P-3

Association Between Knowledge Level on Gestational Diabetes Mellitus with Sociodemographic Factors Among Antenatal Mothers in Temerloh

NMRR ID-23-02114-YHB (IIR)

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INTRODUCTION

Gestational Diabetes Mellitus (GDM) defined as impaired glucose tolerance in pregnancy, reverts to normal after birth; increased risk of diabetes mellitus in later life (Tiran, 2017).

GDM is known to affect the livelihood of the mothers and the baby before, during and after the pregnancy and need to undergone serial assessment and extra precaution (Ministry of Health, 2017).

In Asia, the prevalence of GDM is expected to increase over years possibly due to increase in maternal age and obesity.
Women with common risk factors should receive additional attention from physician as high-risk cases for GDM (Lee, K. W. & et al, 2018).

In Pejabat Kesihatan Daerah (PKD) Temerloh, the average cases of GDM from year 2018- 2022 is 692 cases per year.

OBJECTIVES

To identify the level of knowledge among antenatal mother on GDM and the relationship with sociodemographic factors in Temerloh

METHODS

STUDY DESIGN	Cross-sectional study
STUDY POPULATION	Antenatal mother in PKD Temerloh
SAMPLING METHOD	Convenience non probability sampling
INCLUSION CRITERIA	• Willing to participate • Aged 18 years old and above • Not in labour pain • Not in emergency obstetric condition
STUDY TOOLS	Gestational Diabetes Mellitus Knowledge Question (GDMKQ)

QR code distribution :

- Patient Information Sheet
- Informed Consent
- Questionnaire :

6 questions : Risk Factors
4 questions : Screening and Treatment
3 questions : Complications

'**Yes**' → '**1**'
'**No**' → '**0**'

Poor knowledge: scored 0-4,
Average knowledge: scored 5-8
Good knowledge: scored 9 -13

STUDY ANALYSIS	SPSS version 26

RESULTS

Table 1 : Socio-demographic profile of Participant (N= 248)

	Frequency (n)	(%)
Age		
20 -34years old	159	64.1
>35 years old	89	35.9
Education		
Primary	26	10.5
Secondary	138	55.6
Tertiary	84	33.9
Occupation		
Housewife	68	27.5
Employment	168	67.7
Unemployment	12	4.8
No of Child (Parity)		
0	40	16.1
>1	208	83.9
History of DM		
No	242	97.6
Yes	6	2.4
History of GDM in current or previous pregnancy		
No	51	20.6
Yes	197	79.4

Level of Knowledge on GDM

Figure 1 : Level of Knowledge on GDM (N = 248)

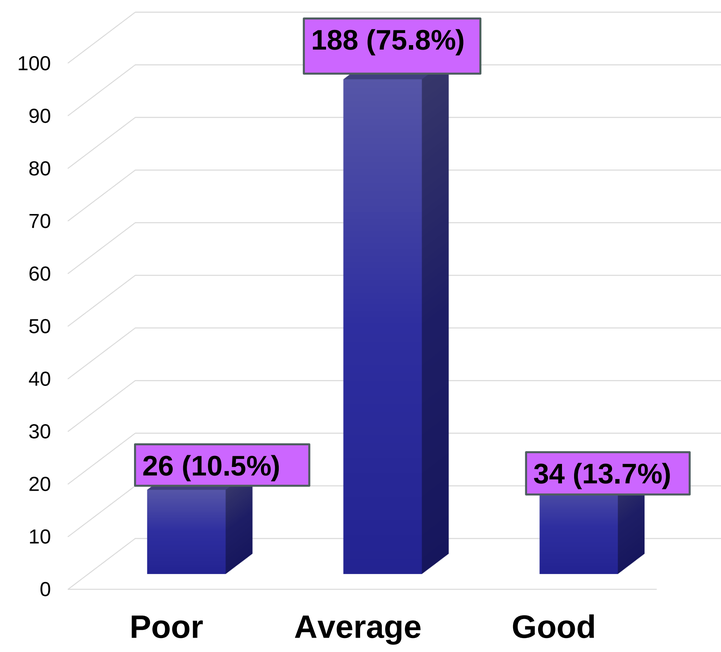

Table 2 : Socio-demographic profile of Participants and Association with level of Knowledge.

	Knowledge			X^2	df	P value
	Poor	Average	Good			
Age						
20- 34years old	16	118	25	1.533	2	0.465
>35 years old	10	70	9			
Education						
Primary	6	18	2	6.005	4	0.199
Secondary	15	114	23			
Tertiary	5	56	9			
Occupation						
Housewife	12	48	8	9.378	4	0.052
Employment	11	132	25			
Unemployment	3	8	1			
No of Child (Parity)						
0	8	28	4	4.810	2	0.090
>1	18	160	30			
History of DM						
No	26	182	34	1.962	2	0.478
Yes	0	6	0			
History of GDM in current or previous pregnancy						
No	3	36	12	6.043	2	0.047
Yes	23	152	22			

***Significanct at P value < 0.05**

DISCUSSION / CONCLUSION

Our finding on sociodemographic profile is consistent with study by Alharthi, A. S. et al (2018) found that education and family history of DM were significantly associated with better knowledge score ($p < 0.01$).

However, Anuar, M. N. & et al (2020) found that there were no significantly associated with age, education, occupation, income, gestational age, history of GDM, and parity.

Based on level of knowledge, our study consistent with study by Bhowmik, B. & et al, (2018) 63.1% of participants had average knowledge regarding GDM.

In summary, the knowledge on GDM among antenatal mother in PKD Temerloh was average and there was significant relationship between sociodemographic (history of GDM) with level of knowledge on GDM.

Hence, health education and awareness programs should be conducted to improve knowledge of antenatal mothers for better utilization of health services.

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ACKNOWLEDGEMENT

We would like to thank the Director General of Health Malaysia for his permission to present this article, State of Pahang Director of Health, Temerloh Public Health Physician from Temerloh Health District Pahang of Malaysia for allowance and approval for me and my team to conduct this study.

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