Home Remedies for Minor Ailments in Pregnancy; Knowledge and Practice Assessment Among Antenatal Mothers

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ABSTRACT

Every woman's life is transformed during her pregnancy, as she goes through a lot of physiological and hormonal shifts during this time to prepare for childbirth. These changes are not dangerous, but cause discomfort. To ease these discomforts, women employ a variety of homemade cures. The study's goals were to look at pregnant mothers' knowledge and use of home remedies for minor diseases during pregnancy, as well as to see if there was a link between knowledge and use of home remedies for minor ailments during pregnancy and certain demographic characteristics. A descriptive design with an experimental method was chosen for this study. The convenience sample method was used to pick 60 pregnant mothers from a family health centre in Coimbatore. The Chi-square test was used to assess the relationship between knowledge level and practise on home treatments for mild diseases among expectant women. The findings reveal that prenatal mothers' knowledge and practice of mild pregnancy diseases and home treatments have a significant relationship with age, education, and information source (p0.05). 65% mothers said they had adequate understanding, while 35% had poor knowledge. 50% mothers practiced home remedies fairly, 25% had well practice, and 25% had poor practice. It is relevant to incorporate training to improve knowledge and practice about home remedies to tackle with minor ailments in pregnancy to make the pregnancy more cheerful and fruitful.

Keywords

Antenatal, Home remedies, Knowledge, Minor disorders, Practice, Pregnancy

1. INTRODUCTION

Pregnancy is a magnificent experience for every woman, and she feels like the most beautiful lady on the planet while carrying her baby in her womb. During pregnancy, hormones like oestrogen, progesterone, and prolactin increase rapidly, causing the uterus to change to provide the best environment for the foetus's growth ^[1,2]. Women's body go through a variety of anatomical, physiological, and biochemical changes during pregnancy, which can cause a variety of discomforts known as mild illnesses of pregnancy. ^[3] Every mother requires physical and emotional strength during this time ^[4,5].

Nausea and vomiting, back discomfort, constipation, varicose veins, heartburn, haemorrhoids, exhaustion, ankle edema, leg cramps, and increased frequency of micturition are all minor pregnancy issues.^[6] Traditional remedies are preferred by most pregnant women because they are more effective, have a quick action, and provide a better overall well-being than mainstream medicines ^[7]. Pregnant mothers followed various practices including consuming herbs, holding urge to urinate, use of self-medications, skip meals, and reduce fluid intake ^[8,9]. Furthermore, some studies have discovered that inconveniences during pregnancy can be reduced by providing empathic and friendly counselling about measures that help to improve a mother's overall health and wellbeing ^[10]. Foremost, mothers were used traditional remedies in the last trimester to speed up delivery ^[11,12].

The main objectives of this study were to assess the knowledge level and practice of antenatal mothers regarding minor ailments of pregnancy and to find the association among knowledge level and practice of home remedies for minor disorders with selected demographic variables.

2. BACKGROUND OF THE PROBLEM

According to Aalyah, Sahar, Haitham et al, (2017) found that out of 82 mothers, 48 (59 %) had good knowledge, 26 (32 percent) had incredible knowledge, and 2 (2 percent) had inadequate awareness regarding minor diseases in a two-month cross-sectional survey.^[13,14] Another study found that primi mothers lacked understanding about minor pregnancy concerns and how to treat them naturally.^[15] Training the antenatal women regarding the minor ailments and its home remedies as a part of antenatal care during pregnancy visits aids the mother to correct minor disorders at home and continue their pregnancy in the absence of any main effects.^[16,17]

A study conducted by Sajitha, Anju, Sarika et al, reported that, walking and the systematic antenatal exercise programme had a positive effect on minor ailments in pregnancy. ^[18,19] Maternal health care professionals need to acquire basic training about integrative health approaches, and they would be able to detect and consider mothers' personal needs. ^[20]

3. MATERIALS AND METHODS

Study Design and Area

In this study, the research approach selected was descriptive cross-sectional design ^[21]. The study was conducted for a duration of 3 months in a public healthcare setting situated in Coimbatore, Tamil Nadu. After obtaining ethical clearance from the Institutional Ethics Committee of J K College of Nursing and Para medicals, Coimbatore (JKCON/OO231/2021), 120 antenatal mothers were informed and selected by convenience sampling method in outpatient department of family health centre. The information was kept confidential and anonymous.

