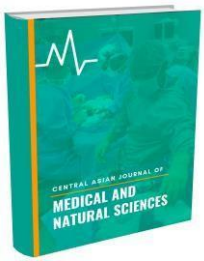

CENTRAL ASIAN JOURNAL OF MEDICAL AND NATURAL SCIENCES
https://cajmns.centralasianstudies.org/index.php/CAJMNS
Volume: 05 Issue: 03 | July 2024 ISSN: 2660-4159

Article

Assessment of Pregnant Women's Knowledge about Gestational Diabetes at Primary Health Care Centers

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Abstract: Diabetes mellitus [DM] is a chronic metabolic disease caused by hereditary and/or acquired insufficiency in the production of insulin by the pancreas. The Objective of This Study; To assess the knowledge pregnant women toward Gestational Diabetes at primary health care centers. Methodology: A descriptive statistical study was designed on all pregnant women in primary health care centers in the Karkh region from January 14 to February 14, 2024. Results; Relative to age groups, the highest percentage of study sample is (28.3%) at the age a group (27-30) years, while the lowest percentage is (3.3%) at the age a group (36-40) years and (13.3%) at the age a group (16-20) year and (21.6%) at the age a group (21-26) year and (25%) at the age a group (31-36) and (8.3%) (40 and above) Conclusion; Most of the study sample size has been high of subjects' responses concerned with pregnant women toward gestational diabetes. Recommendation; That continuing education is necessary to improve awareness of GDM.

Keywords: Pregnant Women, Gestational Diabetes, Health Care Centers

1. Introduction

Pregnancy is one of the wonderful and noble services imposed by nature which no women can shrink. It is a period of happiness, excitement, expectancy, anxiety and fear. (Edmonds 2013)

Some common maternal health condition or problems a women may experience during pregnancy are Anemia, UTI, Mental health condition, Hypertension, Gestational Diabetes mellitus, Obesity and Weight gain, Infection, Hyper emesis gravidarum. (Center for Disease Control and preventive reproductive health 2016).

The main cause and risk factor of Gestational Diabetes Mellitus are age >25 years, pre-gestational obesity or excessive weight gain during pregnancy, family history of diabetes, personal history of poor obstetric out-come such as polyhydramnios, macrosomia, pre-eclampsia, fetal malformation of an ethnic group with a high-risk prevalence of diabetes and history of Diabetes Mellitus in previous pregnancy. (Edmonds 2013). Diabetes mellitus [DM] is a chronic metabolic disease caused by hereditary and/or acquired insufficiency in the production of insulin by the

pancreas, or by the ineffectiveness of the insulin produced. It is characterized by elevated blood concentrations of glucose, which in turn injure many of the body's systems, especially the blood vessels and nerves. DM is usually classified into four groups – Type 1, Type 2, gestational diabetes mellitus and diabetes related with

Citation: **Emad Hamid Hwaidi, Asmaa Yaseen Yousif**. Assessment of Pregnant Women's Knowledge about Gestational Diabetes at Primary Health Care Centers. Central Asian Journal of Medical and Natural Science 2024, 5(3), 854-858.

Received: 12th July 2024
Revised: 14th July 2024
Accepted: 17th July 2024
Published: 22th July 2024

other conditions - and each group has distinctive casual and risk factors (WHO), 2016; Alberti, Zimmet and Shaw 2006). A recent literature review has also suggested that gestational diabetes and fetal macrosomia are independent risk factors for shoulder dystocia (Young and Ecker, 2013).

The Objective of This Study; To assess the knowledge pregnant women toward Gestational Diabetes at primary health care centers.

2. Materials and Methods

Design of the study

A descriptive statistical study was designed on all pregnant women in primary health care centers from January 14 to february14, 2024.

Setting of the study

The study was conducted in primary health care centers. (Al-Mahmoudia First Health Center, Al-Rasheed Health Center Two, Al- Youssoufia Health Center, Al-Latifia Health Center).

Sample of study

A purposive sample of (60) pregnant women in the primary health care center

Data collection methods:

The data was collected through the use of the study tool which started from January 14 to February 14, 2024, and the data is collected through the following technique:

1- The questionnaire was given to pregnant women

2- Give all of them 15 minutes to answer the questions.

