

WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 7.523

Volume 6, Issue 8, 2048-2053.

Research Article

ISSN 2277-7105

A STUDY TO ASSESS THE EFFECTIVENESS OF PLANNED TEACHING PROGRAMME ON KNOWLEDGE OF POLYCYSTIC OVARIAN SYNDROME(PCOS) AMONG THE ADOLESCENTS GIRLS IN SELECTED JUNIOR COLLEGES OF SANGLI, MIRAJ, AND KUPWAD CORPORATION AREA

Sheela Ghorpade S. Y. M. Sc (n) and Archana R. Dhanawade*

Clinical Instructor, Bharati Vidyapeeth Deemed University, College of Nursing, Sangli, Maharashtra, India.

Article Received on 16 June 2017, Revised on 06 July 2017, Accepted on 27 July 2017 DOI: 10.20959/wjpr20178-9173

*Corresponding Author Archana R. Dhanawade

Clinical Instructor, Bharati Vidyapeeth Deemed University, College of Nursing, Sangli, Maharashtra, India.

ABSTRACT

Adolescents have significant energy and drive with innovative ideas. The future productivity of any nations is fully dependent on the adolescents. Hence, it is essential that healthy development of adolescents need to be carried out in positive manner. Polycystic ovarian syndrome – A Metabolic malady, the mother of all lifestyle disorders. This affects 1 in 15 women worldwide, is a major economic health burden that is likely to expand together with obesity. Shows sign and symptoms like excessive facial or body hair, infrequent periods and infertility after marriage. Early recognition and prompt treatment of pcos in adolescents is important to prevent long term sequel. More research is necessary in order to find answer too many clinical and the

theoretical aspects of the syndrome.^[10] **Methodology:** one group pretest posttest research design was used for the study. **Results**: It was found that there is no significant association between the type of family, religion, diet pattern, monthly income, and information source about pcos. It was found that planned teaching programme related to PCOS is effective to increase the knowledge of adolescent girls. **Conclusion:** The findings indicated that favorable attitude can be seen in the adolescent girls to avoid & prompt treatment of PCOS.

KEYWORDS: adolescent girls planned teaching programme & polycystic ovarian syndrome.

INTRODUCTION

PCOS is reported to be growing problem with Adolescent girls. It can be very difficult to diagnose pcos in teenage as they often experience irregular or absent menses and acne. The underlying cause of pcos may or may not be detectable in Adolescent during the onset of pcos symptoms.

Originally reported by stein and leventhal in 1935, it is estimated that between five and ten percent of women suffer from PCOS. While the name of the syndrome is indicative of the presence of ovarian cysts, not all women with PCOS exhibit this particular symptom. In fact, women with PCOS may have two or more of a constellation of symptoms which include amenorrhea (absence of menstruation cycle), hirstiusm (abnormal hair growth on places such as the face. neck, chest and abdomen,), acne, weight gaine.., etc.

The world health organization criteria for classification of an ovulation include the determination of oligomenorrhea (menstrual cycle.>35 days) or amenorrhea (menstrual cycle>6 month) in combination with concentration of prolactin, follicle stimulating hormone (FSH) and Estradiol. Almost 80% of an ovulation patient have normal serum FSH and Estradiol level and demonstrate very heterogeneous symptoms ranging from an ovulation, obesity, biochemical or clinical hyperandrogism and insulin and insulin resistance.

The prevalence of PCOS in India subcontinent Asian women was 52%.polycystic morphology seen in ultrasound is approximately 22% of women. Hirstiusm is a common problem in India as elsewhere in the world. Idiopathic hirstiusm 38.7%, pcos37.3%. India nearly 40% of women are affected by pcos. But among them only 60%come to hospital for treatment, when they recognize that they have infertility.

Objectives of the study

- 1. To assess the existing knowledge of adolescent girls regarding polycystic ovarian syndrome.
- 2. To evaluate the effectiveness of planned teaching programme on knowledge of polycystic ovarian syndrome.
- 3. To find out the association between the pretest knowledge score of adolescent girls with selected demographic variables.

MATERIALS AND METHODS

Research Approach: The research method adopted for the study was quantitative approach.

Research Design: In the present study, a one group pretest-posttest design was adopted.

Setting of the study: The present study was conducted in selected colleges of Sangli Miraj Kupwad corporation area.

Population: The population consists of adolescent girls

Sample: The sample selected for the present study comprised of adolescent girls attending junior college.

ANALYSIS OF DATA & RESULTS

Section I

Table 1: Frequency and percentage distribution of Demografic variables n=170.

Sr. No.	Demographic chatacteristics		Sample charecteristics	Frequency	Percentage
1.	Type of family	a.	Joint family	104	61.2%
		b.	Nuclear family	66	38.8%
2.	Religion	a.	Hindu	140	82.4%
		b.	Muslim	17	10%
		c.	Christian	3	1.8%
		d.	Other	10	5.9%
3.	Diet Pattern	a.	Veg diet	117	68.8%
		b.	Mixed diet	53	31.2%
4.	Family Monthly income in Rupees	a.	<10,000	57	33.5%
		b.	10,000 - 20,000	85	50%
		c.	>20,000	28	16.5%
5.	Information about pcos.	a.	Yes	6	3.5%
		b.	No.	164	96.5%

Table no. It shows that maximum adolescent girls (61.2%) from joint family, belongs to (82.4%) Hindu religion,(68.8%)vegetarians. Their family income (50%) in between Rs.10,000 to 20,000. they are not having(96.5%)information about pcos.

