Objective: to verify the actions taken by nurses in postpartum care. Method: a descriptive and quantitative study, cross-sectional, performed in Primary Care Units. Data collection was conducted through systematic and non-participant observation in the performance of the activities taken by nurses in the care of 34 postpartum women in 2011. The study had the research project approved by the Ethics in Research Protocol No. 147/2011. Results: the puerperal consultations occurred in the surveyed units and home visits. The most prominent actions were related to breastfeeding and care for the newborn. Some actions, considered essential to characterize qualified attention puerperal, have not been developed. Conclusion: considering the importance of the actions taken by nursing in puerperal consultation, it is essential that the nurse takes her space in the consultations for the assistance becomes increasingly qualified. Descriptors: Nursing; Puerperium; Home Visit.

RESUMO
**INTRODUCTION**

The puerperium, also called of postnatal or postpartum care, is the period which begins after placental delivery until the back of the maternal organism to the pre-pregnancy conditions, capable of involution, with duration ranging from six to eight weeks.\(^1,2\) It is considered a decisive phase for the woman and her family before the need for new learning, consolidation of family unity and affection ties.\(^3\)

The qualified care at prenatal, delivery and puerperium is a powerful indicator for the reduction of maternal and neonatal morbidity and mortality in developing countries.\(^4\) Considering the social patterns and dominant society in which we live, qualified care to women in the postpartum period is neglected, although, on the other hand, motherhood is exalted.\(^5\)

It is usual the inadequate monitoring and support of puerperal characterizing the "almost abandonment" of women to their own device, which produces negative effects on the health of the mother/child binomial.\(^6,7\) Given this "almost abandonment" related to postpartum care, the nurse should provide assistance to qualified postpartum, considering their theoretical and scientific knowledge to perform competently care for low-risk childbirth.

The nurse's role in assisting women in the postpartum period is very important since it enables the construction of a bond that is identified as an issue in the humanization and qualification of attention, for the adherence and persistence of postpartum women in service health.\(^8\)

Although the effective exercise of nursing, it is common to find attitudes centered on traditional education model in which there is no time for questions and for the process of effective education between professional and client. The technical dimension of care takes priority in care to postpartum women leaving a gap in the care process, which makes a big difference for women during the puerperium period when faced with a series of doubts and difficulties to play the mother role.\(^9\)

It is highlighted the importance of nursing care, as well as the educational process to provide grants to women for gaining autonomy in their health through self-care and safety in the care of the newborn which facilitates adaptation to new family dynamics.

This article aims to highlight the postpartum care performed by nurses in Primary Care Units in Alfenas, Minas Gerais / Brazil.

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**OBJECTIVO**

- To verify the actions performed by nurses in puerperium care.

**METHODOLOGY**

Article elaborated from the dissertation << The nursing staff practice in providing assistance to pregnant and postpartum women in Alfenas/Minas Gerais/Brazil >>. Escola de Enfermagem de Alfenas, Universidade Federal de Alfenas, 2013.

A descriptive cross-sectional study, in a quantitative approach in Primary Units of Alfenas/MG/Brazil attending puerperal women by the Unified Health System.

Among the existing 23 Primary Care Units in Alfenas/MG/Brazil, four of them were selected for attending the following criteria for selection: primary care units managed by the Municipal Health Secretary of Alfenas/MG/Brazil and giving nursing care for postpartum women of the city. Thus they were selected a Primary Health (Unidade Básica de Saúde - UBS) and three units of the Family Health (Unidades de Saúde da Família - USF).

In the UBS there are two nurses to care for puerperal women and in each USF one nurse is responsible for this service. The study included all nurses (five) that meet the mothers in the units selected in Alfenas in 2011. All nurses care the puerperal women in their unit and only the nurses who work at USFs also execute the Home Visit (VD).

Data collection was carried out through systematic and not participant observation in the performance of the activities taken by nurses in the care of 34 postpartum women in the period from August to December 2011, using an instrument in the form of a checklist, prepared for the study of qualified care in the pregnancy-puerperal period in Rio Branco/AC\(^10\), its use is authorized by the author.

This instrument was prepared according to documents that bring the best scientific evidence of obstetric practice, which are: the Essential Skills to Basic Exercise of Obstetrics, prepared by the International Confederation of Midwives - ICM - 2002; Ministry of Health - Prenatal Care - 2000; WHO/OPAS: Profile of Midwifery Services in the Americas - 2004.

The observations that enabled to verify the actions performed by nurses in the care of postpartum women occurred in all units studied according to demand. The nursing care to postpartum women in USFs was also carried out through HV.
Garcia ESGF, Leite EPRC, Nogueira DA.

