



NON-PHARMACOLOGIC MANAGEMENT OF LABOUR PAINS AMONG WOMEN IN MONIYA GENERAL HOSPITAL, IBADAN, OYO STATE (A PILOT STUDY)

Abiodun A. Ogunniran¹, O. Abimbola Oluwatosin (Ph.D)¹ and Fatima R. Rahji³

¹College of Nursing and Midwifery, Eleyele, Ibadan, Nigeria. Tel: 08034879067

²Department of Nursing, Faculty of Clinical Sciences, College of Medicine, University of Ibadan, Nigeria.

³College of Nursing and Midwifery, Eleyele, Ibadan, Nigeria.

ABSTRACT: *Women experience pain during childbirth in varying degrees of intensity. Hence most women require some type of pain relief. Pain management is the alleviation of pain or a reduction in pain to a level that is acceptable to the client. Therefore, this study evaluates Non-Pharmacologic Management of Labour pains among women in Moniya General Hospital, Ibadan, Oyo State. A descriptive cross-sectional study was used. A total of 50 pregnant women were selected using purposive sampling. The participants were women in labour attending Moniya general hospital, Ibadan who consented to participate in the study. A structured questionnaire was used to collect data. The data was analysed using descriptive statistics Findings showed that 17 (34%) of the pregnant women said pain could not be relieved without drugs in labour, while 33 (66%) said pain could be relieved without using drugs. 37(74%) knew of various pain relief measures that can be used. 46 (92%) of the women would like to used non-pharmacologic measures of pain relief in labour because it has no adverse effect on the mother and child. The study has that, some of the women in labour are aware of non-pharmacologic measures of pain relief in labor while some are not as they still believe pain cannot be relieved without using drugs. Considering the no risk and no cost in the use of non-pharmacologic measure of pain relief in labour. Midwives should create more awareness about the various non-pharmacologic measures that can be used in labour so that the women are adequately prepared for its use when they are experiencing pain in labour. Further research will also be needed in the future to evaluate the effect of non-pharmacologic intervention in labour pain management pre and post intervention.*

KEYWORDS: Non- Pharmacologic, Management, Labour Pain, Women, Childbirth

INTRODUCTION

Childbearing is a well celebrated event among women, yet this is not without pain and sometimes, other complications emerge. Women experience pain during childbirth in varying degrees of intensity. According to Charlton 2005 cited in Daniel, et al (2015), the process of labour and delivery of a child can be very painful, over 90% of women experience severe/unbearable pain. In the United Kingdom 19% of mothers get epidural analgesia during labour, 61% in the United States and 75% in France (Amanda 2016). Effective pain management is an important aspect of nursing care to promote healing, prevent complications, and reduce suffering. Studies have shown that both non-pharmacological and pharmacological approaches are used for pain management (Jones, et al cited in Levette, Smith, Bensoussan and Dahlen, 2016) Non-pharmacological or natural therapies are methods that help decrease pain. These



therapies do not involve taking medicines. People have used "natural" ways to relieve pain and promote healing from the very beginning of time.

According to Lally, Thomson, Macphail and Exley (2014), non-pharmacologic interventions include cognitive behavioral therapy, relaxation therapy, biofeedback, patient education, self-management, and social support interventions. These types of interventions aim to change behavior, cognitions, and emotions by targeting the psychosocial processes that are implicated in the perceptions and response to pain (Simkin and Bolding, 2014). There is good evidence that these interventions can be effective in managing pain, particularly in relation to the cognitions surrounding pain. (Leifer, 2014).

Non-pharmacologic techniques in labour has been identified to be non- intrusive, non-invasive, low-cost, simple, effective, without adverse reactions and shown to promote higher satisfaction with labour experience (Ali et al 2013). Smith, Levette, Collins, Jones (2012) cited in Miquelutti, Cecatti and Kinesio (2017) opined that massage relax tense muscles, assist in relaxation, inhibits sensory transmission, distract from pain and reduce anxiety. Hence the researcher intends to evaluate the Non-Pharmacologic Management of Labour pains among women.

The aim of this study was to evaluate the Non-Pharmacologic Management of Labour pains among women in Moniya General Hospital, Ibadan, Oyo State.

Objectives of the Study

The general objective of this study is to generate baseline information evaluate the Non-Pharmacologic Management of Labour pains among women in Moniya General Hospital, Ibadan, Oyo State Nigeria.

The specific objectives are to:

1. Assess perception of women on effect of non- pharmacological intervention on intrapartum pain experience
2. Evaluate Knowledge of non- pharmacological intervention on intrapartum pain experience among women.
3. Identify factors that affects choice of non- pharmacological intervention on intrapartum pain experience among women.
4. Determine level of utilization of non- pharmacological intervention on intrapartum pain experience among women.