Data collection, Tool, and Procedure

The tool was created in both English and Tamil. For this, a systematic questionnaire was created, and pertinent data was obtained from the samples. To investigate the practise of mild pregnancy problems, a 10-item checklist was created. To test the tool, ten antenatal mothers were participated in pilot research. A one-point score was given for each correct answer and a zero-point score was given for each incorrect answer. The final score was ten. For the main study obtained ethical clearance from the Institutional Ethics Committee of J K College of Nursing and Para medicals, Coimbatore (JKCON/OO231/2021), 120 antenatal mothers were selected by convenience sampling method in outpatient department of family health centre.

The study's aims were properly conveyed to the participants prior to data collection and consent was collected. Respondents' privacy was protected by not requesting any personal information. The information was kept confidential and anonymous. Statistical approaches were used to analyse the data collected. SPSS (Version 25) was used for analysis. The chi-square test was used to examine the association between expectant mothers' degree of knowledge and practise of home treatments for mild diseases [21], and the results were interpreted.

Demographic information

The parameters of demographic data of antenatal mothers included age, religion, educational status, occupation, dietary pattern, type of family and information source.



4. RESULTS

Frequency And Percentage of Samples According to Selected Demographic Variables

Frequency and percentage of antenatal mothers based on selected demographic variables like age, religion, educational status, occupation, dietary pattern, type of information and information source were assessed. It reveals that, majority 44 (36.6%) mothers were in the age group of 25-30 years, 50(41.6%) mothers belong to Hindu religion, 96(80%) mothers are housewife, and 80(66.6%) antenatal mothers take non vegetarian food. It has been reported that 54(45%) of antenatal mothers belong to nuclear family and 64(55%) were in the joint family. Moreover 46(38%) antenatal mothers received information about home remedies from relatives whereas 42(35%) mothers from health personnels and 32(27%) from social media or internet.

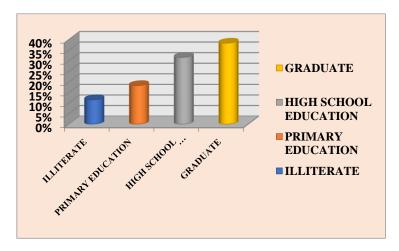


Fig. 1. Percentage distribution samples according to educational status

The cylindrical graph shows that 14(11.6%) of the antenatal mothers were illiterate, 22(18.3%) of the antenatal mothers had their primary education, 38(31.6%) of the antenatal mothers had high school education and 46(38.33%) were graduates.

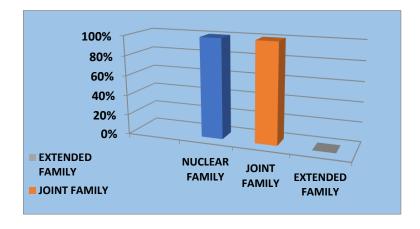


Fig. 2. Percentage distribution samples according to type of family

The bar diagram depicts that 54(45%) of antenatal mothers belong to nuclear family and 64(55%) were in the joint family.

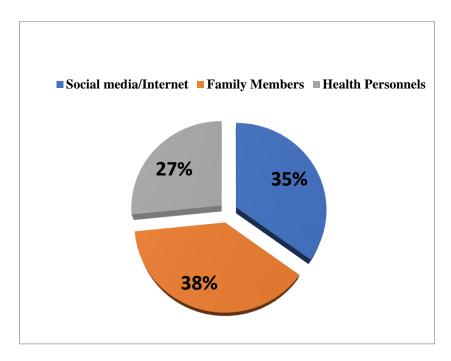


Fig.3. Percentage distribution samples according to source of information

The pie diagram shows that 46(38%) antenatal mothers received information about home remedies from relatives whereas 42(35%) mothers from health personnels and 32(27%) from social media or internet.

