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Research Article   **Published Date:- 2020-06-30**

Triple negative breast cancer: Early stages management and evolution, a two years experience at the department of breast cancer of CHSF

Breast cancer is the most common cancer in women and is a major public health problem. It is divided into several subtypes, including triple negatives. The general objective of our study is to establish the profile and the management of patients with triple negative breast cancer over a period of 2 years, operated in our department.

During our study period, triple-negative breast cancers accounted for 10% of our population. The most affected age group ranges from 50 to 60. The majority of patients in our sample are pauciparous. In the group of patients who received hormone therapy, it was mainly HRT for 4 to 6 years. 96.77% of patients consulted a health worker within 3 months of the discovery of the signs. Adenopathies are frequently present at the time of diagnosis. 93.54% of the cases have an invasive ductal carcinoma. Triple negative cancers are essentially poorly differentiated. Triple-negative cancer has a high rate of cell renewal. In our study, neoadjuvant chemotherapy is mostly indicated for triple-negative breast cancers ? 30 mm at diagnosis and a delayed lumpectomy is then performed in 23.52% of the patients. For tumors of < 30 mm size, a lumpectomy is performed immediately in 76.47% of the patients, followed by adjuvant chemotherapy.

Mastectomy was performed in 45.16% of patients; it was mainly indicated in front of a large tumor size associated with a small breast volume, then multifocal breast tumors. Breast reconstruction was performed in 21.42%. Radiation therapy is indicated in the majority of patients, postoperatively. In our population, 11 patients were proposed to have an oncogenetic survey; it was mainly indicated based on the Manchester criteria in front of a young age and a family history of cancer. There are two BRCA 1 mutations, one BRCA 2 mutation, and one case of absence of mutation. The therapeutic intake in case of a mutation is directed towards a prophylactic bilateral mastectomy and adnexectomy, proposed at the age of 40. Two patients had presented triple negative recurrences of their already treated breast cancer; first case PDL1 positive PD-L1 ? 1% treated with immunotherapy combined with chemotherapy (atezolizumab/abraxane) while the second and second PDL1 negative treated with chemotherapy alone.

Despite their low frequency, triple negative breast cancers represent a subgroup marked by pejorative characteristics, a reserved prognosis, with limited treatment options.

Research Article   **Published Date:- 2020-06-24**

COVID-19 in pregnancy: Our experience at a tertiary maternity unit in France

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Objectives: Our main objectives are to reveal the pregnancy and neonatal impacts of COVID-19 infection and to compare it to the results that are reported in the literature.

Methods and materials: The characteristics of the admitted pregnant patients COVID-19 positive with their initial presentation, course at the hospital, and short term follow-up are exposed. Correlation of the age and gestational age with the severity of the disease was calculated.

Results: Thirty five COVID-19 positive pregnant patients presented between the beginning of March and the end of April 2020. From 5 weeks till 41 weeks of gestation, all trimesters were included. The mean of age is 32 and the BMI equal 28.2. Associated comorbidities included not only diabetes and hypertension but also PCOS. The symptomatology was considered mild in most of the cases. The distribution of the symptoms included cough in 86%. 10 out of 35 delivered and cesarean was performed in 50% of the cases. The mean length of stay is 6 days. Neither maternal nor neonatal deaths occurred. There is a significant correlation between the age of the patient and the severity of the disease but this is not the case with gestational age.

Conclusion: Our results were comparable to the literature in terms of initial presentation, associated comorbidities and the length of stay. Despite the fact that the cesarean rate was high, it was far below that of the literature. More data is still needed about COVID-19 in pregnancy.

Research Article   **Published Date:- 2020-06-24**

[Determinants of neonatal near miss among neonates admitted to Ambo University Referral Hospital and Ambo General Hospital, Ethiopia, 2019](#)

Background: Neonatal Near-miss is defined as complications of neonates so severe as to be imminently life-threatening but survived due to chance or treatment. The number of neonates who survived morbidities were approximately 3 to 6 times greater than those who died. There was little evidence about neonatal near miss in Ethiopia. This study attempted to identify the determinants of neonatal near miss among neonates admitted to the Ambo University Referral Hospital and Ambo General Hospital.

Methods: Hospital-based quantitative unmatched case-control study was conducted at the Ambo University Referral Hospital and Ambo General Hospital from March 1 to 28, 2019. The respondents, 134 cases and 268 controls were recruited by simple random technique. Data were coded, entered and cleaned in EpiInfo version 7 and exported to SPSS. Both Bivariable and multivariable logistic regression was computed at 95% CI and the final model was checked by Hosmer and Lemeshow goodness -of-fit test. Multi collinearity and cofounders were not detected.

