

Summary

Perineal pain after episiotomy is one of the most common causes of maternal morbidity. It is not only distressing for women but also affects her ability as a mother and affects her relationship with husband at an important time when family dynamic is altering. Management of Perineal pain ranges from application of ice pack, hot water, local anesthetic, oral and parenteral analgesic to the use of ultrasound. As application of ice pack, hot water is easily prepared, economic, had not side effects, do not need for doctor's orders and help mother to care for herself. In addition, the use of honey as a wound dressing material is an ancient remedy rediscovered to hasten granulation and epithelialisation, so healing occurs rapidly with minimal scarring. In addition, it has the antibacterial properties that prevent microbial growth unlike other topical antiseptics; honey does not cause tissue damage. Thus, the aim of this study was to examine the effect of application of ice, hot and honey on relieving post episiotomy pain and healing and examine effect of application of xylocaine gel.

The total sample was 150 post partum women had vaginal delivery with episiotomy. The women were divided into two main groups; control group consisted of 50 women and the study group consisted of 100 women subdivided according to the line of treatment into non-pharmacological group (50 women) received ice, hot and honey and a pharmacological group (50 women) received xylocaine gel.

Methods of data collection entailed; interviewing sheet. visual analogue scale, REEDA scale, and follow-up sheets. The investigator interviewed all recruited women after obtaining their consent and assessed their Perineal pain and healing degree before using comfort measures and after using them(at the first hours, after 24 hours and on

the 7th post partum day). The visual analogue scale assessed perineal pain scores. The REEDA scale assessed perineal healing scores. The follow-up sheet assessed further pain and healing degree after 24 hours and on the 7th postpartum day through home visits.

Results of this study indicated that there was a homogeneity among three groups related to socio-demographic characteristics and past obstetric history as the mean age of women in the ice, hot and honey group, xylocaine gel group and control group were ($X^2=22.71 \pm 4.66$), ($X^2 = 23.54 \pm 4.55$) and ($X^2 = 22.74 \pm 4.39$) respectively. More than half of women in both study and control groups were house-wives women with secondary education in both study and control groups represented 54%, 52%) respectively.

As regard to parity, the study showed that more than half of women were Primigravida in both groups . In relation to mode of delivery the majority of women had normal vaginal delivery with episiotomy . There was no statistical difference among three groups.

Regarding degree of perineal pain and mother's ability to sit, move and care for her newborn before using comfort measures. There was no statistical significant difference among three groups.

Concerning perineal examination before using comfort measures, statistically significant differences were observed among three groups.

As regards effect of application of comfort measures on perineal pain and healing degree after episiotomy at different times (at first hours, after 24 hours and on the 7th post partum day), there were highly statistically significant differences observed among three groups ($P<0.001$) .

Findings related to the effect of comfort measures on the women's ability to sit, move and care for their newborn indicated that there were highly statistically significant differences among three groups at different times, ($P < 0.001$).

Regarding effect of applying ice ,hot, and honey versus Lignocaine gel on perineal pain and healing score at different times, the study stated that there were highly statistically significant differences between the two groups .

The finding of this study illustrated that application of ice, hot, and honey on the site of episiotomy immediately after delivery and during first 7th post partum day is an effective non-pharmacological intervention for relieving perineal pain and promote healing than application of xylocaine gel.

Results indicated that, women's satisfaction regarding use of ice, hot and honey as pain relief and promoting perineal healing after episiotomy represented 96% while 44% of lignocaine gel group reported that it was a good measure and about 56% reported that it was weak and need other measures.

The study concluded that using ice, hot & honey and xylocaine gel reduce perineal pain & promote healing after episiotomy and recommended that:

- 1- Episiotomy shouldn't be a routine part of labor and delivery and should be used for certain indications.
 - 2- Maternity nurse should be familiar with non pharmacological pain relief measures.
 - 3- Maternity nurse provide pregnant women with adequate knowledge about measures to prevent performance of episiotomy as kegel exercises and perineal massage.
-
-