MATERIALS AND METHODS

The study was a descriptive cross-sectional study designed to evaluate perception of parturient women on non-pharmacological intervention on intrapartum pain experience in General Hospital Moniya, Ibadan.

General Hospital Moniya, Ibadan, is located within Akinyele Local Government Area LGA, Oyo State, Nigeria. It is a state-owned tertiary health facility that receives referral form the Primary health centers and traditional birth attendants in the area. The population sampled for



the study were 50 women out of the 150 parturient that delivered within the period of six weeks in the facility

Selection was made using purposive sampling technique to select 50 parturient for the study. The participants were given the right to decide to withdraw or refuse to provide any information in the study.

A structured questionnaire was used to collect data. The questionnaire was self-administered, it had four (4) sections, which included the demographics of pregnant women, women's Knowledge of non-pharmacological measures, Childbirth Experience and Satisfaction of the parturient and factors that influence acceptance of non- pharmacologic therapy use as pain relief measures in labour. Translated versions of the questionnaire were available for participants who understood the native language. Each question answered correctly was awarded a score of 1, while wrongly answered question was awarded 0

The content validity of the research instrument was examined by experts in maternal and child health, while the Cronbach's alpha (α) result for reliability was found to be 0.75. Approval for the study was obtained from Oyo State Ministry of Health ethical review committee. Data collection took a period of 6 weeks and the data was managed using the SPSS version 25. 0. Descriptive statistics was employed in data analysis.

RESULT / FINDINGS

Table 1: Demographic Characteristic of Respondents

Variables	Frequency	Percentage
Age Group		
23- 34	34	68
35-51	16	32
Total	50	100
Highest Education		
Completed		
Primary	4	8
Secondary	12	24
Tertiary	34	68
Total	50	100
Occupation		
Unemployed	6	12
Artisan	8	16
Trading	14	28
Civil servant	22	44
Total	50	100
Religion		
Islam	21	42
Christianity	29	58
Total	50	100



Marital status		
Married	49	98
Cohabiting	1	2
Total	50	100
Number of children		
Primipara	22	44
Multipara	28	56
Total	50	100
Type of family		
Monogamy	38	76
Polygamy	12	24
Total	50	100

Table 1 shows the socio-economic variables of participants. Results from the study show that the greatest proportion of the participants, 34 (68%) were aged between 23-34 years, 34 (68%) had completed tertiary education, with 32 (64%) of them spouses having also completed tertiary education. More so, 22 (44%) of them were civil servants, while 29 (58%) of them were Christians, et al (2010) greater percentage of the women, 28 (56%), were multiparous and had monogamous families, 36 (76%).

Table 2: Obstetrics Characteristics of Respondents

Variables	Frequency	Percentage
Age of Pregnancy		
First Trimester	3	6
Second Trimester	10	20
Third Trimester	37	74
Total	50	100
Type of previous Delivery		
SVD	39	78
CS	11	22
Total	50	100
Place of previous Delivery		
Home	9	18
Traditional birth attendants	3	6
Primary Health Centre	3	6
Secondary health care/ Mission	26	52
Tertiary	9	18
Total	50	100
Presentation of fetus		
Cephalic	49	98
Breech	1	2
Total	50	100

Table 2 shows the Obstetric characteristics of the participants Table. Results from the study indicate that most of the women, 37 (74%) of them were in their third trimesters, 39 (78%) had



spontaneous vaginal delivery and 26(52%) of them had their deliveries in secondary health care centers/mission houses 49 (98%) of the foetus are presenting cephalic.

Table 3: Knowledge of labour pain and control measures by participants

Knowledge of labour pain and control measures	Frequency	Percent
Pain could be relieved without drugs		
No	17	34
Yes	33	66
Do you know of any pain control measure?		
No	13	26
Yes	37	74
If yes, what are the measures?		
Sleeping on the affected side	10	20
Massage	18	36
Breathing in and out	9	18
Use of drugs	9	18
Massage, breathing in and out, Use of drugs	4	8

Table 3 shows participants' knowledge of labour pain and control measures. Results from the study indicate that a considerable number of the participants, 17 (34%) did not believe pain could be reduced without the use of drugs, 13 (26%) did not know any pain control measure, 4 (8%) identified breathing in and out and massage as methods of pain relief in labour 30 (60%) identified antenatal clinic staff as their source of information.

