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perinatal mortality ratio (PMR), very low birth weight (VLBW), prematurity and 1st minute Apgar score. Correlation coefficient and regression analysis were applied.

Results: Ecological design was applied. The correlation between 2011 maternal, perinatal and socioeconomic indicators from 19 municipalities at the MRC, a region), and 17 hospitals providing obstetric care was studied. The information was collected from the Ministry of Health-DATASUS, the State Foundation on Data Analysis (SEADE) and the 2010 census (IBGE). Maternal health indicators included Maternal Mortality Ratio (MMR), fertility rate, cesarean section rate and mothers with less than seven antenatal visits. Perinatal indicators included perinatal mortality ratio (PMR), very low birth weight (VLBW), prematurity and 1st minute Apgar score. Correlation coefficient and regression analysis were applied.

Conclusions: Despite the social improvement and universal health care system in Brazil, particularly relevant for the wealthy region studied here, there are evident socioeconomic inequalities in labor and delivery care in Brazil. The worst results for perinatal indicators are present in most vulnerable populations, including women with lower level of education, and income. To improve the health care for of mothers and infants, obstetric evidence-based care, and strategies to reduce social and educational inequalities are still needed.

P0639

EXCESSIVE BLEEDING IS A NORMAL CLEANSING PROCESS: A QUALITATIVE STUDY OF POSTPARTUM HAEMORRHAGE AMONG RURAL WOMEN IN UGANDA

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Objectives: To explore community perceptions and practices towards postpartum haemorrhage among women and their caregivers. **Method:** Globally, postpartum haemorrhage (PPH) remains the leading cause of maternal deaths. In settings where many women still deliver at home under the care of unskilled attendants, uterotonic are inaccessible, it is important to understand how women and their caregivers recognize, what actions they take to prevent and treat PPH, and the meaning attached to bleeding after childbirth. Between April and June 2012, a phenomenological study was carried in a rural district in Uganda where 15 in depths interviews were conducted. Respondents were purposively sampled and included women who had delivered at home in the past year and traditional birth attendants.

Results: Bleeding after child birth was considered as normal cleansing process, which if inhibited would have bad health consequences. A range of criteria were used to recognize PPH. These were; rate of blood flow, amount of blood equivalence of hand fist, to signs and symptoms of hypovolemic shock. The respondents seemed to know the women at risk of PPH (twin pregnancies, high parity and prolonged labour).

Conclusions: Perceptions attached to bleeding after child birth and recognition of PPH suggest a delay to seeking care. To reduce delays in making the decision to seek care, there is a need to raise awareness among women and their families about the risk of death in the immediate postpartum period due to excessive bleeding.

P0640

CURRENT PRACTICE OF INTRAPARTUM ANALGESIA AMONG DOCTORS IN NIGERIA

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Objectives: The objectives of this study are to: 1. Determine the knowledge, attitude and practice of intrapartum analgesia among Doctors practicing at tertiary institutions in Nigeria. 2. Identify constraints to the practice of intrapartum analgesia to parturients in Nigeria.

Method: This descriptive cross-sectional questionnaire-based study was conducted at 3 tertiary health institutions in Nigeria. Structured questionnaires were utilized to retrieve information on socio-demographic characteristics of respondents as well as knowledge, attitude and practice of Intrapartum analgesia.

The questionnaires were administered to Obstetricians, resident doctor's as well as interns in the Department of Obstetrics and Gynaecology at the 3 surveyed hospitals located in 3 of the 6 geopolitical zones of Nigeria. The study also assessed the hindrances to the practice of Intrapartum analgesia among respondents. Data was analyzed using SPSS version 17 statistical software.

Results: The total number of respondents was 81. Majority (91.4%) were aware of several methods of intrapartum analgesia with knowledge of epidural analgesia being highest at 86.4%. Male respondents were twice as likely to have counseled a woman for intrapartum analgesia when compared with female respondents (OR=2.074).

More than half (59.3%) had never counseled patients' for intrapartum analgesia for various reasons including lack of institutional protocol, unavailability of anesthetist, and cultural belief that women would prefer to experience labour pains.

While a majority (93.8%) believed that intrapartum analgesia was important, 46.9% did not believe that it should be routinely offered.

Conclusions: Although there was a high level of knowledge of various forms of intrapartum analgesia among respondents, this was not commensurate with practice which was quite low. Lack of institutional protocol, insufficient man-power and cultural influences contribute to this. Continuing medical education of medical practitioners as well as provision of appropriate facilities and man-power will go a long way in improving the practice of intrapartum analgesia to women in Nigeria.

P0641

VISUAL ESTIMATION OF POST PARTUM HEMORRHAGE AND ITS TREATMENT

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Objectives: Postpartum hemorrhage is a leading cause of maternal morbidity and mortality that is preventive by appropriate estimation of blood loss and its treatment. This study was undertaken to evaluate the accuracy of visual estimation of postpartum hemorrhage by clinicians and co worker who work in the obstetrics department.

Method: In this descriptive observational study, 199 educational/clinical personparticipated who worked in the obstetrics department of 3 training hospital in Mashhin 2010. First characteristic of their occupation, educational and period of woexperience recorded. Then scenes similar of postpartum hemorrhage were re-built using of expired whole blood in five different volume (500, 1000, 1500, 2000, 2500, 3000 cc). Participants looked each scenes and estimated volume and necessary treatment and record in forms. Data were analyzed by SPSS software version 12 and fisher and stude-