The quantitative data were described and summarized using descriptive statistics and analyzed in accordance with national and international documents that bring the best evidence of obstetric practice which are: essential skills to the basic exercise of obstetrics published by ICM/WHO/ OPAS; Technical Manual of Prenatal Assistance published by MS.

The data are presented in tables with absolute values and percentages and numerical variables with descriptive statistics. Statistical analysis was performed using the Statistical Software Package for Social Science (SPSS), version 17.0.

The development of this study was guided by the parameters of Resolution 196/96 of the National Health Council and Ministry of Health which provides for research involving humans. The data collection was initiated only after consideration and approval by the Ethics Committee of the Universidade Federal de Alfenas - MG-UNIFAL under Protocol No. 147/2011.

RESULTS AND DISCUSSION

Among the 34 puerperal women observed, it can be seen that this happened so unsystematic and often by opportunities, i.e., when the puerperal unit sought to vaccinate Newborn (RN) and perform the newborn screening test (Teste do Pezinho). In USFs the Home Visit (HV) is not being considered a routine activity, so it happens whenever necessary (Table 1).

Table 1. Place of postpartum consultation held by the nurses according to the Primary Care Units of Alfenas/MG, 2011.

<table>
<thead>
<tr>
<th>Consultation place</th>
<th>UBS</th>
<th>USF 1</th>
<th>USF 2</th>
<th>USF 3</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health units</td>
<td>10</td>
<td>05</td>
<td>04</td>
<td>04</td>
<td>23</td>
</tr>
<tr>
<td>Home Visits</td>
<td>-</td>
<td>02</td>
<td>04</td>
<td>05</td>
<td>11</td>
</tr>
<tr>
<td>Total</td>
<td>10</td>
<td>07</td>
<td>08</td>
<td>09</td>
<td>34</td>
</tr>
</tbody>
</table>

Since the demand for the health services by the puerperal woman is basically related to the monitoring and vaccination of newborns and not in caring herself or to be cared for someone else, it is evident the frequent lack of articulation of the basic actions aimed at promoting women's health in puerperium. In this aspect, several authors analyze the operational difficulties of SUS (Brazilian public health system) in assistance organization recommended by the Program for Humanization of Prenatal and Birth (PHPN).

Normally the puerperal attention is not consolidated in the health services, for although the vast majority of women return the unit in the first month after birth, their biggest concern, as well as health professionals, is dedicated to the newborn.

The fact that there is not postpartum scheduling consultations in Primary Care Units may be related to lack of a structured system in place of reference and counter reference showing a deficit of dialogue between primary care services and hospital for maternal and perinatal.

In order to ensure qualified care to women in the postpartum period, it is clear the need for greater responsibility on the part of health professionals, especially nurses, to encourage postpartum consultation still in pre-natal and to strengthen the return to the postpartum unit health. It’s important to highlight that the health care for women during pregnancy is only concluded after the puerperal consultation.

In this study, it is important to note the participation of Community Health Agents (ACS) in the uptake of the mothers to the USFs, since they communicate nurses about the delivery for the HVs to be carried out, strengthening the bond between them. In a study conducted in Piauí about the home care in the postpartum period highlights the role of agents and shows the good performance of these professionals as seen facilitators to the implementation of the postpartum visit once they are appointed as liaison between the healthcare team and the enrolled population.

In the Family Health Units in the town in study we observed the role of nurses in HVS since this activity is one of the strategies for family health, which is recommended in the first week after discharge.

If the newborn is classified as in risk, the visit should take place until the third day after discharge. The return of the woman and the newborn to the health service must take place on the 10th day after delivery and should be encouraged from pre-natal, in maternity and by the ACS.

The realization of HVS is in activity of great importance for the detection and/or prevention of problems that affect the orderly development of pregnancy and puerperium, not always conceivable in prenatal and postpartum consultations. In HVS is also possible to develop educational work with companions and family corroborating the need for a multidisciplinary approach in order to guide the mothers on the baby care using a strategy of accession of these families.
In home visits, the nurse should have as a priority the strengthening needed to care for women and newborns, and the development of knowledge to facilitate the adaptation of the new family member that will favor the intrafamiliar relationship with this being.1

In this perspective, we analyze that the integration of health services and users familiarize the caregivers with the socio-economic and demographic context of the population and encourage them for understanding the disease process, in order to promote viable proposals for intervention, and to improve the health and quality of life.17

The changes that occur with women during birth and postpartum periods may affect family dynamics. Therefore, it is essential the professional support to develop integrated actions on postpartum care for this woman and her family to feel supported.18

With regard to the guidelines that must be provided to puerperal women, they are related to the care of the baby and self-care, such as breastfeeding, family planning, the newborn screening test, vaccination, hygiene, nutrition and loss of blood at childbirth. Added to this it is the observation of the housing situation of the family.3

In this study we prioritized the guidelines/actions related to breastfeeding and care of the newborn as shown in Table 2. It can be seen that some actions, considered essential to characterize attention puerperal qualified, have not been developed.