3. Results and Discussion

Table (1): Distribution of the Sample According to Demographic Characteristics of the Participants of pregnant women (No.=60)

SDCv.	Groups	No.	%			
Age	16-20 year	8	13.3			
	21-26 year	13	21.6			
	27-30 year	17	28.3			
	31-36 year	15	25			
	36-40 year	2	3.3			
	40 and above	5	8.3			
	Total	60	100			
Level of education	illiteracy	8	13.3			
	Primary graduate	14	23.3			
	High School graduate	20	33.3			
	College graduate	18	30			
	Total	60	100			
Have you had gestational diabetes in the past?			Yes		No	
			F	%	F	%
			17	28.3	43	71.6

Table (2): Distribution of Knowledge Responding Among pregnant women toward gestational diabetes:

No.	Items	Yes		No		Not Known		Ass.
		F	%	F	%	F	%	
1	Does a pregnant mother with gestational diabetes suffer from low blood sugar?	33	55	23	38.3	4	6.6	Mod
2	Can gestational diabetes be cured?	44	73.3	7	11.6	9	15	High
3	Is there a cure for gestational diabetes?	40	66.6	9	15	11	18.3	Mod
4	Does being overweight increase the risk of gestational diabetes?	44	73.3	12	20	4	6.6	High
5	Does psychological or nervous stress during pregnancy affect blood sugar levels?	46	76.6	6	10	8	13.3	High
6	Do you think that more pregnancy increases the chance of developing gestational diabetes?	27	45	25	41.6	8	13.3	Low
7	Do you think women with gestational diabetes have a higher chance To get infected again?	45	75	6	10	9	15	High
8	Does gestational diabetes affect insulin in the body?	44	73.3	6	10	10	16.6	High
9	Does gestational diabetes affect blood pressure?	33	55	19	31.6	8	13.3	Mod
10	Does gestational diabetes affect the joints?	39	65	12	20	9	15	Mod
11	Does gestational diabetes affect the nerves?	43	71.6	4	6.6	10	16.6	High
12	Does gestational diabetes affect the health of the eyes ?	50	83.3	5	8.3	5	8.3	High

Table (3) Distribution of the Sample According to knowledge of pregnant women about the effect of gestational diabetes on the fetus:

No.	Item	Yes		No		Not known		Ass.
		F	%	F	%	F	%	
1	Does gestational diabetes affect the health of the fetus?	51	85	6	10	3	5	high
2	Does gestational diabetes lead to an increase in the size of the fetus?	44	73.3	12	20	4	6.6	High
3	Does gestational diabetes cause fetal death in the womb?	34	56.6	13	21.6	13	21.6	Mod
4	Does gestational diabetes cause birth defects to the fetus?	33	55	15	25	12	20	Mod
5	Does gestational diabetes increase the water around the fetus and expose it to premature birth?	38	63.3	6	10	16	26.6	Mod
6	Does gestational diabetes lead to bleeding during childbirth?	29	48.3	17	28.3	14	23.3	Mod
7	If the mother has gestational diabetes, is the child at risk of developing diabetes or obesity later on?	34	56.6	10	16.6	16	26.6	Mod

Discussion

Discussion of Descriptive analysis was applied to describe the sample:

Table (1) show the results of the study in Table (4-1) indicated that there has been a highly significant difference reported among the observed frequencies in the light of contrasts of their expected outcomes. Relative to age groups, the highest percentage of study sample is (28.3%) at the age a group (27-30) years, while the lowest percentage is (3.3%) at the age a group (36-40) years and (13.3%) at the age a group (16-20) years and (21.6%) at the age a group (21-26) year and (25%) at the age a group (31-36) and (8.3%) (40 and above) With respect to "The Educational level", the highest percentage of the study sample is (33.3%) High School graduate, while the lowest percentage is (13.3%) at illiteracy and (23.3%) at primary school graduate and (26.6%) at college graduate. Finally, the highest percentage of study sample is (71.6%) they never had gestational diabetes before.

These results agree with the results of previous studies (Lende, Michelle, & Asha Rijhsinghani 2020) .

Discussion of Descriptive Statistics for of Knowledge pregnant women toward gestational diabetes:

Table (2) shows the most the study sample size has been high of subjects' responses concerned with pregnant women toward gestational diabetes. Assessments in light of the response "high ", formed six items only. and they accounted for 7 (23.3%), and "mod " they accounted 4 (6.6), while not responding to some items formed a low assessment, and they accounted for 1(3.3 %). These results disagree with the results of previous studies (Sürücü, Hamdiye Arda, et al 2018)

Discussion of Descriptive Statistics for knowledge of pregnant women about the effect of gestational diabetes on the fetus

Table (3) shows the most the study sample size has been high of subjects' responses concerned with pregnant women about the effect of gestational diabetes on the fetus. Assessments in light of the response "high", formed two items only. and they accounted for 2 (7.6%), and "mod " they accounted 5 (16.7). These results agree with the results of previous studies (Alnaim& Abdullah ,2020)

4. Conclusion

Based on the data analysis, discussion and critical interpretation of such findings, the present study comes with the following conclusions:

1-Most of the study sample size were in low and moderate Socio- Economic Status.

2- Most of the study sample size has been high of subjects' responses concerned with pregnant women toward gestational diabetes.

3-Most of the study sample size has been high of subjects' responses concerned with pregnant women about the effect of gestational diabetes on the fetus.

Recommendations:

The study findings and conclusions are contributed to the following recommendations:

1-That continuing education is necessary to improve awareness of GDM.

2-Early prenatal education is likely to be important and the Health Work Administration

3-Workshops on risk factors pregnant women in primary health care centers.

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