Table 4: Non-pharmacological method of pain control utilized by participants

Utilization of non- pharmacological method of pain control	No		Yes	
	Freq.	%	Freq.	%
Massage	10	20	40	80
Deep breathing	6	12	44	88
Transcutaneous Electrical Nerve Stimulation	25	50	25	50
Use of water birth/birth pool for labour and delivery	19	38	31	62
Acupuncture	25	50	25	50
Spiritual experience	6	12	44	88
Homeopathy	25	50	25	50
Aromatherapy	30	60	20	40
Yoga and meditation	25	50	25	50
Hypnosis	24	48	26	52
Relaxation Technique	12	24	38	76
Music	16	32	34	68

Table 4 shows the Non-pharmacologic method of pain control utilized by participants. Results from the study indicate that the most frequently used methods were spiritual experience and deep breathing exercises, 88% respectively. Other methods commonly utilized include massage, 80%, relaxation technique, 76% and music, 68%.

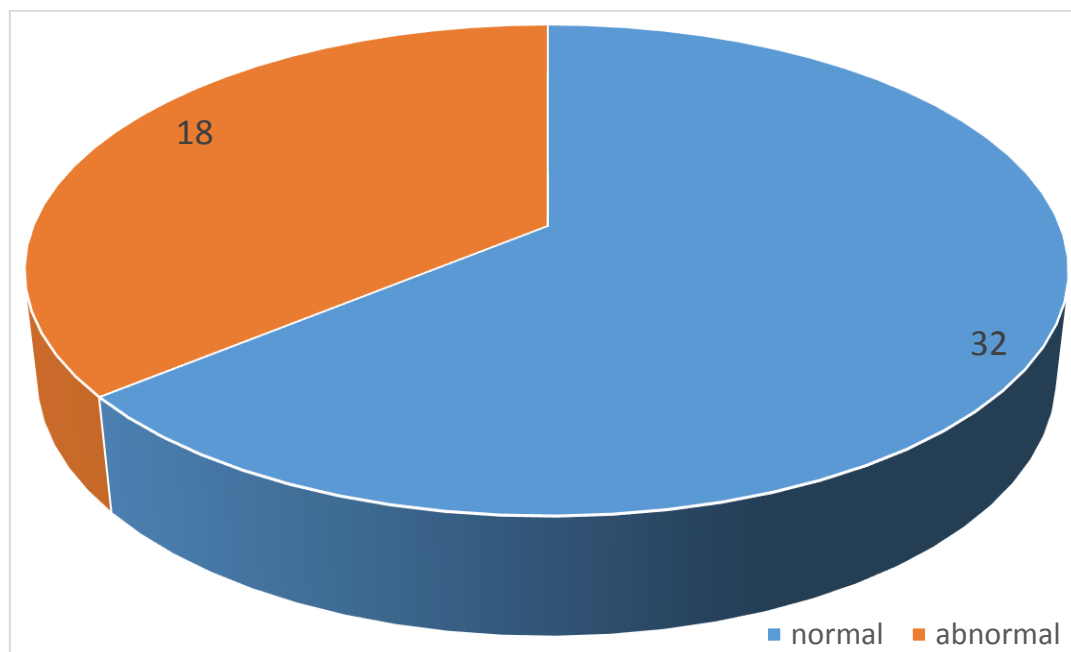


Fig. 1: Blood Pressure

Figure 1 the figure depicts the blood pressure of the participants 32 (64%) had their blood pressure within normal range, while 18 (36%) had an abnormal blood pressure.

