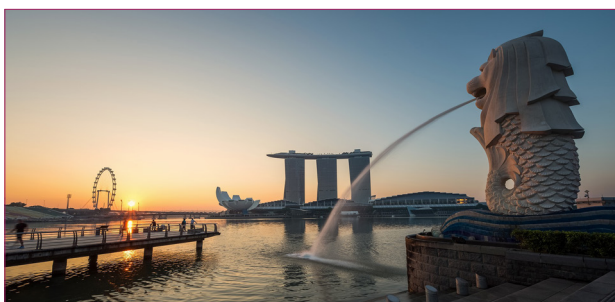


Scientific Tracks & Sessions

November 14, 2019

Gynecology 2019



4th International Conference on
Obstetrics and Gynecology
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A case of tubal schistosomiasis presenting as a ruptured ectopic gestation**Dineth Adrienne C Gutierrez**

Mary Johnston Hospital, Philippines

Schistosomiasis is a tropical disease caused by parasitic flatworms of the genus *Schistosoma* that enter the human body through the skin. The different species of these schistosomes have predilections for specific organs in the body, and signs and symptoms depend on which areas are affected. Cases of Schistosomiasis of the female reproductive tract are rare but have been seen in areas of the world where *Schistosoma haematobium*, in particular, is endemic. When Schistosomiasis involves the fallopian tubes, it produces fibrotic scars and tubal occlusion, leading to infertility and ectopic pregnancy. A thorough literature search has revealed no reported local case of tubal Schistosomiasis to date. Furthermore, the only *Schistosoma* species that has been found in the Philippines is *Schistosoma japonicum*, while the species most often isolated in tubal Schistosomiasis, in contrast, is *Schistosoma haematobium*. A case of a 32-year-old primigravid from Northern Samar, with amenorrhea of 8 weeks and 5 days, who presented with vaginal spotting and hypogastric pain is hereby reported. She underwent salpingostomy for ectopic pregnancy and was later, upon histopathological examination, found to have tubal infection

by *Schistosoma*, which was treated with Praziquantel. This case is note-worthy because of the following reasons: a) no local case reports on tubal Schistosomiasis are currently available based on literature search; b) *Schistosoma haematobium*, the major species implicated in *Schistosoma* infection of the fallopian tube, is not found in the Philippines; and c) the finding of Schistosomiasis concomitant with a tubal pregnancy in a previously asymptomatic patient is quite rare. This case report highlights tubal Schistosomiasis, despite its rarity in the Philippines, as a significant risk factor for ectopic pregnancy. Knowledge on this disease and a high index of suspicion is important in managing affected patients.

Speaker Biography

Dineth Adrienne C Gutierrez is a resident trainee in Obstetrics and Gynecology at Mary Johnston Hospital in Manila, Philippines. She obtained her undergraduate degree in Bachelor of Science in Psychology at De La Salle University-Manila and her Doctor of Medicine degree from Pamantasan ng Lungsod ng Maynila College of Medicine.

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A prospective longitudinal study of postnatal quality of life among Hong Kong women: Comparison between normal vaginal delivery and caesarean section

Maise SM CHAN

The Chinese University of Hong Kong, Hong Kong


To compare the quality of life (QOL) in Hong Kong women who gave birth by normal vaginal delivery (NVD) and those delivered by Caesarean section (CS). Women were evaluated on discharge from hospital and 4 weeks after delivery. This was a prospective longitudinal study conducted in the obstetrics unit of United Christian Hospital in Hong Kong from December 2009 to March 2010. A total of 75 women with NVD and 75 women with CS were recruited. QOL was measured by a generic questionnaire, Short Form 12 version 2 on discharge from hospital and at 4 weeks after delivery. The first questionnaire involved completion of a self-reported form, the second was completed by telephone interview. The data were analyzed using Microsoft Excel and the IBM SPSS software. On discharge from hospital, 86% (129/150) of women returned a completed questionnaire. The mean scores of physical functioning ($p=0.01$), vitality ($p=0.003$), social functioning ($p=0.003$), bodily pain ($p=0.02$), mental health ($p=0.01$), as well as physical component summary ($p=0.01$) and mental component summary ($p=0.03$)

were significantly higher in women who delivered by NVD than by CS. At 4 weeks after delivery, 75% (113/150) completed the questionnaire. There was a remarkable difference in general health ($p=0.01$), physical component summary measure ($p=0.003$), and social functioning ($p=0.05$) between NVD and CS groups. Women who had an NVD enjoyed a generally better QOL than those who delivered by CS, both on discharge from hospital and 4 weeks after delivery. NVD is recommended for women without indications for CS.

