Knowledge of mothers regarding management of hand mouth disease

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Abstract
Background: Hand and mouth disease is very contagious and is common in children under 10 years of age. However, adolescents and adults can also be affected. Most adults are immune to the coxsachie A and B virus, as they have been previously exposed to it during their childhood. Adults who develop the disease usually experience milder symptoms than children.

Objectives: 1. to assess the level of knowledge of mothers regarding management of hand mouth disease. 2. To find the association between the level of knowledge of mothers regarding management of hand mouth disease with socio demographic variables.

Materials and Methods: The Non-experimental descriptive design with non-probability Convenience sampling technique was adopted to select 30 mothers in Narayana medical college hospital.

Results: The result shows that with regard to level of knowledge regarding management of hand mouth disease, 29(96.7%) mothers have inadequate knowledge and 1(3.3%) mothers have moderately adequate knowledge.

Keywords: Knowledge, mothers, hand mouth diseases, management

Introduction
Hand and mouth disease is a common, mild illness caused by a type of virus called as entero virus. It is usually caused by Coxsachie virus but in some cases can be caused by the coxsachie B or the entero virus 71. Hand and mouth disease gets its name from the non-itchy rash that develops on the palms of hands. It can also cause ulcers in mouth and make one feel generally unwell, although some people have no symptoms. It is usually associated with low grade fever, anorexia, malaise, abdominal pain, sore mouth and cough. Medications are usually no need as hand mouth disease is a viral disease that typicall resolves on its own. Currently, there is no specific curative treatment for HMD. Disease management typically focuses on achieving symptomatic relief. Pain from the sores may be eased with the use of analgesic medications. Fever reduces and lukewarm baths can help decrease body temperature. A minority of individuals with HMD may require hospital admission due to uncommon neurological complications such as encephalitis, meningitis or due to non-neuralgic complications such as Myocarditis, pulmonary edema or pulmonary hemorrhage. Medicated mouth washes are also given by the doctor for all alleviating difficulty in swallowing food.

Need for the study
Dr. Sunil Kumar BM, (2013) conducted a study on epidemiology and clinical profile of hand mouth disease outbreak in Bangalore. The aim of the study is to describe the epidemiology and clinical profile of cases of hand mouth disease in an outbreak. Patients attending to M.S. Ramaiah Medical College Hospital with features suggestive of hand mouth disease around 71 patients were included in the study. The patient’s demographic data, clinical features and examination findings were entered into a predesigned format. The epidemiology and clinical features were analyzed using appropriate statistical methods. A total of 71 children were diagnosed as hand mouth disease, 47(66.2%) were boys and 24(33.8%) were girls, fever was seen in 62(87.3%) of the affected children, anorexia and sore throat was seen in 47(66.2%) and 35(49.3%) children respectively.
The study concluded that hand and mouth disease affected mainly children in the age group of 1-10 years, affected more boys than girls, complete recovery without any major complications was seen in the present outbreak. The characteristic clinical features will be helpful in early diagnosis of hand mouth disease and will help in looking for any complications occurring in hand mouth disease.

**Statement of the Problem**

“*A Study to Assess the Knowledge of Mothers Regarding Management of Hand Mouth Disease at Narayana Medical College Hospital, Nellore*”

**Objectives**

- To assess the level of knowledge of mothers regarding management of hand mouth disease.
- To find the association between the level of knowledge of mothers regarding management of hand mouth disease with their selected socio-demographic variables.

**Delimitations:** The study is delimited to

- The mothers of under five children only.
- Those mothers available at the time of data collection.
- The sample size of 30 mothers only.

**Methodology**

**Research Approach:** A quantitative research approach.

**Research Design:** Non-experimental descriptive research design.

**Setting of the Study:** The study was conducted in Narayana Medical College Hospital at Nellore.

**Sampling Technique:** Non probability convenience sampling technique was adopted for the study.

**Sample Size:** The sample size selected for the study was 30 mothers.

**Criteria for Sample Selection**

**Inclusion Criteria:** The inclusive criteria for mothers in the present study were the following:

1. The mothers who are willing to participate in the study.
2. The mothers who are available during the period of data collection.
3. The mother who can read and write Telugu/English.