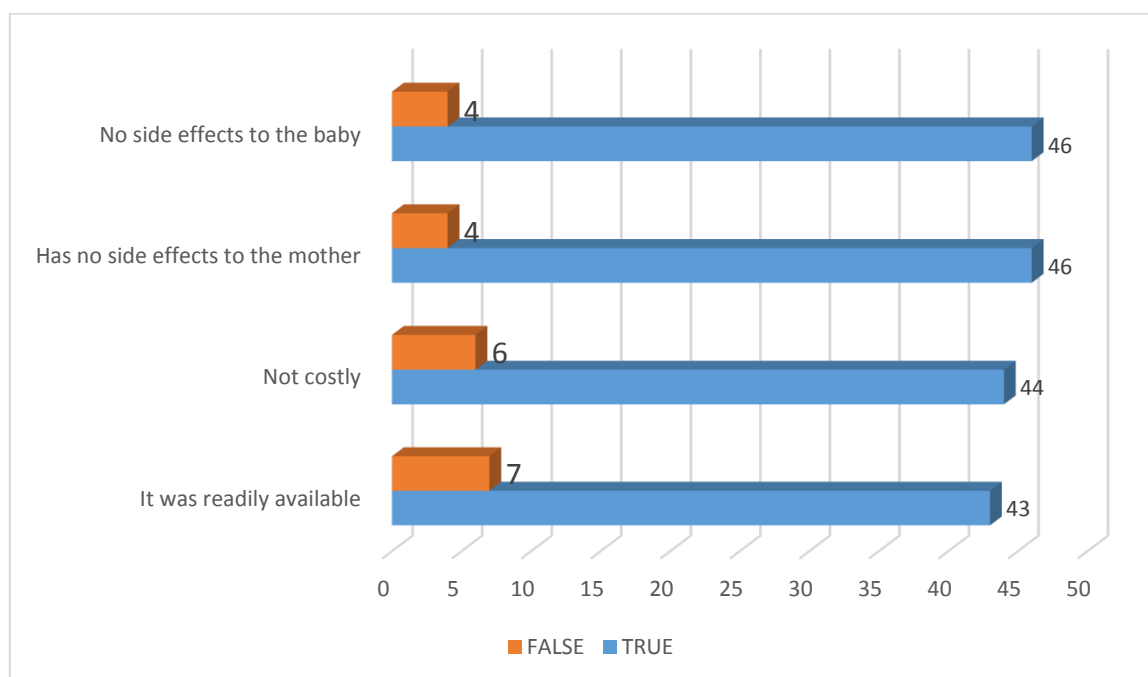


Figure 2: Reasons for Choice of Non-Pharmacological Method of Pain Control



Figure 2 gives information on participants' reasons for choice of non-pharmacologic method and the most reason given was because it had no side effects on the baby and mother, 92% respectively.

DISCUSSION

Result from the study show that the greatest proportion of the participants, 68% were aged between 23-34 years, 68% had completed tertiary education, with 64% of them spouses having also completed tertiary education. More so, 44% of them were civil servants, while 58% of them were Christians which affirmed by similar study conducted in Ethiopia by Zewdie, Azale et al (2018) which stated that the mean age of participants was 27 (\pm SD). Nearly two-thirds 34 (68%), of respondents were in the age range of 25-34 years. The majority, 46 (92%), completed secondary and above classes. About 49 (98%) of the women were married.

Findings from the study shows participants knowledge of labour pain and control measures. Results from the study indicate that a considerable number of participants, 34% did not believe pain could be reduced without the use of drugs, and 26% did not know any pain control measure which accepts the study of Anarado et al, (2015) that said that majority (68.6%) of the women knew, but 31.4% were unaware that non-pharmacological labour pain reliefs exist in the study facility. Thomson, et al (2019) opined that non-pharmacological methods of pain relief in labour facilitates bonding with professions and birth supporters. Arinze et al (2018), also discovered that women wanted pain relief in labour but they had limited knowledge of the possible methods of pain relief in labour.

Results from the study indicate that most frequently used methods were spiritual experience and deep breathing exercises, 88% respectively. Other methods commonly utilized include massage, 80%, relaxation technique, 76% and music, 68%. Which is similar to the study of Anarado et al, (2015) which said that breathing exercise was the most widely known by these respondents (88%), followed by massage (80%), relaxation techniques (76%) and music (68%). Burch and Martin (2016), reported that women experienced less intense pain with massage compared with usual care at the first stage of labour.

Boateng, Kumi and Diji (2019) stressed that non-pharmacological interventions hold promise in reducing labour pains with minimal with no harm to the mother, foetus and the progress of labour are simple and cost effective. Ampofo and Caine (2015) also reported that, non-pharmacological approach to pain management addresses physical sensation of pain and also prevent suffering by enhancing the psycho-emotional and spiritual component of care.

Implication to Research and Practice

Non- pharmacological methods of pain relief can be used during labour but the sensitization for use in labour must commence during the antenatal period, midwives ensuring that enough information is given about the different methods available for use in labour so that informed choice for use is done during labour. Continuous supportive care is given with the cooperation of the parturient to ensure she copes with the labour pain and making the birth experience satisfactory. Pain relief strategies that are safe, effective and enhances patient satisfaction during birth experience should be explored during intrapartum care.



CONCLUSION

The process of labour and delivery of a child can be very painful, over 90% of women experience severe/ unbearable pain. Hence the need for adequate management of pain in labour, there are two main methods of pain management in labour; pharmacologic and non-pharmacologic methods the initial method is associated with side effects to the mother and child. The attached cost may make it inaccessible for parturient in labour hence the need to embrace the non-pharmacologic method which is of no risk and cost to the parturient. The various non-pharmacologic measures that can be used in labour should be introduced to the women during antenatal period, midwives should encourage the use of these measures during labour to enhance parturient satisfaction with the birth experience.

Future Research

Further Research work can be done among women in labour to assess the effect of the various non-pharmacologic therapy on labour pain pre and post intervention. Studies can also be done among women in labour to compare the effect of the various non-pharmacologic measures in labour pain management

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