Speaker Biography

Maise SM CHAN commenced her nursing career for more than 15 years. She has practiced in various clinical settings and worked as a midwife in local public hospital for more than 7 years. She is currently training Registered Nurse at School of General Nursing of Hospital Authority. She completed her master's degree in the Chinese University of Hong Kong. Her research paper was presented in Asian Chinese Quality of Life Conference and was published in Hong Kong Journal of Gynecology, Obstetrics and Midwifery. Her professional interest focus on midwifery and nursing education.

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Diagnosing endometriosis and pelvic inflammatory disease on laparoscopy in women with unexplained infertility: The very existence of this terminology is doubtful

Sonal Agarwal

Shanti Mukand Hospital, India

The term unexplained infertility (UI) was previously used for couples in which standard investigations like semen analysis, ovulation tests and tubal patency tests were normal with a prevalence of 30-40% of total infertile population. Some minor dysfunctions like endometriosis, undiagnosed pelvic infection and subtle ovulatory dysfunctions are misdiagnosed as UI creating a dilemma whether term UI really exists or not. Scientific curiosity must come into action through hystero-laparoscopy to reach a more pragmatic approach which considers both diagnosis and treatment at the same time. The increasing necessity of identifying a specific cause of infertility has emerged due to availability of targeted interventions. Thus, it is important for couples with UI to receive individualized treatment based on their actual cause of infertility diagnosed by laparoscopy. Prospective observational study has been done from March 2016 to February 2018 for 192 women to diagnose subtle dysfunction through laparoscopy who had unexplained infertility as their differential diagnosis. The prevalence of different lesions diagnosed at laparoscopy which were not detected on 2D/3D USG/HSG was calculated. Management was done accordingly. Laparoscopically detected abnormalities were

common in both primary and secondary infertility group. Mild and minimal endometriosis was diagnosed in 41.67% females and pelvic inflammatory disease component in form of extravasation of dye and pelvic adhesions was seen in 38.5% of women. These two abnormalities were the most common in such women. Other abnormalities as sacculated tubes, para-ovarian cyst and fimbrial cyst was diagnosed in 4.2%, 2% and 3.6% cases respectively. There was no major surgical or anesthetic complication in any of our patients other than mild abdominal discomfort and nausea/vomiting. Meticulous screening of women with possibility of hidden intrauterine and extra-uterine infections should be carried out. Thus, diagnostic laparoscopy is an integral part in the evaluation of cases before tagging them as “unexplained.”

Speaker Biography

Sonal Agarwal has completed her national board fellowship in reproductive medicine from BACC Health care Milan Bengaluru. She is presently working as consultant (Infertility Specialist) at Shanti Mukand hospital Delhi. She has over 30 publications that have been cited over 100 times and has been serving as an editor/reviewer of reputed Journals.

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Autism and pregnancy: Is it preventable?

Mariam Jamil

Al Faisal University, Saudi Arabia

Autism Spectrum Disorder is an early-onset neurodevelopmental disorder characterized by qualitative impairments in social interaction, verbal and non-verbal communication combined with repetitive or restricted patterns of behaviour. The prevalence of autism appears to be increasing; although it is not entirely clear whether this increase is related to the changes in diagnostic criteria and rise in public awareness of the subject matter or whether it is due to a true increase in incidence. Although researchers have already confirmed a significant heritable component to the Etiology of ASD, the exact pathogenesis of it is still unknown. A new focus point undergoing intense studying in recent years has been Environmental exposures and their contribution to an increased ASD risk. There have been long-standing debates over various prenatal, perinatal and postnatal factors and whether they could be associated with a higher risk of ASD in the offspring. These factors range from the presence of maternal diseases/conditions during pregnancy such as Diabetes (Gestational and Pre-gestational), Pre-eclampsia, Autoimmune/Inflammatory disorders and infections to exposures during pregnancy

such as medications, chemicals, and various environmental agents. This literature review paper aims to study the pattern of Autism Spectrum Disorder in association with maternal peri-natal risk to identify modifiable risk factors during the gestational period which could be targeted to reduce the overall incidence of ASD.

