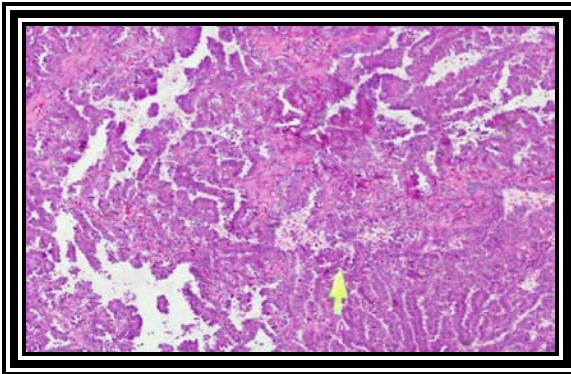
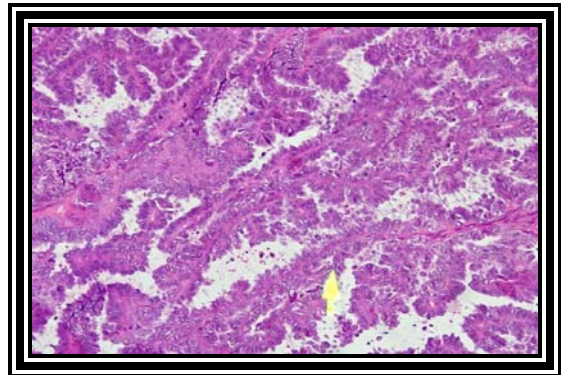
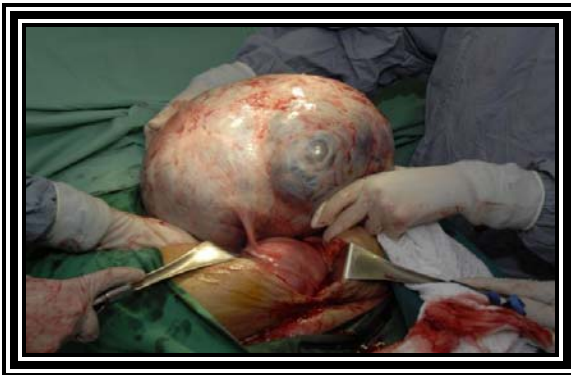


Malaysian Journal of OBSTETRICS & GYNAECOLOGY



VOL 8 No. 15
Jan-June, 2008

KDN PP 10619/3/2008
ISSN 0128-6013

The Official Journal of the Obstetrical & Gynaecological Society of Malaysia

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REVIEW ARTICLE

ENDOMETRIOSIS AND ASSISTED REPRODUCTIVE TECHNOLOGIES

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ASSESSMENT OF FETAL BIPARIETAL DIAMETER IN PREGNANT MALAYSIAN WOMEN AND COMPARISON WITH OTHER STUDIES

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ABSTRACT

Objective : *To determine the fetal parameters of the local population, namely, the biparietal diameter*

Material and Method: *This is a retrospective study on the biparietal diameter (BPD) measurement on a Malaysian population involving 1470 women which was under taken in the Hospital Pulau Pinang. The results were compared with the commonly used BPD measurement by Campbell (1969) as well as other studies on BPD measurement to see whether there was any difference between the various populations in the world*

Results: *This study showed a significantly higher BPD values for similar gestations compared to the Campbell (1969) and several other studies on other population in the world.*

Conclusion: *Each country should have their own standard BPD measurement of the various gestations for their own population.*

(Key words: Biparietal diameter, BPD, fetus biometry, Malaysia)

MATERNAL MORBIDITY IN MULTIPLE PREGNANCIES : A RETROSPECTIVE STUDY

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ABSTRACT

OBJECTIVE: To determine the incidence of multiple pregnancies and associated maternal morbidities compared to singleton pregnancies.

MATERIALS & METHODS: This was a retrospective case control study of multiple pregnancies in University Malaya Medical Center (UMMC), a tertiary health centre on all multiple pregnancies delivered between 1st January 2000 till 31st December, 2002. The controls were the subsequent singleton delivery following each of the multiple gestation delivery.

RESULTS: The incidence of multiple pregnancies was 10.94 per 1000 deliveries. There was a strong association between family history and assisted methods of conception to the occurrence of multiple pregnancies ($p=0.000$). Multiple pregnancies were found to have higher risk of anaemia at 1.179 (95% CI: 0.789; 1.763), pre-eclampsia at 1.285 (95% CI: 0.942; 1.745) and polyhydramnios at 1.628 (95% CI: 1.034; 2.564) compared with singleton pregnancies. During delivery, they had significantly higher incidence of post partum haemorrhage (25.4% vs 7.6%), higher Caesarean rate (42.4% vs 24.5%) and higher mean blood loss (478.42 ml vs 351.77 ml ($p=0.000$)). The higher blood loss was due to more bleeding during vaginal deliveries rather than a higher Caesarean rate amongst the twin gestations.

CONCLUSION: Higher rates of morbidities were recorded in multiple gestations compared to singletons pregnancies and these may have influence on their future pregnancies.

