duration of second stage of labour, APGAR score of the new born at 1 minute.

Section B: It consists of structured observation record includes time of delivery, Time and duration of 1st breast feeding, Time of lengthening of the cord, Time expulsion of placenta, Total duration of expulsion of the placenta, Total duration of third stage labour. The total duration of third stage labour was categorized in following division. < 5 mins, 6 – 10 mins, 11 – 15 mins, > 20 mins

DATA COLLECTION PROCEDURE: The period of data collection was from 16.02.15 to 27.02.15, after obtaining ethical clearance from the Principal, Saveetha college of Nursing, Saveetha University Chennai. The necessary permission was obtained from staff in charge and Medical Officer in Maternal and Child Hospital, Poonamallee. Informed consent was obtained from the sample. A total of 30 primi parturient women were selected for the study by inclusion and exclusion criteria. Early initiation of the breast feeding promoted after the first cry of the baby. Initiation of breast feeding time and placental delivery was recorded by using structured observation record. The data were analysed by using descriptive and inferential statistics.

RESULTS:

I. In demographic variables out of 30 primi parturient mothers 11(36.6%) are in the group of 21-25 year, regarding education status 18(60%) are high school, under occupation 22(73.3%) are house wife, regarding type of family 17(56.6%) are joint family, type of delivery 30(100%) are spontaneous, total duration of 1st stage of labour 17(46.6%) are 6-10 hours, total duration of 2nd stage of labour 17(56.6%) are 30min-1 hour, and the APGAR score within 1 min 30(100%) are 7, Age at menarche 23(73%) are age group of 11-14 years

II. Figure 1: Frequency and percentage distribution of total duration of third stage of labour among parturient mothers

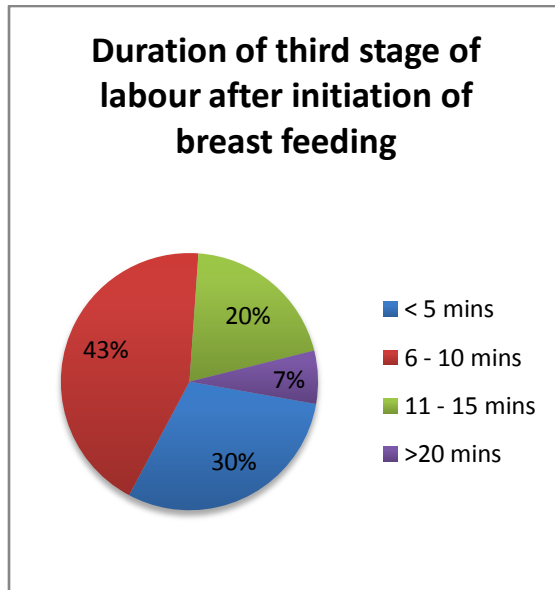


Figure 1 shows that the total duration of third stage of labour among parturient <5 minutes 9 mothers (30%), 6-10 minutes 13 mothers (43.3%), 11-15 minutes 6 mothers (20%), >20 minutes 2 mothers (6.6%).

III. There was no significant association with the demographic variable and duration of placental delivery. Total duration of first stage of labour ($X^2 = 3.384$), Total duration of second stage of labour ($X^2 = 0.007$), at $P < 0.007$

DISCUSSION:

Breast feeding was initiated as early as possible during the third stage of labour in the neonatal period. The duration of third stage of labour was reduced, improved maternal and foetal bonding and prevents the complication of third stage of labour. On the whole the study was confirmed which was formulated at beginning of study and the duration of third stage of labour was reduced.

NURSING IMPLICATION:

The nurse's education has the additional responsibility to update their knowledge on initiation of breast feeding on third stage of labour. This can be done in collaboration with the nurse administration by planning and conducting continuing education programmes. The Nurse educator can work together in clinical area to disseminate knowledge on initiation of breastfeeding during third stage of labour. A comparative study can be conducted between primi gravid and multi gravid women on effectiveness of initiation of breast feeding of third stage of labour. A similar study can be done using the large sample primi gravid women.

CONCLUSION:

In third stage of labour the nutritional immunological emotional and psychological benefits of breast feeding are encouraged primi parturient mothers to breast feed their new born. Health care provides to encourage breast feeding during third stage of labour strongly. The benefits of breast feeding can have a significant impact on total health for both mother and new-born. Hence the study proves that to reduce the duration of third stage of labour, will improve maternal and foetal bonding and prevents the complication of third stage of labour and it may help in increase the uterine contraction.

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