

## SLCOG 2015

## ABSTRACTS OF FREE COMMUNICATIONS

**OP 1: Prevalence of anaemia in pregnancy in the District General Hospital - Mullaithivu***Jayarathna Y R J, Piratheepan R**District General Hospital, Mullaithivu, Sri Lanka.*

**Objective:** To determine the prevalence of anaemia during pregnancy in women admitted to the antenatal ward in District General Hospital, Mullaithivu.

**Method:** Retrospective descriptive cross sectional study was done over two consecutive months, April and May 2015, using an interviewer administered questionnaire. All patients included in the study.

**Results:** A total of 347 pregnant women's bed head tickets included in the study. Age of the population ranged from 15 to 40 years with mean and median were 23.4 and 25 years respectively. Majority was primipara which was 41.9%. There was 8.7% of grand multipara. In the study population, 79.7% were in the third trimester. Overall anaemia prevalence was 40.9% and according to the severity; which mild, moderate and severe were 28.2%, 11.6% and 1.1% respectively. In the first, second and third trimesters, prevalence of anaemia was 21.7%, 42.9.6% and 43.8% respectively. Only two patients had severe anaemia, who were grand multipara in third trimester.

**Conclusions:** Prevalence of anaemia in women admitted to the district general hospital Mullaithivu was higher than the national and regional figures, which is most prominent in second and third trimester in mild anaemia category.

**OP 2: Weekly versus daily antenatal oral iron and folic acid supplementation in non anaemic pregnant women : a randomized controlled trial.***Senadheera D, Goonewardene M**Academic Obstetric Unit, Teaching Hospital Mahamodara, Galle, Sri Lanka.*

**Objective:** To evaluate the effectiveness of weekly versus daily antenatal oral iron and folic acid supplementation in non anaemic pregnant women, in preventing anaemia and iron deficiency during pregnancy.

**Method:** Non anaemic pregnant women (n=291) with gestations between 14 to 22 weeks, and who had been treated with mebendazole 100 mg twice a day for three days were randomly allocated to receive either 120 mg elemental iron and 3 mg of folic acid weekly (n=149) or 60 mg of elemental iron and 1 mg folic acid daily (n=142). All subjects were assessed for compliance and side effects at four weekly intervals and their Haemoglobin concentrations (Hb) Packed Cell Volumes (PCV) and Serum Ferritin levels (SF) were measured at 32 to 36 weeks of gestation.

**Results:** At the commencement of the study, there were no significant differences in monthly family income, educational level, age, parity, pre supplementation Hb, PCV and SF, and duration of previous haematinic prophylaxis between the two groups. Only 105 (74%) in the daily supplementation group and 107 (72%) in the weekly supplementation group completed the study. There were no significant differences in the mean duration

of supplementation during the study, between the two groups.

There were no significant differences in the post supplementation mean Hb, PCV and SF. An intention to treat analysis did not show any significant differences in the post supplementation risks of developing anaemia or Iron deficiency between the two groups. The side effects were significantly greater and the compliance was significantly less in the daily supplementation group compared to the weekly supplementation group.

**Conclusion:** In non anaemic pregnant women, weekly antenatal oral Iron and folic acid supplementation is not significantly different from daily antenatal oral Iron and folic acid supplementation in preventing anaemia and Iron deficiency during pregnancy.

**OP 3: Anaemia and Iron deficiency in pregnant women attending an antenatal clinic in a Teaching Hospital.***Senadheera D, Goonewardene M**Academic Obstetric Unit, Teaching Hospital Mahamodara, Galle, Sri Lanka.*

**Objective:** To determine the rate of anaemia and iron deficiency in women presenting for antenatal care and to evaluate the agreement between their Haemoglobin concentrations (Hb) and Packed Cell Volumes (PCV) obtained from two different laboratories.

**Method:** Consecutive pregnant women (n = 350), with gestations between 12 to 20 weeks, presenting for antenatal care had their Hb and PCV measured by Flow-cytometry and hydro-dynamic focusing methods using a Sysmex XS-500i System ( Laboratory A) and the Colorimetric method using an Auto Haematology Analyzer ( Laboratory B). Serum Ferritin (SF) was measured by electrochemiluminescence method using a Cobas-e411 Analyzer.

**Results:** The mean Hb in the subjects, obtained from both laboratories, was 11.6 ( 95% CI 11.4 – 11.7 ). The mean PCV too was similar (33.8%, 95 % CI 33.3 – 34.2 in Laboratory A vs 34%, 95% CI 33.6 – 34.5 in Laboratory B). There was good agreement between the Hb and PCV results obtained from the two laboratories. The rate of anemia (Hb <11 g/dl) was 16.9%, while 22% and 14.3% had SF < 25 µg/l and SF < 20 µg/l respectively.

**Conclusion:** Anaemia (16.9%) and iron deficiency (22%) are apparently of mild to moderate public health significance respectively, in women presenting for antenatal care. The Hb and PCV results obtained from two different laboratories are comparable.

**OP 4: A randomized controlled trial to compare sonographically measured cervical length with Modified Bishop Score in determining the requirement for prostaglandin administration for preinduction cervical ripening in nulliparae at term.***Kumarasiri M, Ratnasiri UDP**1 Obstetrics & Gynaecology Unit, De Soysa Hospital for Women, Colombo 08, Sri Lanka.*