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**Knowledge is power: improving pregnant woman's knowledge may help in the prevention of urinary tract infection**

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**Objectives:** In consideration of the high prevalence of urinary tract infection (UTI) among pregnant women, a health intervention based on the health belief model (HBM) was incorporated in the mothers' class with the aim to reduce its prevalence rate through improvement in the knowledge and health beliefs of the selected population.

**Methods:** With approval of an accredited research ethics committee, 71 pregnant women who tested positive for UTI were randomly grouped into study and controls. The developed health education package, consisting of a seminar, weekly sending of short message services (SMS), and distribution of educational leaflets, was given to the study group. Whereas, distribution of leaflets was done for the control group. We also determined the association of knowledge with the participants' health beliefs before and after the health education package.

**Results:** Initially, the pre-intervention knowledge did not show any correlation with the various constructs of the HBM. However, after the administration of the health education package, a significant positive association was observed between knowledge and certain constructs of HBM, namely: perceived severity ( $r = 0.279$ ,  $p = 0.02$ ), perceived benefits ( $r = 0.285$ ,  $p = 0.02$ ), and cues to action ( $r = 0.252$ ,  $p = 0.03$ ). With regards to the effect of the intervention to both knowledge and health beliefs, no significant change was observed between the pre- and post-intervention data. However, it can be noted that knowledge slightly improved (from  $12.32 \pm 4.2$  to  $13.7 \pm 3.9$ ) despite the non-significant result.

**Conclusions:** Overall, our findings suggest that the developed health education package was able to slightly improve the knowledge of pregnant women. However, given the limitations of the present study, further research is still needed to confirm the role of both knowledge and health beliefs in preventing pregnancy-related UTI.