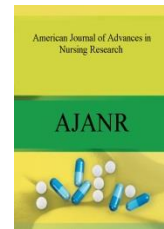




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### A COMPARATIVE STUDY TO ASSESS THE EFFECTIVENESS OF BETADINE SITZ BATH VERSUS NEEM EXTRACT SITZBATH ON EPISIOTOMY WOUND HEALING AMONG POST NATAL MOTHERS IN SELECTED HOSPITAL

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#### ABSTRACT

The study Postpartum period is a period when the mother experiences intense physical and emotional stress due to exhaustion anxiety and excitement, each mother has to adjust to physical changes in her own body due to involution and lactation as well as cope up with new demands in her time and emotions made by the newborn baby. Postpartum period is distinct in to three phases. The third phase is the postpartum period which can last up to 6 weeks. Some changes to the genitourinary system are much longer in resolving and some may never fully revert to the prepregnant state. The investigator selected 60 samples on the basis of inclusion criteria, and the samples were divided in to two groups (I & II). Among that 30 samples were experimental group I and other 30 samples were experimental group II, who met the inclusion criteria were selected by purposive sampling technique. The first two weeks the samples for experimental group I were selected from the postnatal ward I and demographic variables were collected and pretest was conducted on the first day morning, the wound healing was assessed by REEDA scale. Then the intervention of betadine sitz bath was given for 10-15 minutes, twice a day daily (Morning & Evening) and for three days to experimental group I. Next two weeks of period, the experimental group II was selected from the postnatal ward II and demographic variables were collected and pretest was done on the first day morning, the wound healing was assessed by REEDA scale. Then the intervention of neem extract sitzbath was given for 10-15 minutes, twice a day daily (morning & evening) for three days to experimental group II. Then the post test level of wound healing was assessed by REEDA scale. The data were analyzed and tabulated using descriptive and inferential statistics.

#### INTRODUCTION

Motherhood is more than a premium birth centre – It is a way of experiencing birth as a normal, natural, completely unique and personal event in a family. We give utmost priority to a woman needs and preferences

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during the most special moment of life. We also believe in educating our clients and their families about every procedure to assist them in making informed health care choices. Post partum period lasts from delivery to six weeks afterward, it is also known as fourth trimester. The post natal mothers experience various physiological and psychological changes when she makes the transition from the pregnant woman to a mother. The needs of the

Research Article



client and the family during the post partum period can be met through coordinated multi disciplinary care of the mother, child and the family. Episiotomy infection can be observed by persistent redness and swelling, separation of wound edges, purulent discharge and persistent pain. The immediate complications related to episiotomy are extension of the incision, vulval haematoma, infection, wound dehiscence, injury to the anal muscles and necrotizing fasciitis. The remote complications related to episiotomy are dyspareunia, chance of perineal lacerations and scar endometriosis. Episiotomy wound can cause a considerable discomfort and pain the perineum is extremely tender area and the muscles of perineum are involved in many activities. e.g sitting, walking, controlling urination and defecation. This discomfort interferes with the rest and sleep. Mother feels discomfort even when she holds her baby and it affects breast feeding and newborn care. A cortisone based cream or a sitz bath helps to decrease inflammation to relieve tension in that area.

### Statement of the Problem

A comparative study to assess the effectiveness of betadine sitz bath versus neem extract sitzbath on episiotomy wound healing among post natal mothers in selected hospital

### AIM

The aim of the study was to effectiveness of betadine sitz bath versus neem extract sitzbath on episiotomy wound healing among post natal mothers.

### OBJECTIVES

1. To compare the pre and post test level of wound healing scores among post natal mothers in experimental group I (Betadine sitzbath)
2. To compare the pre and post test level of wound healing scores among post natal mothers in experimental group II (Neem extract sitzbath).
3. To compare the effectiveness of post test level of wound healing scores among postnatal mothers between experimental group I&II.
4. To find out the association between the post test level of episiotomy wound healing scores with their selected demographic variables in experimental group I. (betadine sitzbath)
5. To find out the association between the post test level of episiotomy wound healing scores with their selected demographic variables in experimental group II.(neem extract sitzbath).

### Hypothesis

**H1:** There is a significant difference between the mean pretest and post score on episiotomy wound healing

among post natal mothers in experimental group I.

**H2:** There is a significant difference between the mean pretest and posttest score on episiotomy wound healing among post natal mothers in experimental group II.