Prevalence of Minor Ailments of Pregnancy

Percentage distribution of prevalence of minor ailments of pregnancy

Among all minor ailments, nausea/vomiting is commonly prevalent in maximum number 44(37%) in 1st trimester ^[22,23]. Similarly, almost all equal number of antenatal mothers 46(38%) had constipation 48(39%) had fatigue in first trimester. Likewise, 26(22%) mothers' complaint as leg cramps and 17(14%) as heartburn which usually seen in first trimester. On the other hand, majority of mothers 36(30%) had backache in second trimester and only 8(6%) subjects suffered from haemorrhoids in 2nd and 3rd trimester. 50(41%) of mothers reported sleep disturbances and 52(42%) had increased urine frequency in 3rd trimester. Ankle edema was also found in 76(64%) of mothers in 3rd trimester.



Table I. Frequency and Percentage distribution of practices regarding management of minor ailments of pregnancy at home

| Sl. No | Managing ailments | F | P |
|-----------|---|----|-------|
| I | Nausea and vomiting* | | |
| | Avoid strong odours and smell | 68 | 20.4% |
| | Avoid taking fried / oily food | 40 | 33.3% |
| | • Eat frequent meals | 30 | 25% |
| | Do home management (lemon juice, ORS, other juices, fresh air, Ajwain, take ginger or garlic, chocolates) | 48 | 40% |
| | • Ignore | 20 | 16.6% |
| II | Urine frequency* | | |
| | Drinking less water | 50 | 41.6% |
| | Try to hold urge | 20 | 16.6% |
| | Drink plenty of water and void when urge | 72 | 60% |
| | Take caffeinated drinks | 36 | 30% |
| | • Ignore | 30 | 25% |
| III | Fatigue in pregnancy* | | |
| | • Rest in between work | 80 | 66.6% |
| | Drink water or juice | 76 | 63.3% |
| | • Ignore tiredness | 16 | 13.3% |
| IV | Heart burn in pregnancy* | | |
| | Avoid spicy food, coffee, soft drinks, or water | 90 | 75% |
| | Lie down immediately after taking meal | 30 | 25% |
| | Walking | 44 | 36.6% |
| | Eat frequently instead of bulk at a time | 64 | 53.3% |
| | Ignore | 18 | 15% |
| V | Constipation during pregnancy * | | |
| | Take walk, move and exercise daily | 28 | 23.3% |
| | Drink more water | 60 | 50% |
| | Eat fruits and vegetables | 80 | 66.6% |
| | Ignore | 12 | 10% |
| VI | Leg cramps/Ankle edema in pregnancy * | | |
| | Apply hot application on legs | 76 | 63.3% |
| | Massage the calf Muscles | 44 | 36.6% |
| | Take rest, elevate foot with pillow or small chair | 90 | 75% |
| | Ignore | 20 | 16.6% |
| VII | Back pain in pregnancy* | | |
| | Take rest | 90 | 75% |
| | Massage back with the help of someone | 44 | 36.6% |



Volume: 06 Issue: 10 | October - 2022 Impact Factor: 7.185 ISSN: 2582-3930

| | Apply hot application | 24 | 20% |
|------|---|-----|-------|
| | • Ignore | 16 | 13.3% |
| VIII | Sleep disturbance in pregnancy* | | |
| | Sleep or take rest in the afternoon | 40 | 33.3% |
| | • Drink a glass of milk in night /shower before e | 80 | 66.6% |
| | going to bed | | |
| | • Take a pillow under abdomen when lying in | 104 | 86.6% |
| | lateral position | | |
| | Try to ignore | 12 | 10% |
| IX | Hemorrhoids* | | |
| | Warm bath with baking soda in the water | 16 | 13.3% |
| | Avoid sitting for long period | 76 | 63.3% |
| | • Ignore | 40 | 33.3% |

^{*}Multiple response questions.

