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# Knowledge Regarding Risk Factors and Prevention of Preeclampsia Among Married Women in Selected Urban Community Areas of Aizawl, Mizoram

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Abstract: Background and Objectives: Preeclampsia has the greatest impact on maternal mortality which complicates nearly a tenth of pregnancies worldwide. It is the second leading cause of direct maternal death and directly responsible for 70,000 maternal deaths annually at the global level, although the exact prevalence of morbidity and mortality related to preeclampsia is not reported in the developing countries. The objectives of study were to to assess the knowledge regarding risk factor and prevention of preeclampsia among married women in selected urban, community areas of Aizawl, Mizoram and to determine the association between the knowledge regarding risk factor and prevention of preeclampsia with selected socio-demographic variables among married women.

Methods: Quantitative research approach was adopted to conducted a study at Hlimen community, Aizawl, Mizoram. Convenient sampling technique was used to select 100 married women of the age group within 18-45 years. Self-Administered Structured knowledge Questionnaire was used to collect the data.

Results: Findings of study revealed that majority of married women i.e 63(63%) were within the age group of 18-30 years and 37(37%) were within the age group of 31-45 years. Majority 58(58%) married women has moderately adequate knowledge, 30(30%) has adequate knowledge and 12(12%) has inadequate knowledge regarding risk factors and prevention of preeclampsia. There was no significant association between level of knowledge with selected demographic variables among married women.

Conclusion: The result of the study indicates that more information and awareness regarding risk factors and prevention of preeclampsia in different places such as sub-centre, primary health centre and hospitals is required to prevent the complication and early diagnosis of preeclampsia.

### I. INTRODUCTION

Preeclampsia is a multisystem disorder of unknown etiology characterized by development of hypertension to the extend of 140/90 mmHg or more with proteinuria after the 20<sup>th</sup> week in a previously normotensive and nonproteinuria woman. Preeclampsia and pregnancy induced hypertension share to a large extend risk factor, causes, and complication. Thus, much of the information about preeclampsia is also valid for pregnancy induced hypertension. Preeclampsia affects 3-4% of all pregnant women. All together 10% of pregnant women are affected by a hypertensive complication of pregnancy.

### A. Statement Of The Problem

"A study to assess the knowledge regarding risk factors and prevention of preeclampsia among married women in selected urban community areas of Aizawl, Mizoram."

### B. Objectives

- 1) To assess the level of knowledge regarding risk factors and prevention of preeclampsia among married women in selected urban, community areas of Aizawl, Mizoram.
- 2) To determine the association between the knowledge regarding risk factors and prevention of preeclampsia with selected sociodemographic variables among married women in selected urban community areas of Aizawl, Mizoram.

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### C. Hypothesis

 $H_1$ : There is significant association between knowledge regarding risk factors and prevention of preeclampsia with selected sociodemographic variables among married women.

### II. MATERIALS AND METHODS

A quantitative research approach was used to assess the knowledge regarding risk factors and prevention of preeclampsia among married women in selected urban community areas of Aizawl, Mizoram. 100 married women were selected using non-probability convenient sampling technique and self-administered structure knowledge questionnaire was used to collect the data. The analysis was done by using descriptive and inferential statistics.

### **RESULTS**

Table 1: Frequency and percentage distribution of demographic variables of married women.

Demographic	Frequency (f)	Percentage (%)			
Age in year:		-			
18-30	63	63%			
31-45	37	37%			
Type of Family:					
Nuclear	46	46%			
Joint	54	54%			
Educational Status:					
Primary	2	2%			
Middle	7	7%			
High	39	39%			
Higher	35	35%			
Graduate or	17	17%			
above					
Gravida:					
No child	6	6%			
One	31	31%			
Two	31	31%			
Three or more	32	32%			
Occupation:					
Homemaker	71	71%			
Daily wager	10	10%			
Govt. employee	5	5%			
Private employee	14	14%			
Family Income Per Month:					
5000-10000	16	16%			
10000-15000	25	25%			
15000-20000	29	29%			
>20000	30	30%			
Source of Information Regarding					
Preeclampsia:					
Health professionals	32	32%			
Friends	12	12%			
Neighbours	7	7%			
Mass media	3	3%			
No source of information	46	46%			





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The data presented in the table 1 shows that majority 63(63%) belongs to the age group of 18-30 years, 54(54%) belongs to Joint family in which 39(39%) had an educational qualification of High school, where 32(32%) had more than 3 children. Majority 71% were homemaker, only 30(30%) had an income of >20000, among them only 3% had no previous information.