**Exclusion Criteria**

1. The mothers who are not willing to participate in the study.
2. The mothers who are not available at the time of data collection.

**Description of Tool**

With the help of extensive review from various text books, journals, net sources and guidance by the teachers, the tool was developed to assess the knowledge regarding management of hand-mouth disease among mothers in Narayana Medical Hospital, Nellore.

**The tool is divided into two parts:**

**Part I:** Deals with demographic data namely age, education, occupation, religion, type of family, area of living, number of children, family history source of information, family income.

**Part II:** Deals with questionnaires to assess the knowledge regarding management of hand mouth disease among mothers.

**Score Interpretation**

The score was given as zero and one to each wrong and right answer respectively.

<table>
<thead>
<tr>
<th>Level of knowledge</th>
<th>Score</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inadequate</td>
<td>&lt;16</td>
<td>&lt;50</td>
</tr>
<tr>
<td>Moderately adequate</td>
<td>16-21</td>
<td>50-70</td>
</tr>
<tr>
<td>Adequate</td>
<td>&gt;21</td>
<td>&gt;75</td>
</tr>
</tbody>
</table>

**Result and Discussion**

**Table 1:** Frequency and percentage distribution of level of knowledge regarding management of hand mouth disease among mothers. (n=30)

<table>
<thead>
<tr>
<th>Level of knowledge</th>
<th>Frequency (f)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Inadequate</td>
<td>29</td>
<td>96.7</td>
</tr>
<tr>
<td>b) Moderately adequate</td>
<td>1</td>
<td>3.3</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>

Table No-1: Shows that with regard to level of knowledge regarding management of hand mouth disease 29(96.7%) mothers had inadequate knowledge and 1(3.3%) mothers had moderately adequate knowledge.

**Table 2:** Mean and Standard Deviation of Level of Knowledge Regarding Management of Hand Moth Disease among Mothers.

<table>
<thead>
<tr>
<th>Mean</th>
<th>Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.2</td>
<td>3.19</td>
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</tbody>
</table>

Table No-2: Shows that the mean knowledge score of mothers of is 11.4 with standard deviation is 3.19.

**Major Findings of the Study**

- Majority of respondents, 15(50%) are between the age group of 21-30 yrs.
- Majority of respondents, 10(33.3%) have completed primary and secondary education.
- Majority of respondents, 12(40%) are housewives.
- Majority of respondents, 11(40%) are Hindus.
- Majority of respondents, 20(66.7%) live in nuclear family.
- Majority of respondents, 15(50%) live in urban area.
- Majority of respondents, 16(53.3%) have two children.
- All of the respondents, 30(100%) do not have any history of hand mouth disease.
- Majority of respondents, 13(43.3%) received information from elders.
- Majority of respondents, 9(30%) earn <5000 rupees per month.
- Majority of respondents, 29(96.7) have inadequate knowledge regarding management of hand mouth disease.
- There is no significant association with the level of knowledge of mothers regarding management of hand mouth disease with regard to age, education, occupation, religion, types of family, area of living, number of children, source of information and family income.
Recommendations for the Research

- The similar study can be conducted to a large number of samples in different settings.
- A comparative study can be done between rural and urban mothers regarding level of knowledge of hand mouth disease.
- Education programmes can be designed to create awareness among mothers of under five children regarding hand mouth disease.
- The study can be conducted among the sample having hand mouth disease in multiple settings as hospital, rural community and urban community culture.

Conclusion

In the present study the following conclusion were drawn from findings of study.

Majority of the mothers of under five children have inadequate knowledge regarding management of hand mouth disease at Narayana Medical College Hospital, Nellore. Educational programme to be organized on management of hand mouth disease to improve the knowledge of mothers of under five children to reduce the prevalence of hand mouth disease.

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