

# A Study of Maternal Awareness and Participation During Caesarean Sections

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## Summary

A total of 100 women who underwent caesarean section in Lok Nayak Hospital, New Delhi were asked about their views on a set of questionnaires before their discharge from the hospital. Only 80% women knew why they had a caesarean section. None of them were explained anything about the procedure nor were they asked about the type of incision they preferred. If given an option, 86% preferred a transverse incision, 78% preferred a vaginal delivery, 84% preferred to experience labour pains. Only 18% women wanted to time the birth of the baby. A total of 60% preferred general anaesthesia, while 40% preferred regional anaesthesia. A total of 90% preferred to have next delivery in the same hospital. Attending staff was polite and helpful according to 58% women, while 34% found the staff not to be very helpful. Post-operative complications were experienced by 24% women.

In conclusion, the women are not frequently involved in decision making, nor are they offered the choice of incision and anaesthesia. The hospital staff should strive to involve women in decision making regarding type of incision and anaesthesia and should be more polite and helpful to the patients.

## Introduction

Caesarean section is one of the most common obstetric operations. Although there has been a steady improvement in the technique and safety of the procedure throughout the world, involving women in the decision making is still not the priority in third world countries. With consumer act looming large on doctors heads, it is all the more important that we involve women in the decision making and discuss with them and their partners the progress of labour and development of any abnormality. If Caesarean section is required, written consent is always taken, but how much time the obstetrician and anaesthetist spend with the patient before the procedure? Is it an informed consent? It is a rarity that the patient's views are taken about the type of incision and anaesthesia she wants for her caesarean section. She should be told the sequence of events during and after the caesarean and about various complications

which can occur. These simple tips will improve her faith in the system with better patient satisfaction rate.

## Material and Methods

A total of 100 women, who underwent caesarean section in the Lok Nayak Hospital, New Delhi, were asked questions from a questionnaire on various aspects of caesarean section before their discharge from the hospital. The questions were regarding the involvement of women in the decision making and whether they were given any option, their choice of mode of delivery, anaesthesia, their experience of hospital staff's behaviour and the complications experienced by them as per questionnaire (appendix).

## Results

The results according to different questions are as follows:

1. A total of 80 women (80%) knew why they underwent caesarean section while 20 (20%) had no clue why they ended up having the caesarean section.
2. None of the patients were explained about the technical details of caesarean section. Similarly none of them were asked about their choice of incision.
3. If given an option, 86 (86%) patients preferred a bikini (transverse) incision, while only 14% preferred a vertical incision. The main reason for their choice was that transverse incision could be hidden under the saree fold and was thus cosmetically superior.
4. If given a choice, 78% women preferred a vaginal delivery, 6% preferred instrumental delivery and the remaining 18% preferred caesarean section.
5. To the question of experiencing labour pains, 84% women preferred to experience true labour pains, while 16% opted for caesarean section. The main reason of experiencing labour pains was that it was natural and that they felt satisfied that they were doing something for the baby.
6. Majority of women (82%) did not want to time the birth of their baby and wanted to leave it to the God and attending obstetrician as to when should the baby be born.
7. About the type of anaesthesia, majority of the women (60%) liked to have general anaesthesia so that they could not know anything at the time of procedure and were totally painfree. But 40% preferred regional especially epidural anaesthesia as they could then remain conscious but painfree during the procedure.
8. Most of the women (84%) preferred to have normal vaginal delivery in their next pregnancy, if possible.
9. Majority (90%) of the women preferred to have next caesarean in the same hospital. The reasons given were that it was close to their house (40%), good staff (20%), some relative working in the hospital or knowing someone in the hospital (30%).
10. Only 16% women thought that the baby born by caesarean section was different from that born vaginally and the difference according to them was that he/she was smaller in size (8%), weaker (4%) or fair in complexion (4%).
11. A total of 58% women found the attending staff (doctors, nurses and other employees) to be helpful and polite, while 34% found them not to be so helpful, while 8% did not answer the question.
12. Most women (74%) felt that mortality and morbidity was more in caesarean section, while 24% thought it to be higher in vaginal delivery. Two women (2%) had no view.
13. Most women (76%) experienced no post-operative complications. Twenty four (24%) women had some complications in the form of non-productive cough (12%), excessive pain (9%) and infected wound (3%).