SECTION-II

Table 2: Frequency and percentage distribution of Pre-test knowledge score n=170.

Pre knowledge	Frequency	Percentage (%)
poor (<10)	110	64.70%
Average (11-14)	35	20.58%
good(>14)	25	14.72%
Total	170	100%

Table no. 2 Shows that pretest knowledge score about polycystic ovarian syndrome that is, The 64.70% adolescent girls having poor knowledge,(20.58%) average knowledge & only (14.72%)adolescent girls having good knowledge about polycystic ovarian syndrome.

SECTION III

Table 3: Comparison Between Pre-Test And Post-Test Knowledge Score n=170.

Test	Mean	Std Deviation	`t' value	'p' value
Pre-Test	11.15	2.09	-32.549	0.00
Post-test	14.18	1.75		

Table no.3, shows that mean value of pretest knowledge score is less than the posttest knowledge score. calculated 't' value is -32.549 which is more than tabulated 'p' value is 0.00, which is less than 'p' value(0.05). this suggest that there is statistically significant increase in post test score so planned teaching program me on polycystic ovarian syndrome is effective.

SECTION-IV

Table 4: Association between Pretest knowledge score with Demographic variables n-170.

Sr. No.	Demographic variable	Test Used	t value	ʻp' value	Remark
1	Type of Family	Pearson Chi-Square	0.000	0.989	No significant.
2	Religion	Fisher's Exact Test	0.541	0.956	No significant.
3	Diet Pattern	Pearson Chi-Square	1.003	0.317	No significant
4	Monthly Income	Pearson Chi-Square	1.385	0.5	No significant.
5	Information about PCOS	Fisher's Exact Test	0.594		No significant.

Table no. 4 shows that, There is no significant association of knowledge related to PCOS with type of family, religion, diet pattern, monthly income, and information source about pcos.

SUMMARY

The purpose of the study was to assess the knowledge of adolescent girls regarding polycystic ovarian syndrome in junior colleges of Sangli, Miraj, Kupwad corporation area.

2051

The study was taken based on the facts that the incidence rate of PCOS is increasing every year.

General awareness about polycystic ovarian syndrome and its complications will bring happiness among adolescent girls and their families.

REFERENCES

- 1. Robert Hurd. Polycystic Ovary Disease. Medline Plus Medical National Library of Medicine, 2006; 1-4.
- 2. Pcos In Adolescents. Zargar Ah, Wani Ai, Marsoodi Sr, Laway Ba, Bashir Mi, Salahuddin, 2008; 2-4.
- 3. Barnad L. Ferriday D. Guenther N, Straus B, Balen Ah, Dye L. Quality Of Life And Psychological Well Being Plastic Over Syndrome. Hum Report 2007.
- 4. Maria E Trent, Michael Rich, Bryn Austin S, Catherin M. Goron. Quality of Life In Adolescent Girls With Polycystic Ovary Syndrome [Online], Jun 2002.
- Dr. Beena Joshi, Dr. Srabani Mukharji Prevalence Of Pcos Among Adolescent Girls In Urban Area, In National Institutes Of Research In Reproductive Health, Indian Council Medical Research Mumbai.
- 6. Malcolm Symonds, Symonds Iann. Essential Obstetrics And Gynecology. 4th Ed. Churchill Livingstone, 2004; 248-9.
- 7. British Journal of Obstetrics & Gynecology, 2000; 7-10.
- 8. Eman M. Sayed, Mohamed E. Salem And Mohamed Samir Eid Sweed Effect Of Lifestyle Modifications On Polycystic Ovarian Syndrome Symtoms. Http://Www.Jofamericanscience.Org.
- 9. Barnad L. Ferriday D. Guenther N, Straus B, Balen Ah, Dye L. Quality Of Life And Psychological Well Being Plastic Over Syndrome. Hum Report, 2007.
- 10. Kovacs C, Smith. J.A. Guide To Polycystic Ovarian. It Effect On Health Tfm Publisher, 2002.
- 11. Mrs. Shashikala Vathi. Gautama College Of Nursing Manjunath Nagar West Of Chord Road, Rajaji Nagar Bangalore, 10.
- 12. Norman Rj, Dewily D, Largo Rs, Hickey Te. Polycystic Ovary Syndrome. Lancet, 25 Aug 2007; 370(9588): 685-97.
- 13. Hart R. Hicky M, Franks S, Definitions, Prevalence And Symptoms of polycystic ovaries and polycystic ovary syndrome [online]. [cited on 2007junel 1], 5 oct2004; 2-4.

14. Jones gl, hall im, balen ah, ledger wl. health related quality of life measurement in women with poly cystic ovary syndrome; a systematic review. [online]2007sep28[cited, june, 2007; 11: 4-5.