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Efficacy of Sitz Bath in Reducing Episiotomy Wound Pain Among Postnatal Mothers

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Abstract

Objective:

To assess the effectiveness of sitz bath in reducing episiotomy wound pain among postnatal mothers.

Methodology:

A quasi-experimental study was conducted among 30 postnatal mothers, with 15 assigned to an experimental group and 15 to a control group. A visual analog scale (VAS) was used to assess pain levels. The experimental group received education and administration of sitz baths, while the control group received routine postnatal care. Pain levels were assessed before and after the intervention in both groups.

Results:

The post-test pain levels in the experimental group were significantly lower compared to the control group, with statistical analysis revealing a high level of significance. This indicated that the sitz bath was effective in alleviating episiotomy pain among postnatal mothers.

Conclusion:

Sitz baths are an effective, simple, and cost-efficient method for reducing episiotomy wound pain among postnatal mothers and should be integrated into routine postnatal care.

Keywords: Episiotomy, Postnatal Pain, Sitz Bath, Perineal Wound, Pain Management

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Introduction

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An episiotomy is a common surgical incision made on the perineum during childbirth to enlarge the vaginal opening for delivery. Although it facilitates childbirth, it often results in considerable pain and discomfort during the postnatal period. Effective pain management is essential not only for maternal comfort and mobility but also for early initiation of breastfeeding and bonding with the newborn.

The sitz bath, involving immersion of the perineal region in warm water, is a non-invasive method known to enhance local blood circulation, promote healing, reduce inflammation, and relieve pain. It is a time-tested, economical, and self-administered procedure that can be easily taught and practiced by postnatal mothers at home or in clinical settings.

Despite its benefits, the use of sitz baths is not universally emphasized or routinely practiced in all healthcare settings. The present study aims to evaluate the efficacy of the sitz bath in reducing episiotomy wound pain, thereby providing evidence-based recommendations for improving maternal postnatal care.

Methodology

A quasi-experimental design with a non-randomized control group was employed to evaluate the impact of sitz bath therapy on episiotomy wound pain. The study was conducted on a sample of 30 postnatal mothers, divided into two groups of 15 each — an experimental group and a control group. The participants were selected using a non-probability purposive sampling technique based on inclusion criteria such as undergoing vaginal delivery with episiotomy within 48 hours.

The **intervention** involved educating the experimental group on the benefits and procedure of the sitz bath, followed by administration of the therapy. Each sitz bath session lasted for 15–20 minutes and was conducted twice daily for a set duration. The control group received only routine postnatal care.

Pain levels were assessed in both groups before and after the intervention using the **Visual Analog Scale (VAS)**. The effectiveness of the intervention was evaluated by comparing pre- and posttest scores within and between the two groups using appropriate statistical tests.

Results

Analysis of the data indicated a significant reduction in episiotomy pain among mothers in the experimental group who received sitz baths compared to those in the control group. In the pretest, both groups reported similar levels of pain. However, in the post-test, the experimental group showed a substantial decrease in pain scores, while the control group exhibited only minor changes.

Statistical analysis confirmed that the difference in mean pain scores between the two groups in the post-test was significant (p < 0.05), supporting the effectiveness of sitz bath therapy in reducing episiotomy wound pain.

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Discussion

The findings of this study are consistent with previous research indicating the beneficial effects of sitz baths in promoting episiotomy wound healing and pain relief. Studies conducted by Dr. L. Kalaivani, Ms. Poonam Sheoran, and Mr. Gagan Raj have demonstrated that sitz baths significantly enhance wound healing by improving circulation, reducing inflammation, and maintaining local hygiene.

In comparative studies, sitz baths were found to be more effective than other non-pharmacological therapies such as infrared light, cold gel packs, and routine care. Variations of sitz bath therapy — including lavender oil, halite salt, and betadine sitz baths — have also shown superior results in terms of both pain relief and wound healing.

The current study adds to this growing body of evidence by reinforcing that regular administration of warm sitz baths can serve as a practical and low-cost intervention in postnatal care units. Given the physical and emotional strain of the postnatal period, non-invasive methods such as sitz baths can significantly contribute to the comfort and recovery of new mothers.

Conclusion

The present study concludes that sitz bath therapy is an effective, simple, and affordable intervention for reducing episiotomy wound pain among postnatal mothers. It not only enhances comfort but also promotes healing and can be easily taught and practiced in both hospital and home settings.

Incorporating sitz bath education and application into routine postnatal care protocols can greatly improve maternal satisfaction and recovery outcomes. Health professionals should advocate for and implement this practice as part of standard postpartum care, especially in resource-constrained environments.

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