Caracterização das puérperas assistidas pela Fonoaudiologia de uma maternidade escola ****

Characterization of parturients assisted by the Speech Therapy Care Service of a school maternity

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Abstract

Background: parturients assisted by a speech therapy care service. Aim: to characterize the parturient population assisted by the Speech Therapy Care Service, who were participating of the second phase of the Kangaroo Mother Method, in a school maternity, reference for high risk cases, in 2006. Method: retrospective analytical descriptive study by means of the analysis of 204 medical registers. Descriptive statistical techniques were used as well as the Mann-Whitney test for the comparison of variables without normal distribution. The adopted significance level was of 5%. Results: the mean age of the mothers was of 24.61 years (SD = 7.36), being 125 (61.27%) from the countryside and 201 (50%) single. Most of the assisted population had been to school for 4 to 5 years (35.29%), most were housewives (76.47%) and had no previous experience concerning breastfeeding (53.43%). The prevalent birth method was Caesarean section (n=98; 48.03%) and 89 (43.62%) reported 1 to 3 sessions of pre-natal care counseling. Conclusion: the population assisted by the Speech Therapy Care Service was characterized mainly as single precipitous from the countryside, who had low income and no remunerated job, however they presented high schooling in terms of study years. Also a low number of pre-natal counseling sessions was observed, as well as caesarean section, low pregnancy age and extended hospital stay time.

Key Words: Epidemiology; Breast Feeding; Speech, Language and Hearing Sciences; Infant Nutrition; Child Health Services.

Resumo

Tema: puérperas atendidas por serviço de Fonoaudiologia. Objetivo: caracterizar a população de puérperas assistidas pelo Serviço de Fonoaudiologia, participantes da segunda etapa do Método Mãe-Canguru, em uma Maternidade Escola referência em alto risco, no ano de 2006. Método: estudo descritivo analítico retrospectivo desenvolvido através da análise de 204 prontuários. Foram utilizadas técnicas de estatística descritiva, testes de Mann-Withney para comparação das variáveis sem distribuição normal, considerando significativos valores de p < 0,05. Resultados: a idade média das genitoras foi 24,61 anos (dp = 7,36), sendo 125 (61,27%) oriundas do interior do estado e 102 (50%) solteiras. A maioria da população atendida referiu 4 a 7 anos de estudo (35,29%), ocupação principal atividades domésticas (76,47%) e ausência de experiência prévia quanto ao aleitamento materno (53,43%). O tipo de parto predominante foi cesárea em 98 (48,03%) mulheres e 89 (43,62%) mencionaram a realização de um a três consultas no pré-natal. Conclusão: a população assistida pelo Serviço de Fonoaudiologia se caracterizou por predominantemente primíparas solteiras, do interior do estado, de baixa renda familiar, sem trabalho remunerado, porém elevada escolaridade, em anos de estudo. Também foram detectados baixo número de consultas pré-natais, tipo de parto cesárea, idade gestacional baixa e elevado tempo de internação hospitalar.

Palavras-Chave: Epidemiologia; Aleitamento Materno; Fonoaudiologia; Nutrição do Lactente; Serviços de Saúde da Criança.

Introduction

Epidemiology is the area of knowledge that allows to describe, explain and intervene in health problems. Epidemiological studies are important for making better decisions regarding the health of the population, as they allow a better understanding of the real needs of the comunity1-2. Thus, speech-language therapists, just like another health professional, should see epidemiology as their ally in order to better understand the population they serve.

Breastfeeding may be influenced by cultural aspects5 . Early weaning is a major public health problem worldwide related to several factors such as maternal age, primiparity, low formal education level, early use of infant formula and the use of baby's pacifiers, maternal employment, urbanization, smoking, lack of encouragement from family and society, besides deficiencies in health care and delivery conditions6 . Some studies, however, did not show a significant relationship between maternal formal education and early weaning7,8,9.

It is considered important to know the parturients' profile who are assisted by Speech-Language Therapy in order to obtain a better approach in the assessment, prevention and therapeutic interventions. Epidemiological studies are essential to support better health decision-making to the population. They allow a better understanding of the real needs of the community as well as the key factors of health problems. Furthermore, systematized data related to the characteristics of the

specific population assisted by Health services must be systematically evaluated in relation to the proportion of the actions for prevention, diagnosis and treatment.

Considering that the speech -language therapists, just like another health professionals, should see epidemiology as their ally in order to better understand the population they serve, in the present study we aimed at characterizing the population of parturients assisted by the the Speech Therapy Care Service, which was participating of the second phase of the Kangaroo Mother Method, in a school maternity which deals with high risk cases.

Initially, the following hypotheses were raised, taking into account the literature researched on the topic: the mothers assisted were mostly very young (less than 20 years of age), married, multiparous, low schooling, coming from the capital and performed at least three prenatal visits.