Result: Multivariate analysis showed that distance more than 15km away from health facilities [AOR=2.11, 95% CI: (1.09, 4.095)], Unwanted, and unplanned current pregnancy [AOR=3.71, 95% CI: (1.28, 10.79)], less than four Antenatal care visit [AOR=6.55, 95% CI: (3.07, 13.98)], Instrumental delivery [AOR=4.62, 95% CI: (1.78, 11.98)] were positively associated with Neonatal Near Miss. Whereas Term Neonates [AOR= 87%, 95% CI: (0.05, 0.32)], and Normal birth weight [AOR=91%, 95% CI: (0.03, 0.28)] were negatively associated with Neonatal Near Miss.

Conclusion: Distance from health facilities, Antenatal care visit, current pregnancy type, birth weight, gestational age and mode of delivery were determinants of Neonatal Near Miss. Therefore, providing adequate Antenatal services, health education and training is needed to improve neonatal health.

Review Article   **Published Date:- 2020-05-29**

[Maternal, neonatal and children´s health in Sub-Saharan East Africa](#)

The Czech model for reducing maternal and neonatal mortality for countries in sub-Saharan East Africa was created on the basis of the Archdiocesan Charity Prague project for a specific region-subcounty Buikwe, Diocese of Lugazi, Mukono Region in Uganda, a region with about 30,000 inhabitants. The aim of the first phase of the project was to build a new hospital, equip it completely for obstetric and surgical operations from the Czech Republic, ensure its activities with Czech and Slovak doctors experts, junior Ugandan doctors and Ugandan medical staff, provide obstetric training for villagers, ensure connections with villages and possibility of fast transport and urgent solution of all acute pathologies in the hospital, capable of 24-hour surgical readiness. In the second phase of the project, a school for midwifery was to be established. This second part of the project has not yet been implemented. The project could serve as an example and guide for similar humanitarian activities in other regions of Uganda and other countries in equatorial Africa.

Research Article   **Published Date:- 2020-05-06**

[Trial of labor after cesarean outcomes with excessive gestational weight gain](#)

The success of vaginal birth after cesarean section (VBAC) has been correlated with a variety of maternal characteristics such as age, ethnicity, and body mass index (BMI, calculated as weight in kilograms divided by height in meters squared). The patient's BMI just prior to delivery has been shown to be a better prognostic indicator of success than pre-pregnancy BMI. Gestational weight gain was previously associated with a decreased rate of successful VBAC. More recent research has not supported such an association. The objective of our study was to further validate these findings with a larger population.

We performed a retrospective cohort study of women undergoing trial of labor after cesarean (TOLAC) at our institution from January 2010 to December 2019. Women were divided into three groups based on weight gain in pregnancy as compared to the American College of Obstetrics and Gynecology (ACOG) recommendations (i.e. < 25 pounds (lbs), 25-35 lbs, > 35 lbs). We further subdivided the pregnancies between term and preterm deliveries. The primary outcome was a successful VBAC. Of 1087 patients attempting a TOLAC, 772 (71%) were successful and 315 (29%) failed VBAC. When grouped according to ACOG weight gain recommendations, 303 (31%) women were below ACOG guidelines, 318 (33%) met guidelines, and 339 (35%) exceeded guidelines. There was no difference in the rate of VBAC success among the three groups. When counseling patients, providers should still promote healthy dietary habits but should not correlate excess weight gain with chance of TOLAC success.

Review Article   **Published Date:- 2020-05-02**

[Parabens: The love - hate molecule](#)

Parabens are the esters of para-hydroxybenzoic acid [1], mimicking oestrogen, the hormone which makes a woman a woman; women love it and men hate it.

Review Article   **Published Date:- 2020-04-09**

[Amenorrhea-An abnormal cessation of normal menstrual cycle](#)

Amenorrhea is the absence or abnormal cessation of menstrual cycles in a woman of reproductive age. Prolonged cessation of menstrual cycles might results in complications such as infertility, psychosocial developmental delays, Osteoporosis, fractures etc. Better understanding of physiology of menstruation is essential to understand the various causes of primary and secondary amenorrhea. Any disruption or functional abnormality in the hypothalamic-pituitary-ovarian axis can result in abnormal menstruation or amenorrhea. Therefore it is crucial to identify this menstrual distress in women at early age to minimize the risks of reproductive dysfunction in premenstrual and postmenstrual conditions.

Research Article   **Published Date:- 2020-04-09**

Timely initiation of breastfeeding and associated factors among mothers who have infants less than six months of age in Gunchire Town, Southern Ethiopia 2019

Background: Timely starting of breastfeeding is defined as the starting of breastfeeding within one hour after childbirth. Globally mothers who practiced breastfeeding within one hour were less than half in percent. In least developed countries like Eastern and Southern Africa including Ethiopia infant breastfeeding practice within one hour were low. The aim of this study was to assess timely initiation of breastfeeding and associated factors among mothers who have an infant less than six months of age in Gunchire town, Southern Ethiopia.

