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Effectiveness of Focused Counselling on Nipple Trauma and its Management Among Lactating Mothers

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Abstract: Exclusive breast feeding for 6 months is a universal and recommended by WHO and UNICEF. Most of the time, many mothers' experiences painful feeding due to sore nipple or traumatized nipple. Nipple trauma is one of the leading causes to reduce the breast-feeding rate. Promoting the practice of proper breast-feeding techniques reduces the nipple trauma, thus promotes the wellness of infants by breast feeding exclusively. The main objective of this study was to explore the knowledge regarding nipple trauma and its management, impart the knowledge regarding prevention of nipple trauma among lactating mothers. One group pre- and post-test design was adopted. Primi para lactating mothers were selected through purposive sampling technique in selected hospital, Cuddalore, Tamil Nadu. The study revealed that 80% of mothers had inadequate knowledge, 20% had moderately adequate knowledge about nipple trauma and its management. 32.7% of mother belongs to the age group of 26-30 years. 45% of them are working in non-governmental sectors, 23 % of mother had complicated pregnancy. The value of demographic variables such as age, occupation, complications during antenatal period and intake of medication while pregnant had significant association, respectively ($\chi^2 = 12.2$, $\chi^2 = 14.4$, $\chi^2 = 11.4$ and $\chi^2 11.10$) at the level of $p \leq 0.001$ and $p < 0.05$. This study concluded that focusing on the problem with focused individual counselling promotes the breast feeding rate.

Keywords: Nipple trauma, Primi para-lactating mother, Knowledge, Counselling, Nipple feeding

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Introduction

Breast milk is the best form of nutrition for the newborn and infants. Under nutrition is estimated to be associated with 2.7 million child deaths annually. UNICEF and WHO recommends early initiation (UNICEF- WHO, 2008) of breast feeding and continue exclusively till 6 months of age. The

prevalence of improper breast-feeding technique is more prevalent in India (Thakre *et al.*, 2012). These improper technique of feeding leading to nipple trauma. The main reason for this is lack of awareness among the postnatal mothers. A holistic approach should be used in obstetrical

unit by the midwife. Often due to lack of information, education and care it leads to perinatal mortality and morbidity. The main causes of nipple trauma are improper breast-feeding technique and positioning (Santos *et al.*, 2016; Tiruveet *et al.*, 2018). Making insight in the lacking aspects of breast feeding and empowering the women with breast feeding techniques (Yilak *et al.*, 2020) positioning and managing the traumatized nipple will help the mother to continue the exclusive breast feeding for 6 months and continue for another one year. Some of the simple and personal measures will reduce the incidence of nipple trauma like cleansing of breast and nipple and applying breast milk on traumatized area will promotes the healing (Page *et al.*, 2003; Dennis *et al.*, 2003). Imparting knowledge about prevention and management of nipple trauma will enhance the breast-feeding practices (Shimoda *et al.*, 2015).

Entrusting the mother about breast feeding technique and positioning through a formal education, common breast problems during antenatal and postnatal period, prevention and management of nipple trauma, availability of continuous and constant support from health care professionals leads to blissful motherhood.

The present study was performed –(i) To assess the knowledge regarding nipple trauma and its management, (ii) to associate the level of knowledge on nipple trauma and its management among primi para lactating mothers with selected demographic variables, and (iii) to find the effectiveness of Individual focused counselling on nipple trauma and its management.

Materials and Methods

Research design: Qualitative research approach-one group pre and posttest design.

Population: lactating mothers

Sample: Primi para lactating mothers between the age group of 21-35 years

Sample size: 55 mothers. The sample size calculated based on 95% confidence interval.

Sampling technique: purposive sampling technique

Setting: Selected hospital, Cuddalore.

Data collection tool: Self-structured validated tool was used. Consists of 2 parts. Part 1- demographic variables and part 2- knowledge questionnaire regarding nipple trauma and its management. It has 20 items related with causes, preventive measures, various breast-feeding techniques/ positioning and management of nipple trauma. Correct answer was given score 1 and wrong answer given 0.

Intervention: Individual focused counselling on breast feeding techniques, positioning and proper latching during breast feeding the baby. Face to face interaction about issues while breast feeding and assessing the breast-feeding practices.

Data collection: The information was collected from 55 postnatal mother on day 4 and 5 of their postnatal period with the complaints of difficulty in feeding the babies. The knowledge questionnaire was used to assess the awareness of nipple trauma and their breast-feeding pattern were assessed. Data was collected over a period of two months. Postnatal mothers were counselled for the breast-feeding technique and positioning individually (Tables 1, 2).

About 80% postnatal mothers had inadequate knowledge and leading aspect was causes of nipple trauma (36.3%) and breast-feeding technique (27.25%).

Results and Discussion

Fifty-five primi para lactating mothers were participated in this study. 32.7% of primi para lactating mothers belongs to 26-30 years of age group. Maximum of 60% of samples completed their under graduation. Nearly 45% of mother were working in non-governmental sectors but 75% of them were employed. Everyone (100%) was vaccinated with 2 doses of Injection Tetanus toxoid. Regular antenatal visits were attended by 96% of mothers and 65.4% had less than Rs.20,000/- as their family income.