Methods

The protocol of the present research is based on relevant legislation, Resolution N° 196/96 of the National Health Council, Ministry of Health for studies in humans and was approved by the Ethics Committee of the Universidade Estadual de Ciências da Saúde de Alagoas - UNCISAL under Protocol N° 843/2007.

An analytical descriptive study of retrospective cohort was conducted in a school maternity in the city of Maceió, AL. This institution is a reference for providing care to pregnant women and infants at high risk, by analyzing medical records of parturients participating in the second step of the Mother Kangaroo Method , in 2006, guided by the Speech-Language Therapy Service. The protocol used for the collection was composed of the following data: age, origin, educational level, occupation, marital status, type of delivery, number of prenatal visits, gestational age, experience regarding breastfeeding and length of hospitalization (Annex I).

The total number of parturients guided by the service during this period amounted to 204 records. The sample size was not calculated since all records of parturients in the Kangaroo ward in the given period (2006) were used (provided by the Medical Records Service - SAME) . Kolmogorov-Smirnov and Shapiro-Wilk adhesion tests were conducted for verifying sample normality.

Data were stored in a spreadsheet (Microsoft Excel ® 2003 Redmond, WA, USA). The results were tabulated and variables frequencies of each group were calculated and arranged in tables and figures.

To conduct the descriptive statistics and statistical tests, SPSS ® software (version 15.0 for Win, SPSS Inc) was used. The average, standard deviation and standard error were calculated for numerical variables. Correlations between variables were evaluated by the degree of linear relationship (Spearman test). Values were considered significant at p less than 0.05 (p <0.05).

Results

The average age of mothers was 24.61 years (sd = 7.36), and 26.60% (N = 54) aged or less than 18 years, 125 (61.27%) used to live in the rural area and 102 (50%) of single marital status.

Regarding schooling, 72 (35.29%) reported in years of study, the group 4-7 years; significantly lower in adolescents (p < 0.001). The main occupation was that activities household in 156

women (76.47%). Family income monthly general was low, with 72.06% of families earning less than two minimum wages.

As for the number of pre-natal, 89 (43.62%) performed one to three visits. The predominant mode of delivery was cesarean section in 1998 (48.03%), but the incidence was significantly higher (p = 0.009) in the group of postpartum women, according to Table 1.

The mean gestational age was 30 weeks and 109 (53.43%) had no experience in breastfeeding. Mean hospitalization was 39.8 days. In 2004, the 140 mothers who received discharged, 100 (71.43%) were breastfeeding exclusively. In 2005, the 143 who received high, 128 (89.51%) were exclusively breastfed and in 2006, from 210 hospital discharges, 194 (92.3%) mothers were exclusively breastfeeding their babies at the breast. After discharge, the infant remains being regularly monitored during the first year of life, from the outpatient discharge.

The entire staff is available to any needs presented by the newborn and your family.

TABLE 1. Distribution of parturients attended by the Speech-Language Service at the maternity, according to age, origin, family income, marital status and type of delivery (Maceió, AL, 2006).

Variables		N	% Parturients
Age	<18 years	54	26.60
	>18 years	150	73.40
Origin	Countryside	125	61.27
	Capital	79	38.73
Family Income	< 2 minimum wages	147	72.06
	> 2 minimum wages	57	27.94
Marital status	Single	102	50
	Married	31	15.19
	Consensual Union	52	25.49
	Separated/divorced	19	9.31
Delivery type	Cesarean section	98	48.03
	Natural	106	51.97

Discussion

The Brazilian literature is extensive to show the benefits of the Mother Kangaroo method in the development of premature infants of low weight 10,11,12,13 but little is discussed about the epidemiological profile of the women who participated in the method.

In this research, we only studied parturients who had participated in the second stage of the Kangaroo method that, at discharge, were exclusively breastfeeding, which may have been a consequence of the care provided during hospitalization, considering that the Kangaroo Mother Care prioritizes exclusive breastfeeding14.

Regarding the average age of parturients, it was observed that it is above those reported in previous studies conducted with parturients who also attended public hospitals11, 15. However, it is important to report that 26.6% of the parturients were aged 18 years or less and a study also conducted in that Maternity Hospital in the period from February to June 2006, that investigated the prevalence and causes of early weaning in infants participanting of the Kangaroo Mother Care, showed no significant relationship between maternal age and the occurrence of early weaning, nevertheless, a previous study16 showed that primiparous women aged below 20 years are 1.2 times more likely to leave exclusive breastfeeding before the child is four months old.