Methods: The study was conducted from May 1 to 28, 2019 in Gunchire town. Data were collected by using a structured face to face interview questionnaire. The community based cross-sectional study was employed on 333 women. The study participants were selected by Simple random sampling techniques. The data were coded, entered, cleaned and analyzed by SPSS with windows version 21.0. Binary and multivariable logistic regression statistical model was used. Adjusted odds ratio with 95% CI was computed to see the strength of association.

Results: In this study the magnitude of timely initiation of breastfeeding was 80.5%. Governmental employed mothers (AOR=2.914, 95% CI: 1.139, 7.46), Antenatal care follow up (AOR=5.99, 95% CI: 1.29, 27.81), Baby skin to skin contact (AOR=2.4, 95% CI: 1.092, 5.34), Vaginal delivery (AOR=5.82 95% CI: 1.68, 20.14) Institutional delivery (AOR=5.5, 95 CI%: 1.66, 18.3), Good knowledge of breastfeeding (AOR=4.02, 95% CI: 1.04, 15.59) and Breast disease (AOR=0.24, 95% CI: 0.08, 0.73) were significantly associated with timely starting of breastfeeding.

Conclusion: More than two third of the mothers timely initiated breastfeeding within one hour after birth. Being governmentally employed, having Antenatal care follows up, skin to skin contact, mode of delivery, knowledge of mothers about breastfeeding and place of delivery were positively and significantly associated with timely initiation of breast feeding, whereas, breast disease was protective against timely starting of breastfeeding. Therefore, we would like to recommend Enamore woreda health office and Gunchire primary Hospital staffs work at MCH clinic to provide appropriate services and stimulate the mothers to initiate breastfeeding, skin to skin contact enhancing within the first hour of birth.

Case Report   **Published Date:- 2020-03-27**

Effectiveness of prenatal intensive counselling on knowledge, attitude and acceptance of post placental intrauterine contraceptive device among mothers

Introduction: Contraception is a method or device used to prevent pregnancy. In the first year of postpartum period around 65% of women are having unmet need of family planning. Post Placental Intrauterine Contraceptive Device is not only advantageous to the women and couples; even the service providers benefit from PPIUCD. PPIUCD insertion on the same delivery table saves time and separate clinical procedure is not required.

Methodology: The Quantitiative Pre-Experimental One Group Pre and Post Test research design was used. 70 Antenatal mothers were selected by using Purposive Sampling Technique who fulfilled the inclusion criteria and who were available during the period of data collection at selected hospital, Puducherrry. Data was collected by using Structured Interview Schedule.

Result: The Pre test mean score of Knowledge was 9.98 ± 2.38 and Post Test mean score of Knowledge was 14.91 ± 1.15. The calculated paired 't' value was (-20.82) found to be statistically significant at $p < 0.001$ level. The Pretest mean score of Attitude was 34.67 ± 5.67 and Post test mean score of Attitude was 44.27 ± 4.70. The calculated paired 't' value was (-17.25) found to be statistically significant at $p < 0.001$ level. The Pretest mean score of Acceptance was 0.11 ± 0.320 and Post Test mean score of Acceptance was 0.29 ± 0.455. The paired 't' value of t = -3.778 found to be statistically significant at $p < 0.001$ level. The Demographic and Obstetrical Variables like age at marriage, previous childbirth and decision maker of family about family planning have shown significant association with Post Test level of Knowledge, Attitude and Acceptance of PPIUCD at $p < 0.05$ and $p < 0.001$.

Conclusion: The researcher concluded that Prenatal Intensive Counselling increases the mother's Knowledge, Attitude and Acceptance of PPIUCD. So Prenatal Intensive Counselling on PPIUCD can be given to Antenatal Mothers during their antenatal visits to meet the unmet needs of family planning.

Review Article   **Published Date:- 2020-03-17**

[Fetal Alcohol Spectrum Disorders – What does it mean?](#)

Prenatal alcohol exposure is one of the most important causes of preventable cognitive impairment in the world. The developing neurological system is exquisitely sensitive to harm from alcohol and there is now also substantial evidence that alcohol-related harm can extend beyond the individual person, leading to epigenetic changes and intergenerational vulnerability and disadvantage [1].

Research Article   **Published Date:- 2020-02-18**

[Molecular profiles of hepatotoxicity and nephrotoxicity markers in dysmenorrheic (on treatment or not) students](#)

Background: Dysmenorrhea is menstrual disorder that affects about 40% - 90% of women worldwide, it is associated with oxidative stress. The current treatment of this condition is administration of non-steroidal anti-inflammatory drugs, which when frequently used, may affect organs.

