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ASSESS THE KNOWLEDGE ON DYSFUNCTIONAL UTERINE BLEEDING AMONG FOURTH YEAR BSc. NURSING STUDENTS

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ABSTRACT
A healthy woman usually reaches the stage of menarche and attains womanhood in a normal manner and a woman's health is considered to be asset not only to her but also to her family. Dysfunctional Uterine Bleeding [DUB] is irregular menstrual bleeding that is not caused by a serious condition such as disease or pregnancy complications. The research process undertook was a study to assess the knowledge on Dysfunctional uterine bleeding among fourth year B.Sc. Nursing students of Bishop Benziger College of Nursing, Kollam. The objective of the study was to assess the knowledge on Dysfunctional uterine bleeding among fourth year B.Sc. Nursing students of Bishop Benziger College of Nursing, Kollam. To find the association between knowledge and selected demographic variables. To achieve the objective a descriptive study was conducted. The sample for the study was 30 fourth year Bsc. Nursing students of Bishop Benziger College of Nursing, Kollam. The study was conducted on 09/06/2018. The collected data were analysed using descriptive statistics. The findings of the study revealed that most of the samples had good knowledge (66.67%), about 26.67% had adequate knowledge, 6.66% had very good knowledge and no one had poor knowledge. The findings of the study shows that there is a significant association between knowledge and area of residence.

KEYWORDS: Assess, knowledge, 4[th] year Bsc nursing students, dysfunctional uterine bleeding.

INTRODUCTION
Dysfunctional Uterine Bleeding [DUB] is irregular menstrual bleeding that is not caused by a serious condition such as disease or pregnancy complications. It is usually caused by changing hormone levels which may affect ovulation. DUB is the most common problem faced by gynecologists today with many treatment options with existing and new ones being developed.[1]

DUB is the most common cause of abnormal uterine bleeding near the beginning and end of women's reproductive life. It occurs most often in women above 45 years (50% of cases) and in adolescents (20% of cases).[2] In United States, DUB is a common diagnosis making up to 5-10% of cases in clinical out-patient setting. Obese females tend to have irregular menstrual cycles due to production of estrogen related to degree of adipose tissue.[4]

A descriptive study was conducted to assess the knowledge regarding DUB among 600 rural women in South Africa. The study results revealed that only 27% of women had adequate knowledge regarding DUB and remaining 73% of them had inadequate knowledge regarding DUB. The study concluded that there is a need to educate the rural women to increase awareness about DUB.[5]

In United States about 5-10% of cases in clinical outpatient setting were diagnosed to have DUB in which 50% of cases occurred in the age group of more than 45 years women.[6] In India, about 20% of DUB cases are seen among adolescent girls and 40% of cases among women above 35 - 45 years of age.[4]

A comparative study conducted by all India institute of medical sciences, New Delhi with an objective to study the estrogen receptor and progesterone receptor expression in endometrium of woman with dysfunctional uterine bleeding as compared to women with normal menstrual cycle with 30 patients and 20 controls selected. Trans vaginal ultrasound and endometrial sampling for histology and estrogen receptor and progesterone receptor estimation immune histochemically was carried out.[2] Their response to treatment was assessed by clinical follow up. Endometrial thickness and estrogen receptor and progesterone receptor levels in dysfunctional uterine bleeding patients were significantly higher. Altered endometrial morphology and increased receptor levels in dysfunctional uterine bleeding patients suggest that

unopposed estrogen effect could have an important role in the pathogenesis of dysfunctional uterine bleeding.[7]
A descriptive study was done to assess the knowledge of adolescent regarding dysfunctional uterine bleeding and how it is a dangerous health problem during adolescence. A questionnaire containing 29 questions about menstruation was given to 3000 secondary school student. The results of the study showed that mean age of the students was 15.8 years and their menarche age was 12.9 years. Irregular periods were observed in 26.7% of the cases. About 62.2% had at least one irregular bleeding in their lives, 11.3% visited gynecologist for irregular bleeding, and 4.5% were treated for it. Dysmenorrhea occurred in 38.7% of the students. The study concluded that menstrual disorders during adolescents as DUB are common but neglected. Medical staffs who specialize in adolescent gynecology must address the problem.

Nowadays Dysfunctional uterine bleeding is very common among women and adolescent age group. Researcher met many women in hospital (Gynaec OP) affected by Abnormal uterine bleeding and came to know that they don't have enough knowledge regarding Dysfunctional uterine bleeding (DUB). So the researcher selected this problem statement to improve knowledge about the disease and its prevention among fourth year Bsc Nursing students.

Objective

- To assess the knowledge on Dysfunctional uterine bleeding among fourth year B.Sc. Nursing students studying in Bishop Benziger College of Nursing, Kollam.
- To find the association between knowledge among fourth year B.Sc. Nursing students and selected demographic variables area of residence, type of family, previous knowledge.