Table I depicts, the different practices followed by antenatal mothers to reduce or prevent minor ailments^[24]. 48(40%) mothers have done home management such as drinking lemon juice, ginger, etc to get relief from nausea and vomiting. 72(60%) mothers drink plenty of water and void when urge to tackle with increased urine frequency whereas 40(66.6%) mothers took rest in between work to reduce fatigue. 90(75%) avoided spicy food, coffee, soft drinks, or water to get rid of heartburn and 80(66.6%) mothers eat fruits and vegetables to prevent constipation. 76(63.3%) applied hot application on legs to get relief from ankle edema and leg cramps. 90(75%) took rest to reduce their back pain and 104(86.6%) used pillows while sleeping to overcome the sleeping difficulty. Moreover 76(63.3%) mothers avoided sitting for long period to prevent from hemorrhoids.

Table II. Association of knowledge level regarding home remedies of minor ailments of pregnancy among antenatal mothers and selected demographic variables

| Sl no: | Demographic variables | Knowledge | | Degree of freedom | X2 | P value |
|-----------|-----------------------|-----------|------------|-------------------------|-------|------------|
| | | Adequate | Inadequate | | | |
| 1. | Age | | | | | |
| | a) 20-25 years | 34 | 4 | 2 | 12.19 | .00225* |
| | b) 25-30 years | 18 | 26 | | | |
| | c)Above 30 years | 16 | 22 | | | |



International Journal of Scientific Research in Engineering and Management (IJSREM) Volume: 06 Issue: 10 | October - 2022 Impact Factor: 7.185 ISSN: 2582-3930

| Impact Factor: 7. | .185 | ISSN: | 2582-3930 |
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| 2. | Religion | | | | | |
|----|----------------------|----|----|---|-------|----------|
| | a) Hindu | 16 | 30 | 3 | 1.17 | .554 |
| | b) Christian | 10 | 30 | 3 | 1.17 | .551 |
| | c) Muslim | 8 | 22 | | | |
| | d) Others | 8 | 22 | | | |
| | | - | - | | | |
| 3. | Educational status | | | | | |
| | a) Primary education | 6 | 16 | | | |
| | b) High school | 22 | 6 | | | |
| | education | 38 | 8 | 3 | 21.01 | .000105* |
| | c) Graduate | 2 | 12 | | | |
| | d) Illiterate | | | | | |
| 4. | Occupation | | | | | |
| | a) Housewife | 36 | 38 | | | |
| | b) Private employee | 10 | 12 | 3 | .276 | .870 |
| | c) Self employee | - | - | | | |
| | d) Coolie | 2 | 2 | | | |
| 5. | Dietary pattern | | | | | |
| | a) Vegetarian | 14 | 26 | 1 | .462 | .496 |
| | b) Non vegetarian | 30 | 50 | | | |
| 6. | Type of family | | | | | |
| | a) Joint family | 26 | 38 | 2 | .462 | .496 |
| | b) Nuclear family | 18 | 38 | | | |
| | c) Extended family | - | - | | | |
| 7. | Source of | | | | | |
| | | | | | | |
| | | | | | | |



| info | ormation | 30 | 12 | | | |
|------|------------------|----|----|---|-------|-------|
| a) | Social media/ | 36 | 10 | 2 | 7.478 | .023* |
| Inte | Internet | 12 | 20 | | | |
| b) | Family members | | | | | |
| c) | Health personals | | | | | |

Table II illustrates that, the knowledge about minor disorders of pregnancy and its home remedies to get rid of it among mothers was found to have significant association with age, education, and source of information [25] with p value of .00225, .000105 and .023 respectively. (p<0.05).