Table.2: Frequency and percentage distribution of knowledge score among married women.

n=100

Knowledge score	Score range	Frequency (f)	Percentage (%)	
Inadequate Knowledge	0-11	12	12	
Moderately adequate				
knowledge	12-14	58	58	
Adequate knowledge	15-20	30	30	

The data presented in the table 2 depicts that majority i.e 58(58%) married women has moderately adequate knowledge, 30(30%) has adequate knowledge and 12(12%) has inadequate knowledge regarding risk factors and prevention of preeclampsia.

Table.3: Findings related to association between knowledge with selected demographic variables among married women. n=100

	Knowledge score						
Variables	Inadequate	Moderately adequate	Adequate	$X^2$	df	p-value	inferences
ge in year:							
3-30	5	20	10	0.275	2	5.99	NS
1-45	7	38	20				
ype of Family:				2.217	2	5.99	NS
uclear	3	24	15				
pint	9	34	15				
DUCATIONAL FATUS				4.355	8	15.51	NS
rimary	_	2	2			10.01	110
liddle	1		2				
igh	4	22					
igher	8	16					
raduate or	1	14	2				
oove				3.182	6	12.59	NS
RAVIDA							
o child	1	2	3				
ne	5	17					
wo	3	20	7	4.355	6	12.59	NS
hree or more	4	19	11				
iig ig ra R	ddle gh gher aduate or ove  AVIDA child e	ddle	ddle	ddle     1     8     2       gh     4     22     15       gher     8     16     11       aduate or     1     14     2       ve     2     3       child     1     2     3       ro     3     20     7	ddle     1     8     2       gh     4     22     15       gher     8     16     11       aduate or     1     14     2       ave     3.182         AAVIDA       child     1     2     3       e     5     17     8       ro     3     20     7     4.355	ddle     1     8     2       gh     4     22     15       gher     8     16     11       aduate or     1     14     2       ave     3.182     6       AAVIDA child     1     2     3       co     3     20     7     4.355     6	ddle         1         8         2           gh         4         22         15           gher         8         16         11           aduate or         1         14         2           aAVIDA         3.182         6         12.59           child         1         2         3           e         5         17         8           ro         3         20         7         4.355         6         12.59





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5.	OCCUDATION							
5.	OCCUPATION	_	40	2.1				
	Homemaker	7	40	21				
	Daily wager	1	6	5	4.806	6	12.59	NS
	Govt. employee	-	4	2				
	Private employee	3	9	2				
6.	FAMILY INCOME							
	PER MONTH							
	5000-10000							
	10000-15000	3	7	6				
	15000-20000	2	13	9				
	>20000	2 5	21	7	6.249	8	15.51	NS
		5	17	8				
	SOURCE OF							
7.	INFORMATION							
	REGARDING							
	PREECLAMPSIA							
	Health professionals							
	Friends							
	Neighbours							
	Mass media	7	18	8				
	No source of	-	7	5				
	information	1	1	4				
		-	2	1				
		3	30	13				

Table.3 shows that there was no significant association between knowledge regarding risk factors and prevention of preeclampsia and selected demographic variables among married women. Hence the research hypothesis  $H_1$  was rejected null hypothesis $(H_{01})$  was accepted.

### III. CONCLUSION

The study finding shows that knowledge regarding risk factors and prevention of preeclampsia plays a great impact among women in urban community area. Majority 58(58%) has moderately adequate knowledge, out of which 30(30%) has adequate knowledge and 12(12%) has inadequate knowledge. Hence the study proves that awareness regarding risk factors and prevention of preeclampsia needs to be provided among women in community area so that their health status will be improved and prevent from preeclampsia.

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