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Research Article **Published Date:-2018-12-27 00:00:00**

[Immediate postplacental insertion of intrauterine contraceptive device \(copper 375\) and its complications in term of expulsion, infection and perforation](#)

Objective: To determine the complications (infection, perforation and expulsion rate) of immediate postplacental insertion of intrauterine contraceptive device (Multiload Copper375) in postnatal patients.

Methods: A case series study was conducted between October 28, 2014 to April 30, 2018 in obstetrics and gynaecology department, Civil Hospital Karachi,++ Informed consent was taken. Intrauterine contraceptive device (Multiload) was inserted immediately within 10 min after delivery of placenta. These women were observed to determine outcome (infection, perforation and expulsion) at the time of discharge and 6 weeks postpartum. Absence of all these were taken as satisfactory outcome.

Results: A total of 435 women were included in this study. 165 (38%) were delivered through cesarean section and 270 (62%) were delivered through vaginally. There were 36 (8.3%) cases of infection. The cumulative rate of expulsion and perforation at the end of sixth week of post insertion was 39 (9%) and 0% respectively and 360 (82.8%) had satisfactory outcome. Post-placental placements during cesarean delivery are associated with lower expulsion rates than post-placental vaginal insertions without increasing rates of postoperative complications like perforation, slightly increase infection rate following vaginal delivery.

Conclusions: Immediate postpartum insertion of IUCD is an effective, safe and easily reversible method of contraception. Rates of the complications (Infection, expulsion and perforation) are remarkably low.

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[The predictive value of the preoperative diagnostic tests in mature cystic teratomas of the ovary](#)

Aim: The aim of this study was to determine the sensitivity of the tumor markers and diagnostic methods used in the preoperative period for dermoid cysts, the most common benign neoplasm of the ovary.

Material and Methods: 136 patients who were operated for any reason and reported as ovarian dermoid cyst in the Department of Obstetrics and Gynecology, Ankara Atatürk Training and Research Hospital between January 2004 and September 2005 were included in the study. The medical records of the cases were obtained retrospectively from Ankara-Atatürk Training and Research Hospital, HIS, archive files and patient numbers where necessary.

Results: In the preoperative period, 119 patients underwent ultrasonographic examination, 33 underwent Computed Tomography, and 17 underwent Magnetic Resonance Imaging. 10 of the cases only underwent CT, while 3 of the cases underwent only MRI 22 of them underwent both USG and CT, USG and MRI were performed on 13 cases and only 1 case underwent all three of the imaging methods. Tumor markers were CEA, CA 125, CA 19-9, CA 15-3 and AFP.

Conclusions: The reviews of ultrasonography and / or computed tomography and / or magnetic resonance imaging (n = 132) revealed that 103 of the cases were put into operation and the sensitivity of the preoperative screening methods were calculated to be 75.5%. The sensitivity of the tumor marker CA 19-9 was calculated to be 31%.

Research Article **Published Date:-2018-11-09 00:00:00**

[Value of ambulatory blood pressure measure in pregnancy hypertension](#)

It is still not well known the prognostic cardiovascular value of 24h ambulatory blood pressure monitoring in the pregnant woman with hypertension.

Objectives: Assess to the prognostic value of ABPM parameters in predicting maternofetal event.

Methods: Retrospective and observational study which included 166 pregnant women.

Results: The authors found that the night time DBP was the best predictor of adverse events. Non-dipper profile had worse survival at follow up until delivery compared to those with a dipper profile.

Conclusions: ABPM is a tool for pregnant with HT because this is the unique method available that analyses the night blood pressure.

Review Article **Published Date:-2018-10-29 00:00:00**

[Current anesthes?a for Cesarean Sect?on](#)

The choice of anesthesia for cesarean section should depend on the urgency of the procedure, in addition to the condition of the mother and fetus. It is widely accepted that regional anesthesia for cesarean section is preferable to general anesthesia. Regional techniques have several advantages. They lessen the risk of gastric aspiration, avoid the use of depressant anesthetic drugs and allow the mother to remain awake during delivery. The most common type of regional anesthesia for cesarean section is spinal anesthesia because of its simplicity, cost-effectiveness and speed of onset. It is suitable for cases of an emergent cesarean delivery. Hypotension during spinal anesthesia is a common that is associated with morbidity for both mother and fetus. Epidural anesthesia is preferred when physicians want to minimize the maternal hypotension or when intense motor blockage of the thoracoabdominal segments is not desired. General anesthesia still leads to a higher maternal mortality and should be reserved for absolute emergencies and cases where neuroaxial blockade is contraindicated.

Case Report **Published Date:-2018-10-23 00:00:00**

[Septic arthritis of left shoulder in pregnancy following minor hand injury](#)

Septic arthritis of the shoulder joint is rare and might affect around 3% of the general population [1]. A delay in diagnosis may increase morbidity and lead to bone and cartilage destruction [2]. Septic arthritis is an unusual complication of pregnancy and can progress to permanent arthropathy and disability [3].