Table III. Association between practice score and demographic variables among primi mothers on minor disorders of pregnancy and home remedies

| SI No: | Demographic variables | | Practio | ce | Degree of freedom | X2 | P value |
|--------|--------------------------|------|---------|------|-------------------|-------|----------|
| | | Poor | Fair | Good | | | |
| 1. | Age | | | | | | |
| | a) 20-25 years | 4 | 30 | 4 | 4 | 22.69 | .000146* |
| | b) 25-30 years | 6 | 12 | 26 | | | |
| | c) Above 30 years | 18 | 10 | 10 | | | |
| 2. | Religion | | | | | | |
| | e) Hindu f) Christian | 10 | 36 | 20 | 6 | 3.62 | .459 |
| | g) Muslim | 6 | 14 | 2 | | | |
| | h) Others | 8 | 20 | 4 | | | |
| | | - | - | - | | | |
| 3. | Educational status | | | | | | |
| | a) Primary education | 24 | 4 | 6 | | | |
| | b) High school education | 6 | 28 | 4 | | 12.69 | .048* |
| | c) Graduate | 6 | 30 | 10 | 6 | | |



| | d) Illiterate | 6 | 6 | 2 | | | |
|----|--------------------------|----|----|----|---|------|--------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 4. | Occupation | | | | | | |
| | a) Housewife | 26 | 40 | 28 | 6 | .291 | .9903 |
| | b) Private employee | 6 | 8 | 8 | | | |
| | c) Self employee | - | - | - | | | |
| | d) Coolie | - | 2 | 2 | | | |
| 5. | Dietary pattern | | | | | | |
| | a) Vegetarian | 4 | 30 | 4 | 2 | .436 | .803 |
| | b) Non vegetarian | 8 | 60 | 14 | | | |
| 6. | Type of family | | | | | | |
| | a) Joint family | 6 | 54 | 4 | 4 | 2.07 | .355 |
| | b) Nuclear family | 6 | 40 | 10 | | | |
| | c) Extended family | - | - | - | | | |
| 7. | Source of information | | | | | | |
| | a) Social media/Internet | 8 | 24 | 10 | | | |
| | b) Family members | 6 | 30 | 10 | 4 | 12.9 | .0117* |
| | c) Health personals | 20 | 8 | 4 | | | |

^{*}Significant at p level (<0.05) NS at p value >0.05.

Table III denotes the practice regarding home remedies for minor ailments of pregnancy among mothers which was found out by using chi square test. There was a significant association with age, education and source of information(p<0.05).

5. DISCUSSION

A study conducted by Bala M reported that there was no single mother not experienced any minor disorder and the most frequent minor ailment prevailing in the subjects was morning sickness with a n account of 77% and smallest was piles recorded as 0 ^[26]. The present study reveals that 65% of antenatal mothers had adequate knowledge level and 35% mothers reported inadequate knowledge about home

remedies. In addition to that 50% mothers had fair practice and 25% had good and same number had poor practice of home remedies. The finding showed a positive significant association of the knowledge and practice on home remedies to reduce minor disorders among antenatal mothers with demographic variables. Which is alike the similar study conducted by Sharma A, Rani R, Nebhinani M et al, (2020) where knowledge level had significant association with age and education ^[27]. It is suggested that herbal medicines are considered as safe to use in pregnancy to get relief from minor problems, but it should be taken only in normal doses ^[28,29]. The findings of the study encouraged the need for adopting home remedies for minor disorders among antenatal women and it is found to be safe and effective.

CONCLUSION

Minor disorders experience in pregnancy comprises of commonly experienced symptoms coupled with the effects of hormones in pregnancy and due to the uterine enlargement by the fetus [30]. These problems are typical during pregnancy, and the majority of them can be treated at home without the use of drugs. The current study supports the hypothesis that there is a significant variation in prenatal women' knowledge and practise of home remedies for mild diseases, and that knowledge and practise are related to age, education, and information source. The study's key findings have a wide range of implications in nursing practise, education, research, and administration, with a focus on maternity nursing. It is necessary to take additional steps to undertake large-scale study on the occurrence and severity of diseases during pregnancy. It is also critical to raise awareness among expectant women about natural therapies for common ailments.

ACKNOWLEDGEMENT

The Authors express their sincere gratitude to study subjects for being part of this study and sharing their valuable time and information. Also, thankful to all faculties of JK College of Paramedicals, Coimbatore and Amrita College of Nursing, Kochi for providing much needed support and guidance.

CONFLICT OF INTEREST

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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