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A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURE TEACHING PROGRAM OF HYGIENIC PRACTICE IN EPISIOTOMY WOUND AMONG POSTNATAL MOTHER

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Abstract

Episiotomy is a procedure in which your obstetrician makes a small cut between the bottom of your vaginal opening and anus (an area called the perineum) during childbirth. An episiotomy makes the opening of your vagina wider, which allows your baby to come through more easily. Sometimes your perineum will tear naturally as your baby comes out. This is called perineal tear (or laceration). In this study to assess the effectiveness of structure teaching program of hygienic practice in episiotomy wound among postnatal mother. In this study quantitative, evaluative research approach, The pre experimental one group pretest and post test research design will selected for this study. 100 subjects were selected through non-probability convenient sampling. Data were collected with practical structured questionnaires and analyzed using descriptive and inferential statistics.

Keywords: *structured teaching programme, hygienic, practice, episiotomy wound and postnatal mother.*

INTRODUCTION

An episiotomy is a cut (incision) through the area between your vaginal opening and your anus. This area is called the perineum. This procedure is done to make your vaginal opening larger for childbirth. An episiotomy is a surgical cut to the perineum (the opening of the birth canal)

during childbirth. Episiotomies used to be common practice, but today the best medical knowledge available shows that sometimes episiotomies may do more harm than good. Mothers who have episiotomies are more likely to have a slower recovery from problems like ‘tearing’ further than the episiotomy cut, or loss of bladder and bowel control. Because of these risks, guidelines now recommend your provider perform an episiotomy only when medically necessary.

Statement of the problem

A study to assess the effectiveness of structure teaching program of hygienic practice in episiotomy wound among postnatal mother

AIM:

To evaluate the effectiveness of a structured teaching programme of hygienic practice in episiotomy wound among postnatal mother.

OBJECTIVES:

1. To assess the Hygienic Practice regarding Episiotomy wound among Post natal Mother before and after structured teaching programme.
2. To evaluate the effectiveness of structured teaching programme regarding hygienic Practice in Episiotomy among Postnatal Mother.
3. To find out the association of posttest hygienic practice



regarding Episiotomy wound among Postnatal mother with their selected demographic variables.

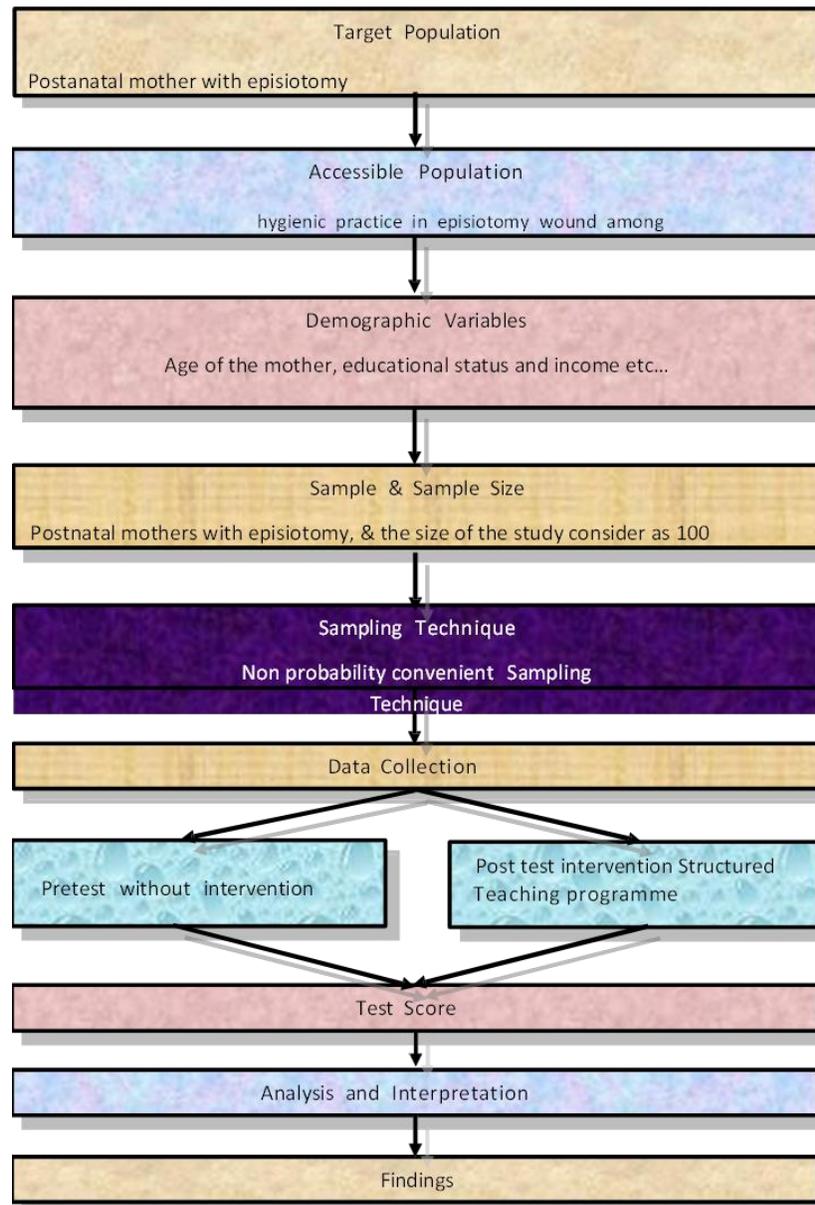
Hypotheses:

H1 - There is a significant increase in the level of hygienic Practice regarding episiotomy wound among postnatal mother after structured teaching programme.

Limitations

- The study Was limited to the periods of 4 weeks.
- The study sample was limited to 100 samples.
- The study was limited to Postnatal mother only

METHODOLOGY:



REVIEW OF LITERATURE

Section A: Review related to prevalence of Episiotomy wound

Section B: Review related to causes of episiotomy wound infection

Section C: Review related to management of episiotomy wound infection

Section D: Review related to knowledge regarding episiotomy wound among postnatal mother

Section E: Review related to hygienic regarding episiotomy wound among postnatal mother.

Data Collection Procedure

1. The study subjects will be selected by Non probability convenient sampling technique.
2. The data collection will be started with self-introduction of an investigator following with obtaining consent from the study subjects.
3. The investigator will ensure that the response providing by the subject will be kept confidential.
4. Structured teaching programme will be implemented for each study subject individually or in group based on the availability and the teaching will be given for 25-30 minutes after conducting pre test.
5. One week after structured teaching programme administration, post test will be conduct.
6. Structured teaching programme will be administered for 1-4 samples per day

RESULTS AND DISCUSSION

1. With respect to age, majority (38%) belonged to the age group of 23–27 years, followed by 28% in the age group of 28–32 years, 20% in the 18–22 years group, and only 14% were above 32 years of age.
2. With respect to religion, the majority were Hindus (65%), followed by Christians (25%) and Muslims (10%). Regarding education, 40% of the mothers had completed secondary schooling, 35% were college-going, 15% had primary-level education, and 10% were illiterate.
3. In terms of living status, nearly half (48%) of the mothers resided in rural areas, 42% in urban areas, and 10% reported both urban and rural living.
4. Concerning family structure, 52% belonged to nuclear families, 36% to joint families, and 12% to extended

families. With respect to parity, 45% were primiparous, 35% were in their second birth order, and 20% were multiparous.

5. Regarding the number of children, 40% of mothers had one child, 35% had two children, 15% had three, and 10% had more than three children. For birth order, 38% of children were firstborn, 34% second-born, 18% third-born, and 10% fourth-born.
6. In terms of episiotomy tear degree, 44% of mothers experienced a second-degree tear, 32% a first-degree tear, 18% a third-degree tear, and 6% a fourth-degree tear.
7. Finally, concerning the birth weight of the baby, 46% weighed between 2501–3000 g, 28% between 3001–3500 g, 14% below 2500 g, and 12% above 3500 g.

CONCLUSION

The study concluded that the structured teaching programme was effective in improving the hygienic practices regarding episiotomy wound care among postnatal mothers. The post-test scores showed a significant increase compared to the pre-test scores ($p \leq 0.05$), indicating that the intervention had a positive impact. Furthermore, no significant association was found between the post-test hygienic practice scores and selected demographic variables, suggesting that the structured teaching programme was beneficial for all mothers irrespective of their age, education, parity, or other characteristics. These findings highlight the importance of educational interventions in promoting proper hygienic practices for better postnatal care and faster episiotomy wound healing.

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