MATERIALS AND METHOD

The present study selected a quantitative approach to assess the knowledge about dysfunctional uterine bleeding among fourth year Bsc Nursing students.

Study design

A descriptive study in which quiestionnaire was used to collect data from 30 students in Bishop Benziger college of nursing, Kollam.

Inclusion criteria

The first order care givers,

- Willing to participate.
- Can understand English.
- Who are present at the time of data collection.

Exclusion criteria

- Who are not present at the time of data collection.
- Who are not willing to participate in the study Tools and Technique.
- Section A: Demographic Performa.
- Section B: Structured questionnaire.

Data collection process

A formal written permission was obtained from Bishop Benziger College of Nursing, Kollam and a written consent was taken from the participants. Samples fulfilling the inclusion criteria was included in the study. The investigators introduced themselves to the subjects and the purpose of the study was explained to them. Confidentiality was assured. 30 samples were selected and the tool was introduced.

Statistical analysis

The data collectecd were analysed according to the objectives. The data were analyzed using descriptive statistics.

RESULTS

Section I

- Distribution of samples according to the demographic data.

Section II

- Distribution of samples according to their knowledge level.

Section III

- Association between knowledge and selected demographic variables.

Section I

Table 1: Frequency and percentage distribution of samples according to demographic data.

Sl.No	Demographic variables	Frequency	Percentage
1	**Area of residence**		
	Rural	11	36.67%
	Urban	19	63.33%
2	**Type of family**		
	Joint	5	16.67%
	Nuclear	25	83.33%
3	**Previous knowledge**		
	Yes	29	96.67%
	No	1	3.33%

Table I shows that

- Most of the samples 19 (63.33%) were residing in urban area and 11 (36.67%) samples residing in rural area.
- Most of sample 25 (83.33%) belongs to nuclear family and 5 (16.67%) samples belongs to joint family.
- 29 (96.67%) samples had previous knowledge on dysfunctional uterine bleeding and 1 (3.33%) samples did not have previous knowledge on dysfunctional uterine bleeding.

Distribution of samples according to area of residence
N=30

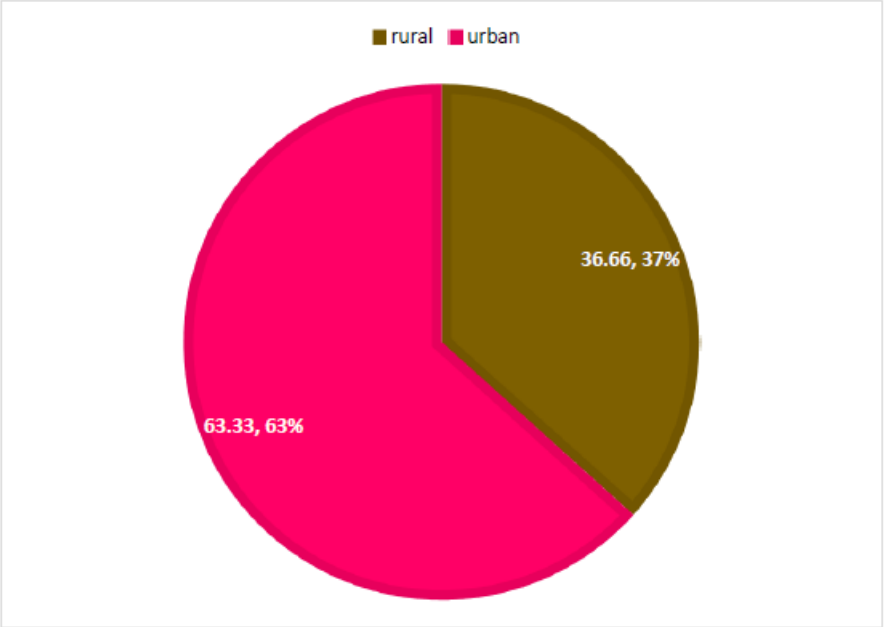

Figure 1: Pie diagram showing of samples according to area of residence.

The diagram depicts 63.33% of students are from urban area and 36.66% are from rural area.