Table: 1 Distribution and association of demographic variables of primi para lactating mothers (n=55)

Topic	Demographic variables	Frequency	Percentage	Chi square value
Age in years	21-25	13	23.6	$\chi^2 = 12.2$ d.f=3 p=0.006 S**
	26-30	20	32.7	
	31-35	11	20	
	Above 35	11	20	
Qualification	Secondary school education	4	7.3	$\chi^2 = 5.531$ d.f=3 p = 0.137 N.S
	Diploma	15	27.2	
	Degree	33	60	
	Home maker	3	5.4	
Occupation	Daily wages	14	25.4	$\chi^2 = 14.4$ d.f=2 p = 0.001 S***
	Non-governmental sector	25	45	
	Government employee	16	29	
Family income (Rs)	Below 20,000/-	36	65.4	$\chi^2 = 3.360$ d.f=3 p = 0.339 N.S
	20001- 30000/-	12	21.8	
	30001- 40000/-	4	7.2	
	Above 40000/-	3	5.4	
Attended regular antenatal check up	Attended	53	96.3	$\chi^2 = 2.094$ d.f=1 p = 0.148 N.S
	Not attended	2	3.63	
	Not administered	0	0	
Obstetrical complications	Gestational Diabetes	1	1.8	$\chi^2 = 11.4$ d.f=4 p = 0.022 S*
	Thyroid	13	23.6	
	Hypertensive disorders	7	12.8	
	Others	0	0	
	None	34	61.8	
Medication usage	Gestational Diabetes	4	7.2	$\chi^2 = 11.1$ d.f=4 p = 0.025 S*
	Thyroid	7	12.7	
	Hypertensive disorders	10	18.1	
	PCOS Drugs during prenatal period	0	0	
	others	-	-	
	None	34	61.8	

Table 2: Distribution of primi para lactating mothers by their knowledge level on nipple trauma and its management at pre interventional level (n=55)

Knowledge level	Inadequate		Moderately Adequate	
	f	%	f	%
Causes	16	36.3	4	36.3
Preventive measures	9	20.4	3	27.2
Breast feeding technique/ positioning	12	27.2	2	18.1
Management of nipple trauma	7	15.9	2	18.1
Over all	44	80	11	20

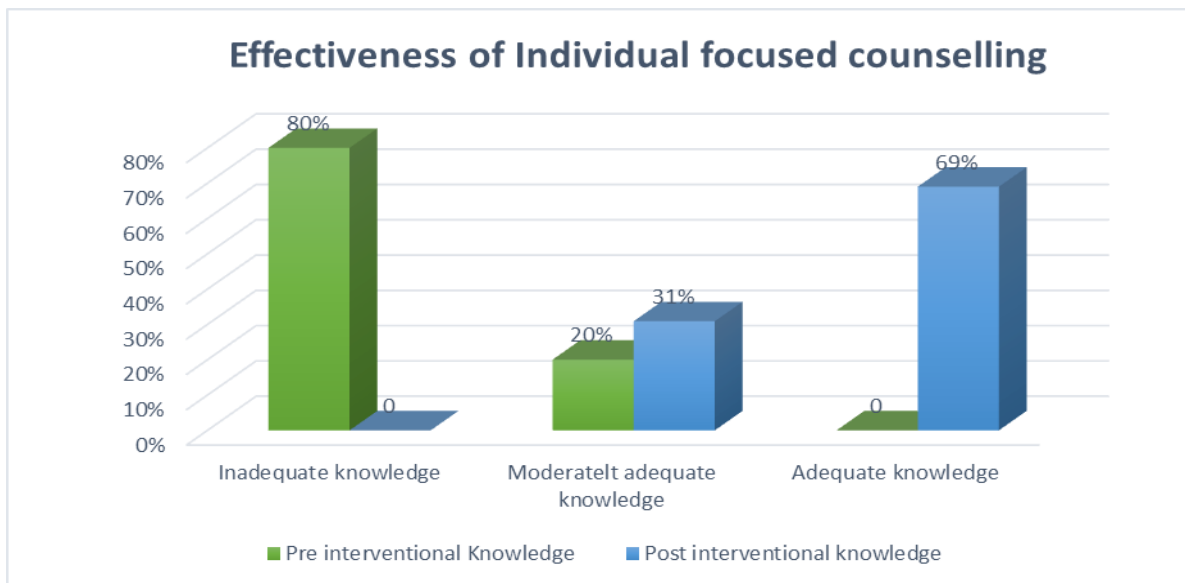


Fig. 1: represents the pre and post interventional level of knowledge level on Nipple trauma and its management.

Almost 61.8% of them did not have any complications during pregnancy, the leading reported condition was thyroid disorder complicating pregnancy. The most common medication taken by primi para lactating mothers were antihypertensive drugs (18.1%). Eighty per cent of mother had inadequate knowledge regarding nipple trauma and its management, 20% had moderately aware of it. After the counselling session 69% of mother gained adequate knowledge and 31% were in moderate category (Fig. 1). The demand/ need makes the mother to learn about it.

The study revealed that there is inadequate knowledge about nipple trauma and its management among primi para lactating mothers. Concentrating on individual focused problems and counselling them is necessary to enhance the exclusive breast-feeding rate. Understanding the relationship between the age, complications raised during pregnancy and medication consumed by the mother had the greater impact on breast feeding practices (Joshi *et al.*, 2014; Mahmood *et al.*, 2012). So individual guidance and counselling by the midwife/ nurse is essential to promote exclusive breast feeding.

First time mothers were facing difficulties while breast feeding the baby though they have adequate knowledge about breast feeding. So, hands on training session for positioning and latching shall be initiated during the late antenatal period. These mothers need individual focus on their specific issues and entrusting about various breast-feeding technique and position during postnatal period. The constant support, guidance and encouragement by health care personals were the most reliable action to achieve the target, lets put our hands together to accomplish the WHO theme 2022 “Step up for Breast feeding: Educate and Support”.

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