**H3:** There is a significant difference between the mean post test scores on episiotomy wound healing among post natal mothers between experimental group I and experimental group II

**H4:** There will be a significant association between the mean post testscore on episiotomy wound healing among post natal mothers with their selected demographic variables in experimental group I.

**H5:** There will be a significant association between mean post test score on episiotomy wound healing among post natal mothers with their selected demographic variables in experimental group II.

### Assumptions

- Improper care of episiotomy may lead to infection
- Postnatal mothers with episiotomy may prone to develop complications
- Nurses have an important role in reducing episiotomy pain and promotion of wound healing

### Variables

**Independent variable:** Neem extract sitz bath, beta dine sitz bath.

**Dependent variable:** Episiotomy wound healing

### Description of the Tool

**SECTION A:** To assess the demographic profile, the structured interview schedule was used. It comprised of demographic data of episiotomy wound healing such as age, educational status, occupation, family income, religion, gravida, mode of delivery, type of family. No score was given to this demographic profile. The data was used for descriptive statistics.

**SECTION B:** REEDA scale assessment of episiotomy wound healing. REEDA acronym is used as a nursing tool when evaluating an episiotomy wound which is invented by Nancy Davidson – (1974). REEDA stands for redness, edema, ecchymosis (purplish patch of blood flow), discharge, and approximation (closeness of the skin edges). This tool is used to assess healing based on a 3 point scale; a score of 3 signifies an assessment of very poor wound healing.

### Reliability

The reliability of REEDA scale was assessed by



inter-rater reliability method and Karl Pearson co-efficient formula. The tool was found to be reliable (0.98).

### Data Collection Procedure

The main study was conducted with 60 samples, and the samples were divided into two groups (I&II). Among that 30 samples were experimental group I and other 30 samples were experimental group II, and who met the inclusion criteria were selected by purposive sampling technique. The experimental Group I from the postnatal ward I, and the experimental group II from their postnatal ward II. In this study 3-4 samples were selected per day. The first two weeks the experimental group I was selected from the postnatal ward I and demographic variables were collected on the basis of inclusion criteria and pretest was conducted on the first day morning, the wound healing was assessed by REEDA scale. Then the intervention of betadine sitz bath was given for 10-15 minutes, twice a day daily (Morning & Evening) for three days to experimental group I. Then the post test was done with the same scale on 3rd day evening in postnatal ward I. Next two weeks of period, the experimental group II was selected from the postnatal ward II and demographic variables were collected on the basis of inclusion criteria and pretest was done on the first day morning, the wound healing was assessed by REEDA scale. Then the intervention of neem extract sitzbath was given for 10-15 minutes, twice a day daily (morning& evening) for three days to experimental group II. Then the post test level of wound healing was assessed with the same scale. The data were analyzed and tabulated using descriptive and inferential statistics.

### RESULTS AND DISCUSSION

The findings show that the mean wound healing score in experimental group I in before betadine sitzbath is 9.3 (SD±1.104) and after Betadine sitzbath is 0.56

(SD±0.670) respectively. The paired t-test value is 38.870, which is significant at P<0.05 level. And the mean wound healing score in experimental group II, before Neem extract sitzbath is 9.2 (SD±0.959) and after Neem extract sitzbath is 0.23 (SD±0.424) respectively. The paired t-test value is 53.926, which is significant at P<0.05 level.

The mean post test wound healing score in group I is about 0.56 (SD±0.670) and group II is about 0.23 (SD±0.424) respectively. The independent t-test value 2.537 which is significant at P<0.05 level. The results show that there is a significant difference between the mean post test score of betadine sitzbath and mean post test score of neem extract sitzbath on episiotomy wound healing among postnatal mothers. Therefore it is clearly proved by this study that Neem Extract Sitzbath is effective more than betadine sitz bath on episiotomy wound healing.

### CONCLUSION

The present study was done to assess the effectiveness of Betadine sitz bath and Neem Extract sitzbath among primi postnatal mothers with episiotomy wound healing during postnatal period in Kasturba hospital at Dindugal. Based on statistical findings, the mean post test score of experimental group II (0.23 (SD±0.424)) was significantly lower than the mean post test score of experimental score of group I (0.56 (SD±0.670)). Independent 't' value was 2.537 (table value=2.001) which is significant at P<0.05. Therefore the investigator felt that there is a significant difference on episiotomy wound healing between Neem extract sitzbath and Betadine sitzbath. Statistically proved that neem extract sitzbath is more effective in episiotomy wound healing than betadine sitzbath among postnatal mothers.

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