

Association between Obstetric Factors with Affected Areas of Health-Related Quality of Life of Pregnant Women

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Abstract : Introduction: As an integral part of the health-disease process, gestation is a period in which the social insertion of women can influence, in a positive or negative way, the course of the pregnancy-puerperal cycle. Thus, evaluating the quality of life of this population can redirect the implementation of innovative practices in the quest to make them more effective and real for the promotion of a more humanized care. This study explores the associations between the obstetric factors with affected areas of health-related quality of life of pregnant women with habitual risk. Methods: This is a cross-sectional, quantitative study conducted in three public facilities and a private service that provides prenatal care in the city of Fortaleza, Ceara, Brazil. The sample consisted of 261 pregnant women who underwent low-risk prenatal care and were interviewed from September to November 2014. The collection instruments were a questionnaire containing socio-demographic and obstetric variables, in addition to the Brazilian version of the Mother scale Generated Index (MGI) characterized by being a specific and objective instrument, consisting of a single sheet and subdivided into three stages. It allows identifying the areas of life of the pregnant woman that are most affected, which could go unnoticed by the pre-formulated measurement instruments. The obstetric data, as well as the data concerning the application of the MGI scale, were compiled and analyzed through the statistical program Statistical Package for the Social Sciences (SPSS), version 20.0. After the compilation, a descriptive analysis was carried out. Then, associations were made between some variables. The tests applied were the Pearson Chi-Square and the Fisher's exact test. The odds ratio was also calculated. These associations were considered statistically significant when the p (probability) value was less than or equal to a level of 5% ($\alpha = 0.05$) in the tests performed. Results: The variables that negatively reflected the quality of life of the pregnant women and presented a significant association with the polaciuria were: gestational age ($p = 0.022$) and parity ($p = 0.048$). Episodes of nausea and vomiting also showed significant with gestational age correlation ($p = 0.0001$). Evaluating the crossing of stress, we observed a significant association with parity ($p = 0.0001$). In turn, emotional lability revealed dependence on the variable type of delivery ($p = 0.009$). Conclusion: The health professionals involved in the assistance to the pregnant woman can understand how the process of gestation is experienced, considering all its peculiar transformations; to meet their individual needs, stimulating their autonomy and their power of choice, envisaging the achievement of a better quality of life related to health in the perspective of health promotion.

Keywords : health-related quality of life, obstetric nursing, pregnant women, prenatal care

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