Speaker Biography

Mariam Jamil is a 5th year Honor roll medical student at Alfaisal university. Alfaisal is one of the top Universities in the Kingdom of Saudi Arabia. She was drawn to Neurology after doing her clinical clerkship in neurology this year and experiencing first-hand the dynamic challenges and complexities that accompany the subject in the clinical setting. She aims to pursue a residency in neurology and work towards cognitive and behavioural Neurology as a speciality. Besides her passion for Neuroscience, her interests include studying and researching healthcare disparities and gaps in the access, quality and affordability of health care. She was also high school valedictorian and it is her dedication to the cause of improving healthcare that led her to pursue a career in medicine.

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HEV induced encephalopathy during pregnancy- Life threatening condition

Kamrun Nessa and Khaled Kaisar

BRB Hospital LTD, Bangladesh

Hepatitis E virus infection has been a major concern in the pregnant women due to its fulminant nature in pregnancy. It increases mortality and morbidity in pregnant females as compared to the non-pregnant females and males. The study was performed to evaluate the maternal and fetal outcome in pregnancy with hepatic encephalopathy due to HEV infection. All pregnant HEV Positive patients with signs and symptoms of encephalopathy admitted in the ICU of BRB Hospital Ltd during the period of January 2018 and August 2018 were included in this study. Maternal outcome in terms of acute Hepatic failure, coagulation failure, hepatic encephalopathy and maternal mortality was studied. Fetal outcome in terms of preterm labor, intrauterine fetal death, live birth was studied. In this study we found that pregnant women with HEV infection having hepatic encephalopathy had a maternal mortality rate was 16 %. Maternal death is mostly due to the coagulation failure. The most common obstetric complication was IUFD (25%) and preterm labor (16%). Continuation of pregnancy rate was 58%. There was no PPH as patients were treated by Fresh Frozen Plasma

and keeping Prothrombin Time below 17 prior induction Prophylactic intrauterine condom catheter was given in every patient after delivery. Conclusions: Mortality is high among HEV with encephalopathy. But we can reduce mortality and morbidity by using FFP and reducing serum ammonia aggressively.

Speaker Biography

Kamrun Nessa graduated with a MBBS degree from Jahurul Islam Medical College under Dhaka University, Bangladesh in May 1999. She then went on to obtain MCPS from BCPS, Bangladesh in January 2006 and FCPS from BCPS, Bangladesh in January 2007. She worked as an Assistant Professor at Emam Medical College & Hospital, India from May 2008 to October 2011 and promoted as Associate Professor at the same college from November 2011 to January 2018. She further obtained her fellowship on minimal access surgery from World Laparoscopy Hospital, India, 2018 and fellowship on ART from India in 2018. She is currently working as a consultant at department of Obstetrics and Gynecology, BRB Hospital Ltd, Bangladesh.

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The agony of uncertainty: Smooth muscle tumor of uncertain malignant potential

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Smooth Muscle Tumor of Uncertain Malignant Potential (STUMP) is a rare mesenchymal uterine tumor that is neither benign nor malignant. Its cause and risk factors remain unknown. Its clinical behavior is unpredictable, and the cornerstone of management is observation. Presented is a case of STUMP in a 47-year-old woman who had sought consult due to abdominal enlargement of two months' duration. Physical examination revealed a huge pelvo-abdominal mass extending from the hypogastric area up to the level of the umbilicus. The patient went into surgery for what was initially presumed to be a malignant ovarian new growth. Intra-operatively, however, there was no visible ovarian pathology. Instead, the uterus was noted to be enlarged to five months size, with an irregular tumor on the fundal area measuring approximately 9 x 7 x 5 cm and invading more than half of the myometrium on cut section. A post-operative diagnosis of Leiomyosarcoma was made. However, the final histopathology report revealed a STUMP.

Immunostaining for KI-67 further confirmed the diagnosis. The patient was advised to follow up after three months for close monitoring. On follow-up, ultrasound revealed the presence of an encysted fluid measuring 4 x 4.1 x 3.4 cm at the left adnexal area. Ultrasound-guided aspiration biopsy was done, which revealed chronic inflammatory pattern. The patient was advised to continue regular follow-ups every six months. This is the first case of STUMP reported at our institution.

Speaker Biography

Dineth Adrienne C Gutierrez is a resident trainee in Obstetrics and Gynecology at Mary Johnston Hospital in Manila, Philippines. She obtained her undergraduate degree in Bachelor of Science in Psychology at De La Salle University-Manila and her Doctor of Medicine degree from Pamantasan ng Lungsod ng Maynila College of Medicine.