Table 2. Actions performed by nurses in postpartum consultation according to the Primary Care Units of Alfenas / MG, 2011.

<table>
<thead>
<tr>
<th>Actions</th>
<th>UBS</th>
<th>USF 1</th>
<th>USF 2</th>
<th>USF 3</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>n= 10 n %</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Evaluation of surgical incision of cesarean section</td>
<td>01  10%</td>
<td>04  57,1%</td>
<td>05  62,5%</td>
<td>05  55,5%</td>
<td>15 44,1%</td>
</tr>
<tr>
<td>Evaluation of the breasts and guidance regarding AM</td>
<td>04  40%</td>
<td>07  100%</td>
<td>07  87,5%</td>
<td>09  100%</td>
<td>27 79,4%</td>
</tr>
<tr>
<td>Milking/Breast engorgement  Cares with RN</td>
<td>02  20%</td>
<td>03  42,8%</td>
<td>01  12,5%</td>
<td></td>
<td>06 17,6</td>
</tr>
<tr>
<td>Emotional contribution and care to the signs of</td>
<td>08  80%</td>
<td>05  71,4%</td>
<td>05  62,5%</td>
<td>09  100%</td>
<td>27 79,4%</td>
</tr>
<tr>
<td>postpartum sadness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The evaluation of the surgical incision performed by nurses in this study turned to the signs of inflammation. It's important to note that even the mothers who underwent vaginal delivery with episiotomy were not examined, but the professionals only asked about the odor and soreness.

Among the actions considered important for professionals involved with postpartum care there is the identification of problems and difficulties, the examination of the mother and baby with precise guidelines on the care of the newborn. This study also emphasizes the importance of assessment of lochia which were not seen in the present study.3

The assessment of the breasts with guidelines in regarding to breastfeeding was performed judiciously showing the involvement of nurses in encouraging this practice, although some studies proving the absence of the nurse as a facilitator with breastfeeding with puerperal women.9

Clear and objective guidelines on breastfeeding are issues to be addressed in educational activities throughout the pregnancy and childbirth. The success of breastfeeding is related to adequate knowledge about the position of mother and baby and in taking the nipple areola region, this skill that nurses must master.12

The women who had breast engorgement had their breasts milked and were properly guided in regard to a milking technique as a preventive measure to engorgement.

Among the issues to be addressed in educational consultation puerperal considered of greater insecurity for mothers there are those ones related to the care of the newborn.13 Educational activities performed by nurses in caring for postpartum women in this study were focused on the umbilical stump care and hygiene, which are of greater interest on the part of the population served.

A small quantity, but it drew attention in this study, it was related to nursing care offered in the HV with women who had postpartum sadness, also known as postpartum blues (5.8%). Study with topic on Sadness postpartum showed that the majority of women (68%) considered important the nursing support at home, since these professionals are able to provide precise guidelines on the care of the newborn, breastfeeding and psychological support.19

It is known that the woman in this phase is in a period of emotional instability, she is facing many difficulties, doubts and anxieties arising from their current condition, which can be minimized or clarified through a proper postpartum care. The qualified nursing care at this time is very important to restore this woman as soon as possible to her natural state.
Nursing care to puerperal women...

for this is not getting worse to the point of evolving into a postpartum depression and puerperal psychosis.

In this context, it is necessary that the aid relationship skills and empathy are developed by a professional in nursing in order to foster a positive interpersonal relationship with freedom of speech and answering questions for mothers who consider the nurse a professional who can provide clear guidelines and accurate information about their condition10.

Given the importance of the quality of care given to the puerperal woman, it is concluded that the postpartum period is a time of extreme importance in the life of a woman, it is a rite of passage that must be experienced positively and the nursing is in a privileged position with regard to assist women who experience this period, because it incorporates the art of caring in a humanized way respecting women's rights to a safe and pleasurable motherhood.16

CONCLUSION

The postpartum care consists of a special moment that should be conducted by nurses in order to monitor the puerperal woman and her family, providing educational grants and assistance to ensure support because of the difficulties inherent to the phase they are.

It was shown in this study a restricted number of puerperal care as well as actions taken by nurses in the consultations. These results enable us to identify that the postpartum consultation is not an action which is still well established in the municipality.

It is very important that nurses occupy their performance space in puerperal consultations, seeking to establish an effective interaction with the woman in front of a new series of events she encounters in daily postpartum.

REFERENCES


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