## Discussion

Caesarean section is one of the most common obstetric operation and about 15% women end up in having it (Sharma, 1998). While there is a lot of importance given to involvement of women in their health care in western countries, this field has not received much attention in most of the third world countries especially Government hospitals (Chamberlain, 1994). The main reason is excessive work load, lack of staff and the concept amongst the junior doctors that this aspect is not much important in patient care. They feel they know what is best for their patients and try to do their best in the given circumstances and that it is a waste of time to discuss with their patients. With consumer act coming into vogue this aspect of health care is getting more and more important. The results of this study clearly show that more generally speaking the patients are not involved in their health care. The fact that none of the women were explained about the caesarean section, type of incision and anaesthesia needs to be stressed upon. That if given an option, majority of them (86%) preferred a transverse incision as they found it cosmetically superior, may come as a surprise for some doctors who take patients for granted. Similarly a high 78% would have preferred a vaginal delivery this time and 84% would like to deliver vaginally in next pregnancy, clearly shows that our women are no less wise than their western counterparts and would prefer to be involved in the decision making during their care. This is despite the fact that our hospital caters to poor patients. The demand is going to be high in private hospitals.

Questionnaires have been used to know the views of doctors of patients and important data have been collected by their use (Young et al, 1993; Sharma et al, 1997). In our study 60% women preferred general anaesthesia and only 40% liked regional anaesthesia. This is in contrast to western countries where epidural analgesia is the analgesia of choice for all obstetric cases as it provides the greatest patient satisfaction with least side effects (Cade and Ashley, 1993). Extradural tentanyl has been added to get better results and for post operative analgesia (Cooper et al, 1995). Opioids have also been used in epidural analgesia for better results (Rosaeg and Lindsay, 1994).

The results of maternal complications in the present study as perceived by them are almost at par with other studies. Beattie et al (1994) found infection rate of 25% in their patients and found antibiotic prophylaxis to be the most significant protective factor in the reduction of postoperative wound infection, a practice already routine in all Indian hospitals. The average hospital stay in our hospital is 7 days which is more than average of 4

days in western countries and the factors increasing hospital stay significantly are multiparity; medical problems in mother and pre and post operative complications (Merchaoui et al, 1992).

The present study stresses the urgent need of involving women in their health care and decision making process. They should be explained the reason for caesarean section and should be taken into confidence about the type of incision and anaesthesia given to them during caesarean section. This will go a long way in better patient satisfaction without any financial burden and with minimum extra time. Junior doctors should be given some training about communication skills.

## References

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## Questionnaire to Assess the Patient's View on Caesarean Section (Post Operative) in UNJP Hospital – New Delhi

Coordinator : Dr. J. B. Sharma  
Dr. Deepak Yaduvanshi

Patient Name : ..... Under C/o Dr. ....

Cr. No: ..... Educational Status: .....

Obs. History: .....

Q 1 Do you know why you had a Caesarean Section: Yes  No

Q 2 Did someone explain to you about the procedure: Yes  No

Q 3 Were you asked about the type of incision you had Yes  No

Q 4 If given an option, would you prefer a Bikni Incision (Transverse)  Vertical Incision

Q 5 If given an option, would you like to have:  
Normal Vaginal delivery  Instrumental Delivery  Caesarean Section

Q 6 If given an option, what would you choose:  
Caesarean Section  Experience True Labour Pains

Q 7 What would you choose as a mode of anaesthesia :  
Epidural anaesthesia  General anaesthesia

Q 8 Would you like to time the birth of your baby Yes  No

Q 9 Would you like to have a next delivery by?  
Normal Vaginal delivery  Elective Caesarean Section

Q 10 If "Caesarean Section" would you like to have it in the same Hospital?  
Yes  No

Q 11 Do you think a baby born by LSCS is in any way different from that of Normal Vaginal Delivery?  
Yes  No

Q 12 If "Yes" to above Question in what way.

Q 13 What is your view about the Nursing Staff?  
Polite & Helpful  Rude & Unhelpful  Can't say

Q 14 Do you think Maternal Mortality is more with  
Caesarean Section  Normal Vaginal Delivery

Q 15 Had you any post operative complications, if yes, state?