Journal of Cardiovascular Disease Research

ISSN: 0975-3583, 0976-2833 VOL14, ISSUE 12, 2023

"EVALUATE THE EFFICACY OF DEMONSTRATION ON THE ORAL AND NASOGASTRIC FEEDING OF HEMIPLEGIC PATIENTS AMONG CARE TAKERS IN SELECTED HOSPITALS, KANPUR".

Mrs. Minu S.R, Mr. Alan V Joseph, Mr. Satheesh A, Mr. Manish Kumar

Faculty of Nursing, Rama University, Kanpur

Email id: dean.nursing@ramauniversity.ac.in

ABSTRACT:

Hemiplegia is a neurological condition characterized by the paralysis of one side of the body. This debilitating condition can significantly impact a person's quality of life, affecting their mobility, independence, and overall well-being.This can lead to poor coordination, which can make eating challenging and uncomfortable. The quasi experimental one group pretest and post-test design was used.A total 60 sample swere selected by using conveniencesamplingtechnique 30 for oral feeding group and 30 for Nasogastric tube feeding group.The majority of caretakers in the nasogastric feeding group (60%), who were between the ages of 26 and 38, were female (53.3%), had a degree (53.3%), were in the military (66.7%), and were married (70%). Of the caregivers in the oral tube-feeding group, 33.3% were between the ages of 28 and 37, 63.3% were female, and 36.7% had a high level of educationto graduate levelwith 83.3% of the samples being married and 43.3% being in-service. The mean score for the oral feeding group was 17.3534 during the pre-test phase and 34.7543 during the post-test phase. The mean score in the pretest phase for nasogastric tube feeding was 14.2667, while the mean score in the posttest phase was 32.9667.A demonstration on how to feed a hemiplegic patient to caretakers was successful in improving the caregivers' proficiency.

Keywords: demonstration, oral feeding, hemiplegia, Nasogastric feeding, care taker.

1. INTRODUCTION:

A patient with hemiplegia has a vertical half of their body that is weak or paralyzed; that is, one arm and its matching leg do not work as they should. It may be Congenital (found prior to, during, or shortly after birth) or acquired (found as a result of disease or a stroke). This is typically the outcome of a stroke, but other conditions that damage the spinal cord and other diseases that affect the hemispheres can also cause this

ISSN: 0975-3583, 0976-2833 VOL14, ISSUE 12, 2023

clinical state. Multiple medical conditions can cause hemiplegia as a symptom. Cerebral palsy is one of the disorders that can restrict functioning by affecting one hemisphere. Hemiplegia is the term frequently used to describe cerebral palsy in which this is the sole symptom.

II.OBJECTIVES:

1. To assess the practices of oral feeding of hemiplegic patient among caretakers before and after demonstration.
2. To assess the practices of Nasogastric feeding of hemiplegic patient among caretakers before and after demonstration.
3. To determine the association of selected sociodemographic characteristics with pre-test score of oral feeding skills and pre-test score of nasogastric tube feeding skills of hemiplegic patients among caregivers before demonstration.

III.HYPOTHESIS:

1.H0-There will be no significant difference in the skills of feeding hemiplegia patients before and after demonstration among caregivers.

2.H1-There will be significant difference in the skills of feeding hemiplegia patients before and after demonstration among caregivers.

III.MATERIALS AND METHODS:

Researchapproach: The research approach adopted for the present study is quantitative approach.

Researchdesign:

Quasi-experimental design to be specificone group pretest and post-test was considered.

Population-In this study, the population consisted of caretakers of hemiplegic patients from the selected hospitals of Kanpur City.

ISSN: 0975-3583, 0976-2833 VOL14, ISSUE 12, 2023

Settingofthestudy: Every hospital in Kanpur City is a full-fledged, top hospital. Super specialized hospitals for hemiplegic patients and trauma centers are SPM Hospital and Regency hospital. offers a dedicated intensive care unit for patients with neurological deficits with state-of-the-art medical amenities. as well as a critical care unit with 20 beds. Critically sick individuals receive treatment in the intensive care units. Every day, three to four individuals with hemiplegia were hospitalized for therapy. With 150 beds and a dedicated neuromedicine and neurosurgery facility, three to four hemiplegic patients were admitted to this facility each day for treatment.

Sampleandsamplingtechnique:

Atotal60sampleswereselectedbyusingconveniencesamplingtechnique.

Inclusion Criteria:

1. Those who provide oral or nasogastric nutrition to hemiplegic patients are eligible to participate.
2. The caretakers were those who were older than eighteen.
3. The caretakers eager to take part in the research.
4. The study included caregivers who were able to read and comprehend Hindi, English.

Exclusion criteria:

1.Hemiplegic patients who had jejunostomy or gastrostomy feeding were not eligible to be caretakers.

2. The study excluded caretakers of patients in critical condition.

3. Those who were over 60 and caretakers under 18 were not included.

IV.Data Collection Technique and Tool:

Data was gathered using a standardized observation questionnaire that was created. Instead of just observing what is happening, the researcher is keeping a close eye out for specific events, such as people's traits and symptoms, verbal and nonverbal communications, behaviour, personal habits, activities, and skill acquisitions.

Plan for Data Analysis:

ISSN: 0975-3583, 0976-2833 VOL14, ISSUE 12, 2023

The aims and hypotheses served as the foundation for the analysis. Both descriptive and inferential statistics were to be used in the data analysis. Expert opinions served as the basis for developing the data analysis plan.

MAJOR FINDINGS OF THE STUDY:

Table 1: Demographic descriptions of caretakers by frequency and percentage.

Characteristics	Oral feeding (N=30)		Nasogastric tube feeding (N=30)	
	Frequency	Percent	Frequency	Percent
Age in years				
•18-27	8	26.7	4	13.3
•26-38	18	60.0	10	33.3
•38-47	2	6.7	9	30.0
•48 –57	2	6.7	7	23.3
Sex				
•Female	16	53.3	19	63.3
•Male	14	46.7	11	36.7
Education				
•Primary	-	-	4	13.3
•Secondary	10	33.3	9	30.0
•Graduate	16	53.3	11	36.7
•Post graduate	4	13.3	6	20.0
Occupation				
•Business	-	-	1	3.3
•Service	20	66.7	13	43.3
•Housewife	8	26.6	15	30
•Farming	1	3.3	1	3.3
Retired	1	3.3	-	-
Marital status				
•Unmarried	9	30	5	16.7
•Married	21	70	25	83.3

ISSN: 0975-3583, 0976-2833 VOL14, ISSUE 12, 2023

Family •Joint •Nuclear	28 2	93.3 6.7	19 11	63.3 36.7
Residence •Rural •Urban	4 26	13.6 86.7	2 28	6.7 93.3

According to the data in Table 1, the majority of caregivers in the oral feeding group (60%), were between the ages of 26 and 38, were female (53.3%), had a degree (53.3%), were in the military (66.7%), and were married 70% of the time. Of the caretakers in the nasogastric tube-feeding group, 33.3% were between the ages of 28 and 37, and 63.3% were women. Of the samples, 83.3% were married, 43.3% were employed, and 36.7% had graduate-level education. 86.7% of the caregivers in the oral feeding group were from an urban region, and the majority (93.3%) were members of a joint family. 93.3% of the nasogastric tube feeding group was from an urban region, and the majority, 63.3%, belonged to a mixed family.

Distribution of feeding skill score in the oral feeding group.

Skill score	**Before demonstration N=30**		**After demonstration N=30**	
	Frequency	**Percentage**	**Frequency**	**Percentage**
1-15	7	23.3	0	0
16-25	23	76.7	0	0
Less than 26	0	0	30	100

It shows that all 30 (100%) caretakers scored 26 and above following the oral feeding demonstration, while the maximum 23 (76.6%) frequency of caretakers scored between 16 and 25 prior to the oral feeding demonstration. The post-demonstration score of the oral feeding group demonstrates a significant increase in the practice scores of the samples, suggesting that the oral feeding technique demonstration is successful in improving caregivers' oral feeding proficiency for hemiplegic patients.

Distribution of feeding skill score in the nasogastric tube-feeding group.

ISSN: 0975-3583, 0976-2833 VOL14, ISSUE 12, 2023

Skill score	Before demonstration N=30		After demonstration N=30	
	Frequency	Percentage	Frequency	Percentage
1-15	26	86.7	0	0
16-25	4	13.3	14	46.7
Less than 26	0	0	16	53.3

Greater than the table value at the 5% level ($p<0.05$), indicating a significant correlation between the patient's age and the caregiver's pre-test score with regard to nasogastric feeding for the hemiplegic patient. The feeding technique demonstration for the hemiplegic patient in both groups was deemed satisfactory by all caretakers (100%) in both groups.

V.DISCUSSION:

The study's conclusions have been examined in light of the goals and hypothesis. Caretakers in the oral feeding group and the nasogastric tube feeding groups were pre-tested on their ability to feed hemiplegic patients, and the results indicate that they are less skilled in this area. This suggests that caretakers must demonstrate how to feed hemiplegic individuals.

REFERENCES:

1)Hock, "Brain Attack", nursing clinics of North America, 1999; 34(3): 689-711.

2) Dring, R. "The informal caregiver responsible for home care of the individual with cognitive dysfunction following brain Injury", journal of Neuroscience Nursing, 1989; 21 (5): 290-294.

3)Brereton, L, "Preparation for family Care giving, Stroke as a paradigm Care", Journal of Clinical Nursing, 1997; 6(6): 425-435.

4) Katz ML, Smith K; Knowledge of stroke risk, Signs of Stroke and the need for stroke education among caregivers; Elhn health. 2002 May 7(2): 115-23.

5) Louie SW, LIU PK; the effectiveness of stroke education group on persons with stroke and caregivers; Int. J Rehabil Res.2006 Jun; 29(2): 123-9.

6) Irvine, D., &Dreger, L. (1991, November). Women as informal caregivers. The Canadian Nurse, 22-23.

ISSN: 0975-3583, 0976-2833 VOL14, ISSUE 12, 2023

7)Wykle, M.L, (1994). The physical and mental health of women caregivers of older adults. Journal of Psychosocial j Nursing, 32(3), 41-42.

8)Pollock-Hoeman, S. (1992). CommuniS based rehabilitation. Holistic Nursing Practice, 6(2), 32-41.

9) Canam, C, & Acorn, S. (1999). Quality of life for caregivers of people with chronic health problems. Rehabilitation Nursing, 24(5), 192-196.

10) Parks, S.M., &Novielli, K.D. (2000). A practical guide to caring for caregiver American Family Physician, 62(12 2613-2622.