



**A STUDY TO EVALUATE THE EFFECTIVENESS OF GINGER WITH HONEY TEA ON REDUCTION OF MORNING SICKNESS AMONG FIRST TRIMESTER PRIMI ANTE NATAL MOTHERS IN SELECTED HOSPITAL, AT KRISHNAGIRI**

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**ABSTRACT**

*Motherhood is an inevitable part of a woman's life. It's a natural law that a woman should carry her baby in her womb for 9 months and to undergo the process of labour. According to WHO, in World the total fertility rate was 2.7 and total fertility rate in India was 3.1 in the year 2000-2005. According to UNICEF data, in India the antenatal care coverage percentage in the year 2005-2006 was 74% and 47% of birth attended by skilled health personnel. According to Census of India, in Karnataka female population constitutes 49.11% of total population and the total fertility rate is 2. **Methods:** In this study a quasi-experimental non-randomized control group pretest post-test design was adopted.*

**Results:** *The data was analysed through descriptive and inferential statistics. To evaluate the effectiveness of ginger with honey tea on reduction of morning sickness paired 't' test was used. The control group calculated 't' test p value was 1.79 which is not significant at  $P < 0.05$  level. The experimental group calculated 't' test p value was 11.1 which is significant at  $P < 0.001$  level. In comparing post test scores of experimental group and control group calculated 't' test value for 7.84 which was significant at  $P < 0.001$  level. Hence  $H_1$  was accepted. **Conclusion:** The finding of the study revealed that ginger tea was effective in reducing the morning sickness among first trimester primi ante natal mothers in experimental group than control group.*

**Keywords:** Effectiveness; Ginger with honey tea; morning sickness; antenatal mothers.

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## INTRODUCTION

Motherhood is an inevitable part of a woman's life. It's a natural law that a woman should carry her baby in her womb for 9 months and to undergo the process of labor. About 90% of the women experience nausea and vomiting during pregnancy. The intensity of nausea and vomiting depends upon the individuals according to other predisposing factors which are still remaining unknown. Although morning sickness can seriously affect the mother's quality of life and how she goes about her daily activities. Women who are able to receive the support of family and friends tend to cope much. Herbal preparations such as ginger tea may help to relieve morning sickness symptoms.

## NEED FOR STUDY

Pregnancy is a long and very special journey for a women. It's a wonderful experience yet it is associated with some minor disorders as nausea and vomiting, heart burn, constipation, cramps, backache, varicose veins, ankle edema. According to the **National Health Service (NHS), UK**, about 28% of women experience nausea without vomiting Most pregnant women find that the morning sickness improve after the 12th week of pregnancy. Unfortunately, for some women symptoms persist throughout their pregnancy. A clinical trial study conducted among 70 antenatal women who were experiencing severe nausea and vomiting during pregnancy were randomly assigned to take capsules 250mg of ginger four times a day or a placebo. Compared to controls women who took ginger for 4 days reported significant improvement in nausea at the level of  $p < 0.014$  and fewer episodes of vomiting at the level of  $p < 0.021$ . Although results were good but researcher suggest a larger study is needed to determine safety of ginger during pregnancy

## PROBLEM STATEMENT

“A study to evaluate the effectiveness of ginger with honey tea on reduction of morning sickness among first trimester primi ante natal mothers in selected hospital, at krishnagiri” **Objectives of the study**

To evaluate pretest and posttest level of morning sickness among first trimester primi ante- natal mother in experimental group.

To find out the effectiveness of ginger tea in reduction of morning sickness among first trimester primi ante –natal mothers in experimental group.

To determine the association between the pretest and posttest level of morning sickness with selected demographic variables-Age and Educational Status among first trimester primi ante-natal mothers in control and experimental group.

## MATERIAL AND METHOD

**Research approach:** Quantitative study with evaluative approach was considered as an appropriate research approach for the present study.

**Research design:** The research design selected for this study was quasi experimental nonrandomized control group pretest posttest design to measure the effectiveness of Ginger with honey tea.

### Sample and sampling technique:

Samples refer to the subset of the population comprising those selected to participate in a study. In this study the sample comprised of first trimester primi antenatal mothers with morning sickness who fulfilled the inclusive criteria and Exclusive criteria of the study. A total of 60 first trimester primi antenatal mothers with morning sickness was chosen for the present study. 30 samples in experimental group and 30 samples in control group.

### Inclusion criteria

Primi antenatal mothers who are in first trimester.

Primi antenatal mothers who have nausea and vomiting.

