

FCP85**NURSING PROTOCOL ON THE USAGE OF OXYTOCIN DURING LABOR**

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Since using medicines in the prenatal / innatal periods can affect the health of both mother and the fetus, this matter should be regarded carefully. A study on intravenous administration of drugs has found an error rate of 47 %. The general causes of mistakes include: 31% neglecting of drug administration, 15% continuation of cancelled orders and 13% administration of wrong dosage. Correct and complete administration of drugs and reducing mistakes is responsibility of the institutes as well as that of the personnel. Institutes need the form drug policies, inform their staff regarding new developments in drugs and to establish mechanisms to immediately spot and report faults. With the use of oxytocin in the innatal period, complications such as hyperstimulation and rupture of the uterus, ablatio placenta and tears due to a fast birth in mother, and trauma, hypoxia and hyperbilirubinemia in fetus can occur.

The study was planned to analyze application of oxytocin which is widely used in the innatal period for regulating the contractions of the uterus and to develop a protocol to standardize applications in the light of the collected data. The study was started on May 2002 in the maternity clinic of Erdem Hospital and constituted of five steps. In the first stages of the study, the files of expectant mothers who had received oxytocin in the month of April were retrospectively analyzed from the aspects of care and follow up. In the second stage, a protocol was formed according to the collected data, literature findings and the facilities and policies of the clinic. Later, the midwives and nurses took a 2 day course to be introduced to the protocol and to be informed on how it was going to be used. The protocol was put the use in the fourth stage. Finally, the effects of the use of the protocol on applications will be assessed by retrospectively analyzing the files of the patients who are receiving oxytocin according to the protocol after two months.

FCP86**EFFECTS OF POST PARTUM DEPRESSION ON MATERNITY EXPERIENCE**

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Objective: Studies have reported consistly that 10-20 % of women who have given birth experience postpartum depression in Turkey. Postpartum depression can start any time during the 1st year after delivery, not only in the first few months after giving birth. It is characterized with anxiety, fatigue, feeling of loneliness and joy and even refusing her child. Our resource was conducted as a descriptive study to define postpartum depression and hopelessness postpartum women, to define women experiences who has highly postpartum depression score in the four month

Material and Methods: The study was performed between 1 February 2002-31 May 2002. Sample consist of 173 women that given birth to a child in Zeynep Kamil Women's and Children Hospital, in İstanbul. That were asked to fill 21 item Beck Depression Scale that translate and made validity and reliability study by Tegin (1980), and 10 item Beck Hopelessness Scale of that made validity and reliability study by Seber (1991), Durak (1994) and a questionnaire that was developed by researchers in the postpartum first three days. Than the both scale was scored and it was seen that mild (n:20), moderate (n:5) and severe depression (n.:2). Total 27 women who experiences postpartum depression are being evaluated from researchers by telephone. Researchers are inquiring presently about relationship mother who postpartum depression with her baby, family, husband and environmental in this interview.

Results: In our study we found women age $X:25.08 \pm 5.02$ years, number of pregnancy $X:2.48 \pm 2.05$, time of married $X:62.03 \pm 55.70$ month. Average Beck Depression Inventory Scores were 10.80 ± 8.88 , Beck Hopelessness Scale Scores were $X:4.40 \pm 3.38$ on first three days in postpartum. The mean Beck depression Inventory Scores for the first three days postpartum were weakly correlated with the Beck Hopelessness Inventory Scores at there days ($r:0.32$). Other variables studied (age, occupation, number of child) did not correlation the Beck Depression Scores and Beck Hopelessness Inventory Scores.