

3<sup>rd</sup> World Congress on

# MEDICAL SOCIOLOGY & PUBLIC HEALTH

International Conference on

# PUBLIC HEALTH AND EPIDEMIC DISEASES

September 21-22, 2018 | Dallas, USA

## Awareness on hospital delivery and risk of pregnancy among women attending in a selected district hospital

**Pradip Kumar Saha**

University of Dhaka, Bangladesh

This cross-sectional study was conducted among 100 pregnant women in Manikgonj district hospital, Bangladesh. Aim of this study was to assess awareness on hospital delivery and risk of pregnancy. Nonprobability convenient sampling technique was used to identify the respondents. One third of the study women did not know any health risks of a pregnant mother. Forty six percent of the respondents mentioned prolonged labor as a major health risk followed by risk to life of mother (26%), eclampsia (19%), obstructed labor (13%) and risk to life of baby (8%). About 45% of the respondents went public hospitals and 37% health and family welfare centers for pregnancy care, 46% qualified doctors and 9% of the respondents mentioned about NGO clinic or hospital. One fourth of the respondents said they heard from qualified service providers and 28% mentioned about relatives. Ninety eight percent of the women thought women should go for ANC and 54% think it should be in case of complications. Only 17% said women should go at one to three months of pregnancy duration. Among them 60% visited two or three times. Sixty six percent of the respondents said they visited when they were less than six months of pregnant. Those who did not take ANC they mentioned not perceived as necessary (16.7%), too far (33%), religious bindings (16.7%) and don't know about the service (33.3%). Respondents were asked from whom they took the ANC. Sixty percent of the respondents sought treatment from Family Welfare Visitor (FWV) and 28% from a qualified doctor. A wider study should be undertaken to generalize the findings. Zika, Ebola, Bird Flu, HIV, etc. are today's murderers. However, malaria is the ancient, current's and futures' slaughterer. The main measures that are in action to minimize malaria's distractions can be grouped into 3 options: prompting diagnoses and treatment with anti-malaria drugs; eliminating the vector by different measures and prophylaxis-vaccination. By such measures, the burden of malaria infection decreases, but couldn't eradicate. Instead, may appear some genetically modified Plasmodium and even the mosquito itself! For postulating our new idea on minimizing such dangerous tendencies, since June 2016, through social media and seminar, we deal with stakeholders on the following: if Anopheles couldn't suck infected blood during its lifespan (maximum a month), it will die without transmitting the disease to a healthy person. Hence, temporary (for  $\leq 100$  days) dislocate the patient from the area, where the mosquito population is high, not only more effective than using only bed nets or killing the Anopheles, but also gives extra dozens of advantages. A quarter of them:

### Biography

Pradip Kumar Saha is working as Consultant Physiotherapist in Amola Healthcare and Research. He is also doing Masters of Disaster Management in University of Dhaka. He has number of publications in International Open Access peer reviewed index journals.

drpradip\_kumar@yahoo.com

### Notes: