INTRODUCTION

Hepatitis C virus remains a large healthcare burden to the world. The (WHO) estimated a world wide prevalence of about 3% with the virus affecting 200 million people Hepatitis C virus (HCV) was found to be responsible for 70-90% of post transfusion it was be fore then called non- A, non. B hepatitis (*Kumar and Clark 2009*).

(*Bojuwoye*, 2007) estimate mortality from HCV infections, 63% of persons infected before the age 40 years were assumed to progress to chronic infection, with a cumulated incidence rate of cirrhosis of 5% at 20 years & a yearly mortality rate associated with chronic liver disease of 3.7% after the onset of cirrhosis in persons infected after the age of 40 years the assumed rate of progression to chronic infection was 8% the cumulated incidence rate of cirrhosis of 20% at 20 years & the yearly mortality rate remained the same as in the young e age group. Hepatitis C virus (HCV) infection, the most common blood borne infection in the united states has become an important health problem as increasing numbers of persons acquire the disease.

The most common risk factor is a history of injecting intravenous drugs other risk factors include STDs as hepatitis B and HIV, multiple sexual partners & a history of blood transfusions HCV infection confirmed by the presence of anti- C anti body during laboratory testing (CDC 2009).

Currently there is no vaccine to prevent hepatitis C there has been very high prevalence rates of HCV reported in Egypt above 28% this confirmed among blood donors in Cairo, where 14.4% were anti- HCV

positive by Riba test rates were lower in Saudi Arabia 1.8% and yemen 2.15 (*Villano et al.*, 2010).

Transmission of HCV is possible when disinfection & sterilization technique are inadequate, and contaminated equipment is shared among pts. In Egypt, latrogenic infections have been linked to the origin of this public health problem. The important advancement was the introduction of screening blood donors of HCV & eliminating those who were HCV positive from the blood bank system this was a world wide development to reduce & eliminate HCV transmission, By blood transfusion other blood products & transplantation of organs. Screening blood donors for HCV in Egypt has been very successful in reducing HCV transmission by blood transfusion (*Thomas et al.*, 2009).

During labour. The nurse play important role in prevention of blood born infection through good infection control technique. Gloving must be used for many contacts with blood. Fluids and double gloving is recommended for nurse who perform vaginal examination. Water proof. Gowns, masks caps and eyes shields are used for splash exposure and should be worn during procedure that may cause droplets of blood or amniotic fluid to splash (*Boyce and Pittet 2009*).

Nurses and other health care professionals have been educated on infectious diseases and their care and prevention today there are many emerging infections, as well as known infections that threaten the public. It is a vital that health care professionals caring for women's who are in labor knows practice this information because women and newborns are more liable to these infectious diseases.

There are many people in Egypt who provide medical care, such as injections who are not trained and have little or no knowledge.



The purpose of this project is to reduce HCV hepatitis by preventing infection through reducing exposure to infected blood.

Justification of the problem:

The labour process is the process in which most of problems and complications occurring, that may lead to increase infection to the mother and newborn. All the findings of the previous studies that conducted in obstetrics ward at Benha university hospital and Benha teaching hospital revealed inadequate nursing care was provided to women during labour. So this study was curried out to upgrading nurses knowledge, attitude and practice during labor.