N=30

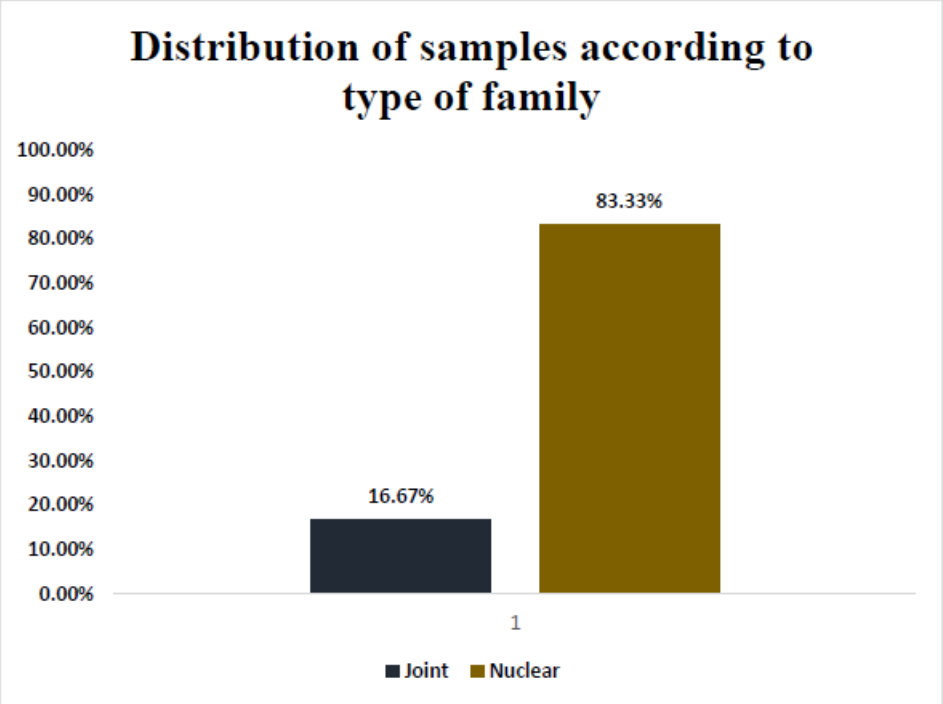

Figure 2: Bar diagram showing distribution of samples according to type of family.

This diagram depicts 83.33% belong to nuclear family and 16.67% samples belong to joint family.

N=30

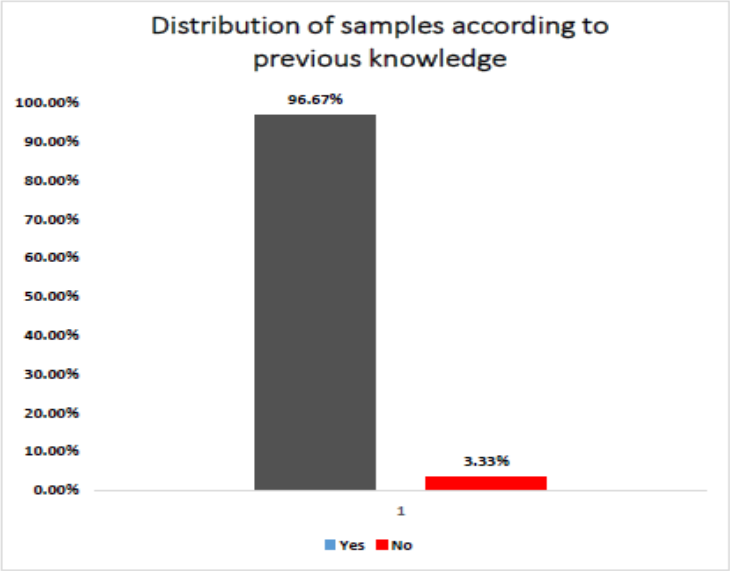

Figure 3: Bar diagram showing distribution of samples according to their previous knowledge.

This diagram depicts 96.67% samples had previous knowledge and 3.33% had less knowledge.

Section II

Table 2: Distribution of samples according to their knowledge level.

N=30

Sl no	Knowledge level	Number of samples	Percentage
1	Poor knowledge	0	0
2	Adequate knowledge	8	26.67%
3	Good knowledge	20	66.67%
4	Very good knowledge	2	6.66%

Table 2 shows that, most of them had good knowledge (66.67%), about (26.67%) had adequate knowledge, (6.66%) had very good knowledge and no one had poor knowledge.