(Key words: Multiple pregnancies, maternal morbidity)

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FACTORS INFLUENCING HUSBANDS OF HIGH RISK MOTHERS TO SUPPORT FAMILY PLANNING PRACTICE

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ABSTRACT

Objectives: To determine factors influencing husband's support for family planning practices among high risk mothers in Hulu Langat district. **Methods:** A cross-sectional study was conducted among 300 husbands of high risk mothers who attended the government health clinics bringing their two to 11 months old child for immunization in the district of Hulu Langat between July and October 2006. Respondents were selected via systemic random sampling. A self-administered questionnaire was used. Husband's support was elicited by asking whether they support or not family planning practice. **Results:** Majority 272 (90.7%) of husbands claimed that they support family planning practice. However only 66.9% practiced some form of family planning. Those who supported family planning were from the younger age group (76.5%), were married at younger age (91.9%), duration of marriage less than five years (91.6%), had two or less children (91.1%), had had discussion with spouse regarding family planning (93.5%), never heard negative outcomes regarding family planning (95.6%), were influenced by family on family planning (62.5%) and knew that family planning methods were available at health clinics (93.2%). Even though all these factors were significantly associated with husbands' support, only those who had discussed family planning with spouse (AOR 9.22, 95% CI 2.97-28.67) and those who never heard negative news regarding family planning practice (AOR 6.91, 95% CI 2.57-18.60) were significant in the logistic regression model. **Conclusion:** Agreement between husband and wife regarding the importance of family planning and not receiving wrong information regarding it are important factors to ensure high risk mothers will readily accept family planning.

(Keywords: family planning, husband support, high risk mothers)

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ANTERIOR COLPORRHAPHY : A COMPARISON OF TWO SURGICAL TECHNIQUES

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ABSTRACT

OBJECTIVE: *To compare outcomes after anterior colporrhaphy with the use of two surgical techniques.*

METHODOLOGY: *This is a prospective study in a general hospital from 1st July 2003 till 31st Dec 2004. Forty- four patients with cystocele were recruited into this study. The anterior repair was performed either by standard (Group 1) or standard plus mesh (Group 2). Prolapse was staged using the Baden & Walker staging. The patients were reviewed 1 month, 6 months and 12 months post surgery. The outcomes reviewed were rate of incontinence, voiding difficulties, visceral injuries, mesh erosion and recurrence.*

RESULTS: *Twenty- two patients were recruited in each arm. Blood loss, duration of surgery, rate of voiding difficulties and incontinence were similar in both groups. However, the rate of recurrence was higher in Group 1. There was 1 case of mesh erosion. There was no visceral injury.*

CONCLUSION: *The addition of mesh did statistically improve the cure rate of cystocele with significantly lower recurrence rate.*

(Keyword: *anterior colporrhaphy, mesh in anterior colporrhaphy)*

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CLINICOPATHOLOGICAL FEATURES, TREATMENT AND SURVIVAL RATES IN PATIENTS WITH SUBOPTIMAL RESIDUAL DISEASE IN STAGE III OVARIAN CANCER IN PAKIS-ANI WOMEN

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ABSTRACT

OBJECTIVE: The aim of this study was to analyse the clinicopathological factors and survival of suboptimally debulked patients with stage III disease and to compare the results with other published data currently available in the literature

STUDY DESIGN: A retrospective review

METHOD: Medical records of 82 women diagnosed with ovarian cancer stage III in Aga Khan University Hospital (AKUH), Karachi between January 1994 to December 2000, were reviewed. The data was collected and evaluated for the relevant details including clinical, pathological and treatment information. A survival curve was obtained by using the Kaplan-Meier method.

RESULTS: The mean age of the patients was 48.9 ± 13.3 years and duration of the symptoms was 5.71 ± 10.6 months. Seventy four (90.2%) patients were married, the mean parity was 3.60 ± 2.2 and 51 (62.2%) of the patients were postmenopausal. A positive family history of cancer was found in 12 (14.6%) and 3 (3.6%) had a concomitant breast cancer. The commonest histological type of tumor was serous cystadenocarcinoma 44 (53.6%). The commonest symptom was distention of the abdomen in 64 (78.2%) and ascites was present in 58 (70.7%). Debulking surgery was carried out by general gynaecologists. All patients received cytotoxic chemotherapy. Neoadjuvantive chemotherapy was used in 10 (12%) of the cases and the rest received chemotherapy in the adjuvantive setting. The median survival of these Stage III cases was 36 months and the disease free period was 5 months. The overall five year survival rate was 23%.

CONCLUSION: Pakistani patients with ovarian cancer have outcomes comparable to what is published in the literature. Efforts are needed to detect this disease early to improve outcomes.

Keywords: Ovarian cancer, Survival, Stage III, Chemotherapy

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PELVIC ORGAN PROLAPSE IN WOMEN ATTENDING MENOPAUSE CLINIC: PREVALENCE AND RISK FACTORS

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ABSTRACT

Objectives: To determine the prevalence of pelvic organ prolapse among women attending the menopause clinic using the Pelvic Organ Prolapse Quantification (POPQ) system and to identify factors associated with prolapse.

Methods: This was a prospective observational study. Women who attended the menopause clinic at Hospital Sultanah Nur Zahirah from 1st July 2006 to 31st December 2006 were recruited. Women who were never sexually active were excluded. General biographic data was obtained and pelvic examination was done by one of the authors.

Results: A total of 274 women were examined. The mean age was 52.5 ±5.9 years (range 30 – 67 years). The overall distribution according to the POPQ system were 23.4% of stage 0, 31% of stage 1, 44.5% of stage 2, 0.7% of stage 3 and 0.4% of stage 4. Parity, gravidity, number of vaginal deliveries, obesity (BMI 25 and above), and previous history of prolapse surgery were all significantly associated with prolapse.

Conclusions: In this population of predominantly Malay women attending the menopause clinic, the prevalence of pelvic organ prolapse (POPQ stage 1 or higher) was 76.6%. Severe prolapse (POPQ Stage 3 & 4) was rare (1.1%).

(Key words: Pelvic organ prolapse, POPQ system)

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A CASE REPORT : STROKE IN PREGNANCY - A DIAGNOSTIC DILEMMA

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**HETEROTOPIC PREGNANCY: A DIAGNOSTIC DILEMMA. A CASE REPORT
AND A BRIEF REVIEW**

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