DIFFICULTIES ENCOUNTERED BY THE FEMALE PATIENTS WITH DISABILIT IES IN ACCESSING THE OBSTETRICS-GYNECOLOGY SERVICES

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Abstract: The purpose of the article is to present the difficulties encountered by the women with disabilities in accessing OBG services. This article is an integral part of the PhD Thesis: Health Care Quality Assurance for Women with Disabilities in Obstetrics-Gynecology Services.

Keywords: women with disabilities, gynecological examination.

Rezumat: Scopul acestui articol este de a prezenta problemele pe care femeile cu dizabilități le întâmpină în accesarea serviciilor de obstetrică-ginecologie. Articolul prezentat este parte integrantă a lucrării de doctorat: Asigurarea calității îngrijirilor medicale la pacientele cu handicap în serviciile de obstetrică-ginecologie staționar. **Cuvinte cheie:** femei cu dizabilități, consultație ginecologică.

INTRODUCTION

Providing services quality in the sections of obstetricsgynecology for the female patients with disabilities represents a deficitary issue within the health system of Romania. It is essential that the speciality services in the obstetrics-gynecology setting should be structured in order to meet the special needs of each patient, both from the environmental, psycho-emotional point of view and in terms of technical material base and human resources structure.

The diversity of the pathological states the patients with disabilities may present is materialized through inflammations, paralysis, lack of muscle control, stiffness, hyperalgia, antalgic positions, muscles weakness, spasms, hyperkinetic movements, impossibility of orientation etc. In any case, it is important that the patients should be provided with a safe and intimate climate, reducing at minimum or totally eliminating the discomfort elements.

RESULTS AND DISCUSSIONS

Despite the problems related to pregnancy and birth giving brought about by the existence of certain disabilities, most women with disabilities may give birth to healthy babies on condition they are assisted by a well trained medical staff.

The research made in many countries showed that the women with disabilities had lived negative experiences because of the impossibility of finding clinics or hospitals which should offer them adequate medical care for pregnancy dispersion, birth giving assistance and specific medical care within the reproduction pathology.

- The lack of specific abilities is as stronger as the disabilities are less prevalent in women, for example, backbone disorders.
- The literature proved that the future clinicians and obstetricians had major problems in knowing the possible complications due to the existence of disabilities, such as backbone disorders. It is expected that these problems would last in future too, until the elaboration of certain practice specific protocols.
- This lack of specific abilities led in some of the cases to negative attitudes from the part of certain practitioners regarding pregnant women with disabilities who wished to keep the baby.
- In some of the cases, the women with disabilities were advised to interrupt pregnancy and to use a contraceptive method as safe as possible, maybe irreversible (tubal ligation or hysterectomy).
- In services with human resources without specific training regarding the assistance of female patients with disabilities, it is avoided the search for practitioners with such experience in other locationsⁱ, too, as well as the assistance in multidisciplinary team.
- Most women with disabilities are able to keep their pregnancy and to give birth to healthy children if they benefit from a medical care team with the necessary skills for eliminating the possible risks that may occur in this category of patients.
- The difficulties that are overlooked constantly and that are typical for the women with different physical disabilities or major associated disorders require complex assistance from the part of third parties. Some of the possible solutions are: physical or occupational therapy or upgraded equipment which should help in mobility and in the development of the physical activities.
- There are also common pathological disorders of the urinary bladder, encountered in the women with different physical disabilities such as: increase of the number of infections, increase of the dyskinetic, trigonal or sphincter manifestations accompanied by significant disorders of continence and increasing

difficulties in the use of catheters, which require a change in the schedule of specific, general and local care.

Frequent infections are generally problematic because they represent an important ethological cause of spontaneous abortion, premature birth and lowbirthweight babies.

- The problems related to the cutaneous pathologic manifestations are more frequent and directly conditioned from the existence and level of the physical disabilities during pregnancy. These may vary from decubitus lesions associated with backbone affections to the occurrence of areas of hyperkeratinization and cornification even reaching to areas with tegumentary sclerosis.
- The risk for thrombotic accidents increases progressively with the pregnancy development for the women with difficulties in movements and mobilization.
- The respiratory syndrome and the risk of the occurrence of pulmonary complications increase progressively with pregnancy development, especially in women who had specific affections previously.
- Pre-existence digestive pathology may periodically represent the exacerbation of the symptomathology during pregnancy, dominating the motility disorders.
- Spasticity tends to increase during pregnancy in women who presents neurological manifestations associated to the pre-existing disorders, such as multiple sclerosis, sensitive, sensorial and central or peripheral motor affections.
- The risk for autonomic disreflexy (a sudden increase of blood pressure and tonicity which may affect life) is increasing in women with affections of the upper segments of the backbone and may be incorrectly diagnosed, being treated as pre-eclampsya.
- The frequency of the cerebral accidents, of cardiac decompensation tends to increase during pregnancy in women with antecedents associated to affections of the central nervous system.
- Certain chronic diseases, such as: multiple sclerosis and rheumatoid arthritis improve during pregnancy while others, such as lupus tends to aggravate.

CONCLUSIONS

In order to ensure the conditions corresponding to the development of the specialized medical services for the people with disabilities, it is necessary to provide the quality of the obstetrics-gynecology services setting:

- 1. providing the necessary technology in order to offer quality services for the people with disabilities according to their needs;
- 2. providing adequate safety and intimacy conditions, microclimate and proper access;
- 3. special training for the medical personnel with a view to assure the quality of the medical services supply for the female patients with disabilities regarding the obstetrics and gynecology setting.

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