N=30

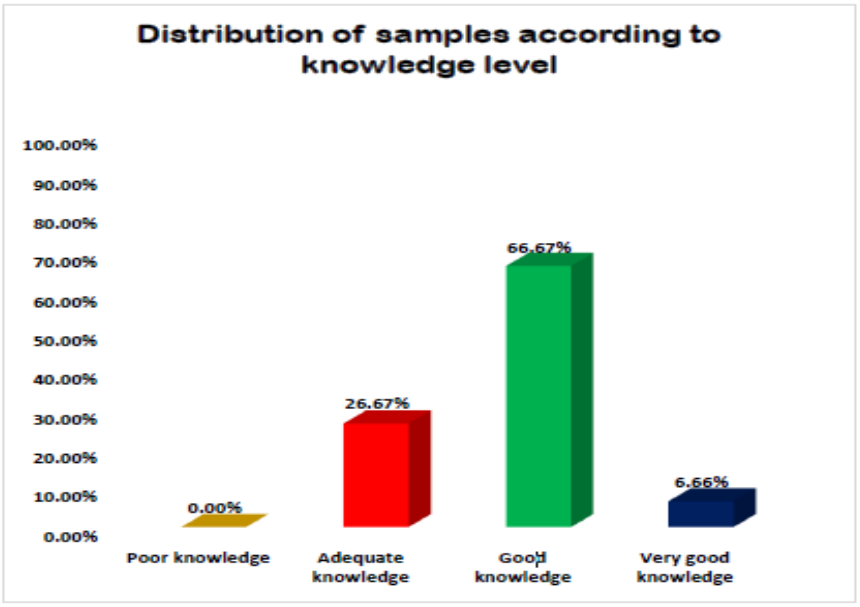

Figure 4: This diagram showing distribution of samples according to their knowledge level.

This diagram depicts that, most of them had good knowledge (66.67%), about (26.67%) had adequate knowledge, (6.66%) had very good knowledge and no one had poor knowledge.

Table 3: Mean, Mean percentage and standard deviation of knowledge on Dysfunctional uterine bleeding among fourth year B.Sc. Nursing students.

Aspect of knowledge	Maximum score	Mean	Mean percentage	Standard deviation
Knowledge on dysfunctional uterine bleeding among fourth year B.Sc. Nursing students	20	11.5	57.5%	2.04

SECTION III

Table 4: Association between knowledge and selected demographic variables.

Demographic variables	Average	Knowledge Good	Very Good	df	Chi square	Table value	Significance
Area of residence							
Rural	0	8	1				
Urban	4	17	0	1	4.09	3.84	S*
Type of family							
Joint	0	4	0				
Nuclear	4	21	1	1	0.93	3.84	NS
Previous knowledge							
Yes	4	24	1				
No	0	1	0	1	0.20	3.84	NS

0.05 level of significance *S- Significant NS- Non significant.

The data in Table 4 shows the association between the knowledge and selected demographic variables area of residence, type of family, previous knowledge. As the calculated chi-square value of area of residence was more than the table value at 0.05 level of significance there was a significant association between knowledge and areas of residence.

DISCUSSION

The research was conducted in a view to assess the knowledge on Dysfunctional uterine bleeding among fourth year B.Sc. Nursing students of Bishop Benziger College of Nursing, Kollam. The findings of the study was based on the interpretation from the statistical analysis. The findings were discussed in relation to the objective:

The objective of the study was:

- To assess the knowledge on Dysfunctional uterine bleeding among fourth year B.Sc. Nursing students studying in Bishop Benziger College of Nursing, Kollam.
- To find the association between knowledge among fourth year B.Sc. Nursing students and selected demographic variables area of residence, type of family, previous knowledge.

Among the samples, most of them had good knowledge (66.67%), 26.67% had adequate knowledge, 6.66% had very good knowledge and no one had poor knowledge also there is a significant association between area of residence and knowledge.

CONCLUSION

The findings of the present study include most of them had good knowledge (66.67%), 26.67% had adequate knowledge, 6.66% had very good knowledge and no one had poor knowledge and significant association between area of residence and knowledge.

REFERENCES

1. Dutta D.C. textbook of gynaecology. 6th ed. (Calcutta): new central book agency publications, 2004; 131-529.
2. Gloria L. Maternity and obstetrical nursing. 2nd ed. (Banglore): EMESS publications, 2015; 205-207.
3. Nima B. Midwifery and Obstetrical and nursing. 2nd ed. (Banglore): EMMESS publications, 2015; 205-207.
4. Brunner and Suddarths, "The text book of medical surgical nursing", volume-1, lippincot williams and Wilkins publication, 2009, 11th ed, 56-57p.
5. Joyce M. Black, "The text book of medical surgical nursing", 8th ed, elsevier Publication, 2009; 152-153p.
6. ″Health promotion ″ available from https://bhsoc.org/google.com, retrieved on 24th November 2012.
7. ″Introduction to hypertension ″ available from htt://americanhaeart.org/presenter.jhtml, retrieved on 23rd November 2012.
8. Gupta R. Trends in hypertension epidemiology in India. Journal of Human Hypertension, 2004; 18: 73–78. doi:10.1038/sj.jhh.1001633.
9. Lewis Heitkemper Diksen, "The text book of medical surgical nursing", 8th ed, Mosby publication,

96-98 p.
10. Suresh K Sharma, "The text book of nursing research and stastics", 2nd ed, 2011; 70-72.
11. ″World Health Statistics -2012″, available fromwww.who.int/entity/ whostastics, retrievedon 22nd November 2012.
12. ″American Health Statistics-2012″, available from www.google.com, retrieved On 20th November 2012.