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Surgical and medical management of a secondary abdominal pregnancy – A case report of a pregnancy in the posterior cul-de-sac

John Patrick C Publico

Mary Johnston Hospital, Philippines

Abdominal pregnancy is a rare form of ectopic pregnancy, defined as implantation of the zygote in the peritoneal cavity. Most abdominal pregnancies follow early tubal rupture or abortion with re-implantation. It accounts for approximately 1% of all ectopic pregnancies, occasionally 1 in 2200 to 1 in 10, 200 pregnancies. Worldwide, few cases were reported. In the Philippines, few cases were already recorded but no national statistical data were available up to this date. Likewise, this was the first ever case of abdominal pregnancy seen and managed in our institution. This case report aims to present case of an abdominal pregnancy managed surgically and medically. A case of a 39-year-old, Filipina, from General Santos City, Philippines who was initially seen in our institution on her 17th week age of gestation with a chief complaint of gradual abdominal enlargement. This was associated with abdominal pain, weight loss, difficulty in urination and defecation. Diagnosis of this case is based on ultrasonography and MRI. Serum beta HCG were also determined. She underwent total abdominal hysterectomy with bilateral salpingo-oophorectomy and removal of products of conception. Approximately 50% of the placenta were left

in situ and was managed with a single dose of Methotrexate intramuscular injection. Levels of serum beta hCG were serially monitored and has significantly declined from the baseline level. Post-operatively, she was hemodynamically stable and was unremarkable on her subsequent visits. Because of the rarity of abdominal pregnancies, there were no standard protocols and guidelines available. This case may possibly provide the obstetricians knowledge regarding the management of such cases in the future.

Speaker Biography

John Patrick C Publico has completed his medical degree (MD) from the Far Eastern University-Nicanor Reyes Medical Foundation in 2014. He took her post-graduate internship at the Armed Forces of the Philippines Medical from October 2014 to October 2015. He passed the Philippine physician licensure examination on March 2016. Currently, he is a 3rd year resident of the department of obstetrics and gynecology at Mary Johnston Hospital in Tondo, Manila. He aspires to render his service and expertise to the less privileged women in the rural area of his province of Palawan after the completion of his residency training.

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Hypertensive disorders of pregnancy are associated with an inflammatory state: Evidence from hematological findings and cytokine levels

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Muhimbili University of Health and Allied Sciences, Tanzania


Abnormalities of blood cell counts and of cytokine profiles in women with hypertensive disorders of pregnancy (HDP) have been reported in several studies. Although their cause-effect relationships to HDP are not yet clear, detecting and monitoring these alterations can be of use for prognosis and management of HDP. This study aimed to determine hematological, coagulation and cytokine profiles in hypertensive as compared to normotensive pregnancy and identifying correlations between these profiles. Hospital-based comparative cross-sectional study conducted from September 2017 to February 2018. There were two groups: normotensive pregnant women (n=77) attending the antenatal clinic and hypertensive pregnant women (n=76) admitted to the maternity block of Muhimbili National Hospital. Hematological and cytokine parameters were compared between these groups using Student's independent t-test when the data were normally distributed; and the Mann-Whitney U-test when the data were not normally distributed. Kruskal Wallis with Dunn's multiple comparison tests was run for subgroup analysis and correlation studies were done using Spearman ranking. Hemoglobin levels were slightly but significantly lower, ($P < 0.01$) in women with HDP compared to normotensive (N)

women; the same was true for platelet counts ($P < 0.001$). The red cell distribution width (RDW) was slightly but significantly higher in HDP than in normotensive. Neutrophil counts and Interleukin 6 (IL-6) levels were significantly ($P < 0.001$) higher in HDP than in normotensive; and within HDP IL-6 levels increased with increasing severity of HDP. A novel remarkable finding was that eosinophil counts, normal in normotensives, were lower and lower with increasing severity of HDP, to the point that they were nearly absent in women with eclampsia. There are significant changes in hematological, cytokine and coagulation parameters in pregnant women with hypertensive disorders compared to normotensive pregnant women. The picture that emerges is that of an inflammatory state associated with hypertensive disorders of pregnancy.

Speaker Biography

Mtali Y S has a Bachelor of Science in health laboratory science and recently defended his master's by research in Hematology at Muhimbili University of Health and allied sciences. He also serves as Tutorial assistant at the same university. He is an eminent researcher with one publication in a peer-reviewed journal and a member of Muhimbili university scientific conferences organizing committee.

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