Septic arthropathy in pregnancy requires multidisciplinary team involvement for prompt recognition and treatment to improve both maternal and fetal outcomes. High index of suspicion is vital when clinical and laboratory findings suggest septic arthritis. There are multiple predisposing factors reported previously for septic arthritis of the shoulder in pregnancy such as medical conditions, pyelonephritis and trauma. We report a 37 year old lady who presented at 26 weeks gestation with acute left shoulder pain and high temperature following minor left palm trauma. She also had left mastectomy with axillary clearance ten years earlier. She underwent arthroscopic wash out of her left shoulder joint and was covered with antibiotics with rapid improvement and recovery. We reinforce the importance of early multidisciplinary involvement when septic arthritis of the shoulder in pregnancy is suspected especially in women who have had previous mastectomy and axillary clearance which could be a predisposing factor for such a rare and serious joint condition in pregnancy.

Opinion **Published Date:-2018-10-15 00:00:00**

[Effectiveness of the lifestyle modifications in prevention and control of sexually transmitted diseases \(STDs\): Focus on Islamic lifestyle](#)

The advancement of human researches and scientific activities in the field of diseases prevention and treatment, has not diminished the importance of sexually transmitted diseases (STDs). Despite the continuous efforts for prevention and control of them, many peoples suffers from STD with very considered wasted expenses for anybody and for community [1,2].

Case Report **Published Date:-2018-09-06 00:00:00**

[A Rare case of synchronous primary malignancies of gall bladder and ovary](#)

A malignant tumor has the capacity to grow rapidly and to metastasize to the other parts of the body. Ovary has been a common organ for secondaries caused by hematological spread of the tumor and exhibits the same histopathology as that of the primary tumor.

Very rarely, it has been found that the patients suffer from two or more histologically distinct, simultaneously detected malignancies, which are called as synchronous tumors or multiple primaries [1]. These multiple primaries can have an impact on cancer treatment (e.g., surgery) and affect the overall prognosis of the patient. Although there is no consensus on the definition of synchronous cancer, commonly two or more primary tumors that occur in a patient closely with respect to the time interval are termed as synchronous tumors [2].

Simultaneous diagnosis of gall bladder carcinoma with ovarian carcinoma with distinct histopathology is rare. A very few cases have been reported so far in literature. We discuss here a rare case that presented with synchronous tumor of gall bladder and the ovary.

Research Article **Published Date:-2018-07-31 00:00:00**

[Perinatal Morbidity & Mortality following repeat Cesarean section due to five or more previous Cesarean Section done in Tertiary centre in KSA](#)

Objectives: To highlight and determine the maternal and neonatal outcome and associated risks for patients who have undergone their 6th and more caesarean sections.

Design: Case control study.

Setting: Tertiary Centre (Security Forces Hospital – Riyadh – Saudi Arabia).

Patients: 80 patients selected to study group who have undergone their sixth and more caesarean sections in Security Forces Hospital. Between June 2006 and May 2010. This group was compared to 80 patients who have undergone their third to fifth caesarean sections during the same time period and immediately following the studied case.

Main outcome measured: Age and parity of women in study and the control group were correlated with the number of previous caesarean sections. Intra operative and post-operative maternal complications including presence and grade of adhesions, intra partum and postpartum hemorrhage, use of measurement and methods (both medical and surgical) to control bleeding such as Bakry balloon, Internal iliac artery ligation, etc., were highlighted. Bowel injury, blood transfusion, admission to surgical intensive care, incidence of placenta previa and accreta, post-operative complications like paralytic ileus, wound infection were also noted. Further, neonatal outcome including birth weight, Apgar score, and need for neonatal intensive care unit admission were reviewed.

Results: Patients in the study group had higher incidence of extensive adhesions (41.25%) compared to (12.25%) in the control group. Bowel injury was (2.5%) in study group with none in the control group. The incidence of placenta previa was (8.75%) in the study group as compared to (2.5%) in the control group, with placenta accreta complicating (28.57%) of placenta previa seen only in the study group. Blood transfusion was higher in the study group (20%) as compared to (5%) in the control group.

Neonatal admission to NICU was higher in the study group (27.5%) in comparison to the control group (12.5%). Also birth weight was lower in the study group.

Conclusion: The more the number of caesarean sections, the more the maternal and neonatal morbidity.

Patients should have proper counselling during antenatal follow up about the risks of repeated caesarean sections, and offered bilateral tubal ligation after the third or fourth caesarean sections.

Case Report

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[Small cell carcinoma of the ovary with hypercalcemia: Case report and review of the literature](#)

We describe here the case of a 23-year old woman with small cell carcinoma of the ovary of the hypercalcemic type (SCCOHT) with SMARC-A4 mutation who benefited from surgery in two steps leading to a total hysterectomy with bilateral salpingo-oophorectomy, omentectomy, pelvic and lombo-aortic lymph nodes dissection. She also received 6 courses of poly-chemotherapy after the surgery. A close follow-up was then performed by clinical examination every three months with determination of serum calcium and CA125 level as well as imaging with thoraco-abdominal CT scan. To date, the patient has a disease-free survival of more than 9 years. We also reviewed the literature on this topic and discussed the new diagnostic and prognostic genetic tool SMARC-A4 mutation.