By comparing the results of the present study with other national studies15, 16, significant differences in the schooling variable were observed. The educational level of the studied population was higher than the studies previously cited, which can be considered positive because, according to other authors, the maternal education variable showed a relationship with early weaning, i.e., the longer the mother's school attendance the longer the duration of breastfeeding11,12. The high proportion of teenage illiterate mothers who had less than four years of schooling found in these studies is a serious problem because high-risk pregnancies have been identified as a factor which contributes to school drop-outs as well as difficulty studying.

Most of the parturients in the study were from the countryside, unlike those of other studies11, 12, which can be explained by the lack of maternity hospitals in the countryside of Alagoas able to take care of high risk parturients. The maternity hospital cited in this study is a reference in this type of care.

Adult and adolescent parturients in public maternity hospitals are theoretically cosidered at the same socioeconomic level11,12, which was also evidenced in this research, providing an unfavorable factor for adolescent once lower family income, low number of pre-natal care, low formal education level and primiparity are the factors that may expose the health of adolescents and their children to greater risk of disease and death12.

As in other researches11-12, we observed that most women do not present a paid job, being thus more financially dependent, either on family, or on their partners. Simultaneously, the tendency to establish unions with unemployed men, and often, teenagers, leave them in a more precarious socio-economic situation, which may expose them even more to other social risk situations16.

The fact that the majority of women presented single marital status is of concern, considering that the marital status can affect how pregnancy is perceived by family and the adolescent herself, and may even change relational patterns and interfere in behaviors during pregnancy and consequently affect the pregnancy outcome15. This finding indicates the importance of prenatal and perinatal care that includes not only the mother, but all the ones involved, such as the partner and their family members. Such measures could improve the closeness of bonds with the baby's father and generate a more effective social network to support the parturients, especially teenagers.

Although most parturients, regardless of age, have had access to antenatal care, it was found that the adhesion to the consultations was influenced by the presence of a consensual union, as mentioned by another study11.. Such is a relevant datum considering that the pre- natal is considered, by the literature, as one of the most important protective factors for adverse effects to the baby14,15.

Still concerning the frequency of prenatal care, when compared with results from other studies, it is verified that the percentage of pregnant women who benefit from the attention is usually greater than that found in our study12.

Regarding the type of delivery, caesarean section was predominant, different from that in another study12 in the same city, however, the incidence of caesarean section was significantly higher (p = 0.009) in the group of young adult mothers.

The higher percentage of primiparous, 53.43% in our study, was already expected and is consistent with other researches 15,16. In fact, Primiparity is related to a higher risk of complications for mother (pregnancy induced hypertension and anemia, for example) and for the newborn (preterm and low birth weight)16. Considering that the survey was conducted in a Maternity of reference at high risk, where the greatest demand is of premature, it was also expected a low average gestational age (30 weeks), and a high period of hospitalization (39.8 days).

There has been discussion on the consideration of psychosocial determinants and cultural practices health education. It is proposed that these be responsive to subjective and cultural users. The performance of speech in this area is an important task of triggering strategies that may benefit the quality of service and also to better quality care and given birth to life, beyond important work in conjunction with other team professionals, who are fundamental in

performance with the woman hospitalized.

Early weaning is a major problem public health worldwide, related to factors such as maternal age, primiparity, low education level, maternal employment, urbanization, lack of encouragement from family and society as well as deficiencies in health care and the conditions of confinement. Features sociocultural, demographic and epidemiological of mothers attended the service should be considered mainly in relation to language used in conversations and exchanges of

experience among the health staff and mothers.

Systematized information about the history and characteristics of patients were used to ensure that actions and, in particular guidelines.

Thus, through the knowledge that most mothers were inside, the contact with the Maternity' Social Service has become indispensable in To facilitate the returns to ambulatory monitoring, which, unfortunately, by the lack of specialized units, not could be done at their places of origin. For

mothers with no previous experience in breastfeeding, practical activities regarding the management of breastfeeding in preterm infants have been proposed systematically, which facilitated the understanding first calf. Considering the information that most mothers did not reside

with the parents of children, they were encouraged to seek some next of kin to assist in the care of child and her other children, when was the case, including also in this family counseling conducted by team speech therapy in hospital.

Conclusion

The population's profile assisted by the Speech-Language Therapy care service was characterized by predominantly single primiparous, living in the rural area, with low income and/or unemployed, but with, at least, 4-7 years of study. Were also detected low number of prenatal visits, type of cesarean delivery, age low and high gestational length of hospital stay.

To establish the epidemiological profile of the parturients guided by the Speech-Language Thereapy Service, in a maternity hospital reference at high risk, was of great importance for the planning of actions. The prevention and intervention actions were adequate to the assisted population's characteristics, aiming at reaching more effective results in the medium term, both concerning exclusive breastfeeding maintenance until the child is six months old and the care related to the communication and interaction stimulation between mother and newborn.

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