Objective: Assess the hepatotoxicity and nephrotoxicity side effects related to dysmenorrhea and its treatment

Materials and methods: A survey (questionnaire) was designed and implemented on 689 female students of the University of Dschang. After this, and following the inclusion criteria, 191 blood samples were collected for assay of hepatotoxicity markers (transaminases, albumin), nephrotoxicity indicators (creatinine, urea, total protein) and the inflammation associated indicators. The measurements were performed on fully automated Olympus AU 400 Analyzer, using standard reagent kits.

Results: Subjects with untreated dymenorrhea lasting more than five years had a significantly high level ($p < 0.05$) of ALT (39.47 ± 15.74 IU/L) and AST (44.37 ± 13.74 IU/L). Transaminases levels were significantly associate ($p < 0.01$) and positively correlate (0.251 for ALT and 0. 223 for AST) with the disease duration. Dysmenorrheic individuals on medication for more than 9 years had significantly higher ALT (25.14 ± 7.85 IU/L) and AST (35.26 ± 0.70 IU/L) levels ($p < 0.05$) compared to those under treatment for less than 5 years (19.37 ± 8.27 UI/L and 27.68 ± 8.56 UI/L). The use of analgesics, regardless of the duration of treatment, had normal creatinine clearance (107.44 ± 30.86 ml/min), compared to those treated with either anti-inflammatory drugs (71.56 ± 26.44 ml/min), or a combination of analgesics and anti-inflammatory drugs (81.34 ± 31.97 ml/min), which was significantly reduced ($p < 0.05$).

Conclusion: Dysmenorrhea duration, type and duration of treatment potentially expose participants to liver and kidney disorders.

Research Article   **Published Date:- 2020-02-13**

[Anal cytology in immunocompetent patients with high-grade intraepithelial neoplasia (CIN II and CIN III)](#)

Introduction: Anal cancer is directly related to the presence of high-grade HPV. Immunocompromised patients have defined conducts, something which is not observed in immunocompetent patients.

Objective: To study the anal cytology of patients with high-grade intraepithelial neoplasia (CINII and III) in order to propose a protocol to be followed by the Oncology Gynaecology Service at the Samuel Libânio Clinical Hospital (HCSL).

Methods: Clinical, prospective, transversal and single-centered study. Sampling was by convenience within one year. A total of 150 patients were studied. Out of these, 76 were patients with high-grade cervical intraepithelial lesions diagnosed through histopathological examination of the uterine cervix (Study Group) and 74 without high-grade intraepithelial lesions and with cervical cytology negative for neoplasia (Control Group). The following variables were analyzed: age, sexarc, tobacco use, alcohol consumption, STD history (not HPV), menopause, Hormone Replacement Therapy, anal sex practice, parity, number of sexual partners and contraceptive use.

Results: There was no significant difference between the number of cases in altered anal cancer oncology in the study group, in comparison with the control group.

Conclusion: There were changes in the anal cytology of the study group and these should be evaluated due to the risk of dealing with pre-neoplastic anal lesion. Clinical Trials: NCT03241680.

Research Article   **Published Date:- 2020-01-10**

[Oral Clindamycin and Metronidazole in the treatment of bacterial vaginosis in pregnant black women: Comparison of efficacy and pregnancy outcome](#)

Bacterial vaginosis (BV) is associated with adverse pregnancy outcomes with various treatment options.

Objective: To compare the efficacy and effect on pregnancy outcome of Metronidazole and Clindamycin in women with bacterial vaginosis in Port Harcourt, Nigeria.

Methodology: Randomized controlled study of 136 pregnant women diagnosed with BV at the University of Port Harcourt Teaching Hospital. A structured proforma was used to obtain socio-demographic characteristics and other relevant data. Treatment was with either oral Metronidazole or oral Clindamycin for seven days. A secondary test and evaluation of the effect on adverse pregnancy outcomes were determined. Data analysis was done using the SPSS statistical package version 22.0

Results: BV prevalence was 23%, with similar cure rates with both medications. The failure rates of clindamycin and metronidazole were 10.4% and 13% respectively (p = 0.639). The mean gestational age at delivery in the metronidazole treated group was 38.67 weeks ± 1.69 compared to 38.68 weeks ± 1.64 in the oral clindamycin group (p = 0.96). Pre-labour rupture of membranes and preterm delivery rates with both medications were similar (p = 0.73; OR 1.3; 95% CI 0.3-4.9) and (p = 0.73; OR 1.3; 95% CI 0.3-4.9) respectively.

Conclusion: Both medications have comparable efficacy and similar pregnancy outcomes in the treatment of bacterial vaginosis in low-risk asymptomatic pregnant Nigerian women and thus can be used interchangeably.