Primi antenatal mothers who can read and understand Tamil, English.

### Exclusion criteria

Primi antenatal mothers who are not available during data collection.

Primi antenatal mothers who are having other obstetric problems.

Primi antenatal mothers who are not willing to participate in the study

### Data collection and tool description

Demographic data and obstetric history was collected from first trimester primi antenatal mothers by interview method. Modified Rhodes Index of Nausea, Vomiting and Retching scale, which had given the scoring from 0 to 32.

The score was interpreted as follows:

Morning Sickness	Scores
Mild	0-8
Moderate	9-16

Severe	17-24
Profound	25-32

### Data collection procedure

The investigator had obtained written permission from institution and hospital authority in krishnagiri. The purpose of the study was explained and oral consent was obtained from the subjects before the procedure. The researcher administered the questionnaire to assess the demographic variables and Modified Rhodes Index of Nausea, Vomiting and Retching scale questionnaire to assess the degree of morning sickness in the pre- test.30 experimental and 30 control group samples were selected at krishnagiri. In this study ginger tea was prepared by boiling 300ml of water over medium to high heat and then added 500mg ginger root, allowed it to boil for 3-5mts removed from heat and strained. Added sugar for taste (1/2 teaspoon) and served the mothers twice a day for four days.

### RESULTS AND DISCUSSION

Table: 1- Frequency and percentage for level of morning sickness among first trimester primi ante natal mothers in control and experimental group.

(N=30+30)

Level of morning sickness	Control group				Experimental group			
	Pre test		Post test		Pre test		Post test	
	F	%	F	%	F	%	F	%
Mild	2	6.7	1	3.3	3	10	12	40
Moderate	8	26.7	8	26.7	7	23.3	17	56.7
Severe	10	33.3	1	40	14	46.7	1	3.3
Profound	10	33.3	9	30	6	20	0	0
Total	30	100	30	100	30	100	30	100

This finding reveals that, in experimental group after the ginger tea administration, the level of morning sickness among first trimester primi ante natal mothers were decreased in posttest than pretest.

**Table 2: Data on effectiveness of ginger tea on reduction of morning sickness among first trimester primi ante natal mothers.**

**Table 2(a):** Mean, SD and paired “t” –test of pre and post test level of morning sickness in control group.N=30

Group	Pre test		Post test		Mean difference	‘t-value’
	Mean	SD	Mean	SD		
Control group	19.9	7.49	20.2	6.72	0.3	1.79

The above table shows that the calculated ‘t value’ in the control group was 1.79 which was not significantly at  $P < 0.05$  level. It can be concluded that there is no much difference in pretest and posttest in control group.

**Table 2(b):** Mean, SD and paired “t” test of pre and post level of morning sickness in experimental group.

N=30

Group	Pre test		Post test		Mean difference	‘t’ value
	Mean	SD	Mean	SD		
Experimental group	18.5	7.16	9.37	4.61	9.13	11.1***

(\* -  $P < 0.05$ , significant and \*\* - $P < 0.01$  & \*\*\* - $P < 0.001$ , Highly significant)

The above table shows that the calculated “t” value in the experimental group was 11.1 which was statistically highly significant at  $P < 0.001$  level. Hence H1 is accepted. It can be concluded that ginger

tea was effective in reducing the morning sickness among first trimester primi ante natal mothers.

**Table 3:3- Mean, SD and unpaired ‘t’ test of posttest level of morning sickness in control and experimental group.**

(N=30+30)

	Control post test		Experimental post test		Mean difference	‘t’ value
	Mean	SD	Mean	SD		
Level of morning sickness	20.2	6.72	9.37	4.61	10.83	7.84***

(\* -P<0.05, significant and \*\* -P<0.01 & \*\*\*-P<0.001, Highly significant)

The above table shows that the obtained ‘t’ value between control and experimental group is 7.84 which was highly significant at p<0.001 level. Hence H<sub>1</sub> is accepted. It can be concluded that the ginger tea was effective in reducing the morning sickness in experimental group among first trimester primi antenatal mothers than control group.

### CONCLUSION

The following conclusions were drawn from the study –The Ginger tea was effective in reducing the morning sickness among first trimester primi ante natal mothers.

### SUGGESTIONS:

The findings of the study could be utilized by all the nursing and medical personnel.

Nurses should be made aware of ginger with honey tea on reduction of morning sickness and encourage them to adopt this evidence based practice based on the study findings.

Conduct awareness programmes and in-service education on non-pharmacological methods to reduce morning sickness.

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