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A study to assess the knowledge and risk factors on high risk pregnancy among women's

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Abstract
A high risk pregnancy is one in which some condition puts the mother, the developing fetus, or both at higher-than-normal risk for complications during or after the pregnancy and birth. The aim of the study is to assess the knowledge and risk factors on high risk pregnancy among women's in a selected village. A Quantitative approach with descriptive design was chosen for the present study. The study was undertaken in kuthambakkam village with 60 pregnant women's by purposive sampling technique. Demographic Data was collected by semi structured questionnaire method which consists of age, education, occupation, type of marriage, obstetrical status, monthly income, the level of knowledge among pregnant mothers related to high risk Pregnancy was also assessed by semi structured questionnaire. The data was collected, and analyzed descriptive and inferential statistics. Out of 60 mothers 18(30%) had adequate knowledge, 22(37%) women's had moderate knowledge and 20(30.5%) women's had poor knowledge. The study was revealed that majority of women's are having moderate knowledge.

Keywords: pregnant mothers, high-risk pregnancy, knowledge

Introduction
A high risk pregnancy is one in which some condition puts the mother, the developing fetus, or both at higher-than-normal risk for complications during or after the pregnancy and birth. A pregnancy can be considered a high-risk pregnancy for a variety of reasons. Factors can be divided into maternal and fetal. Maternal factors include age (younger than age 15, older than age 35); weight (pre-pregnancy weight under 100 lb or obesity); height (under five feet); history of complications during previous pregnancies (including stillbirth, fetal loss, preterm labor and/or delivery, small-for-gestational age baby, large baby, pre-eclampsia or eclampsia) [1-4].

More than five previous pregnancies; bleeding during the third trimester; abnormalities of the reproductive tract; uterine fibroids; hypertension; Rh incompatibility; gestational diabetes; infections of the vagina and/or cervix; kidney infection; fever; acute surgical emergency (appendicitis, gallbladder disease, bowel obstruction); post-term pregnancy; pre-existing chronic illness (such as asthma, autoimmune disease, cancer, sickle cell anemia, tuberculosis, herpes, AIDS, heart disease, kidney disease, Cohn's disease, ulcerative colitis, diabetes). Fetal factors include exposure to infection (especially herpes simplex, viral hepatitis, mumps, rubella, Varicella, syphilis, toxoplasmosis, and infections caused by virus) [5-7]. Women diagnosed with a high-risk pregnancy may also need the expert advice and care of a perinatologist. A perinatologist is a medical doctor (obstetrician) who specializes in the care of women who are at high risk for having problems during pregnancy [8].

The preconception period is considered an important time for women's health and an opportunity to develop a healthy lifestyle that can be useful both for the health of the mother and the newborn baby. Although it has been well documented that there is a need to implement interventions to promote appropriate behaviours in women of reproductive age before the conception and that maternal risk factors should be identified and modified also before conception, the Healthy People 2020 strategy still indicated that pregnancy is a good time to identify existing maternal risk factors. It also states that increased knowledge among women about maternal risk factors may result in immediate benefits by reducing adverse events in pregnancy and birth and long-term benefits for the health of mothers and children [9-10].

Indeed, it is well established that maternal behaviours and several conditions are associated with adverse pregnancy outcomes. In particular, lifestyle factors such as tobacco and alcohol use in pregnancy increase the risk of low birth weight, preterm delivery and perinatal mortality. Moreover, maternal weight problems, obesity, gestational diabetes and failure to take folic acid supplementation were associated with an increased risk of pre-eclampsia, neurological, cardiac and orofacial defects, high birth weight and stillbirth [11].

Several studies have assessed the knowledge and behaviours of reproductive aged women and pregnant women with regard to some individual risk factors in pregnancy such as smoking, alcohol consumption, oral health and obesity [12]. However, very few studies have examined several risk factors simultaneously. Therefore, the present survey, conducted with a representative sample of pregnant women with the objectives of to assess the knowledge and risk factors on high risk pregnancy among women's in a selected village.

Materials and Method
A Quantitative approach with descriptive design was chosen for the present study. The study was undertaken in kuthambakkam village with 60 pregnant women's by purposive sampling technique. The study was done after obtaining from formal permission from the panchayats officer. Demographic Data was collected by semi structured

questionnaire method which consists of age, education, occupation, type of marriage, obstetrical status, monthly Income, the level of knowledge among pregnant mothers related to high risk.

Pregnancy was also assessed by semi structured questionnaire. The data was collected, and analyzed by descriptive and inferential statistics.

Results and Discussion

The results of the present study characteristics are among 60 mothers, 32% were in the age group of 15-25 yrs, 37 % of mothers had primary education, 80% of mothers are house wives, 72% of women had consanguineous marriage, 62% of mothers were multipara.

Table 1: Distribution of level of knowledge on risk factors on high risk pregnancy among women's

S. No	Level of Knowledge	Frequency (N)	Percentage %	Mean	Standard Deviation
1.	Inadequate knowledge	20	305%	4.73	2.23
2.	Moderate knowledge	22	37%	14.3	2.43
3.	Adequate knowledge	18	30%	22.3	0.925

Out of 60 mothers 18 (30%) had adequate knowledge, 22 (37%) women's had moderate knowledge and 20 (30.5%) women's had poor knowledge.

The present study is supported by Esposito, G., Ambrosio, R., Napolitano, F., & Di Giuseppe, G. (2015) who conducted a study on Women's Knowledge, Attitudes and Behavior about Maternal Risk Factors in Pregnancy. The results of the study are only 42% of women correctly knew all the main maternal risk factors in pregnancy (alcohol, smoking, passive smoking and obesity). Only 21.7% of women were very worried about causing harm to the fetus or child with their risk behaviors, and 22.3% of women reported smoking during pregnancy. Approximately one-third of women (28.9%) reported regularly drinking alcohol before pregnancy and 74.8% of these women reported stopping drinking alcohol during pregnancy. However, only 27.3% of women who were drinking alcohol during pregnancy had the intention of stopping. Only 43.7% of women indicated that during ambulatory gynecological examinations they received information from physicians about the possible damage resulting from all the main risk factors in pregnancy (alcohol, smoking, passive smoking and obesity) [13].

Conflict of interest

Author declares no conflict of interest.

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