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Awareness and attitudes towards total cardiovascular disease risk assessment in clinical practice among physicians in southern Nigeria

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Background/Objective: Total CVD risk assessment is a cost-effective approach to guide primary preventive therapy. This study set out to determine the awareness, use, and attitudes regarding total cardiovascular disease (CVD) risk assessment in clinical practice among physicians in Port Harcourt, Nigeria.

Methods: A cross-sectional survey of 150 physicians in government hospitals and private practices in Port Harcourt city. The characteristics of 'users' versus 'non-users' of CVD risk assessment tools were compared with the Chi-Square test of significance.

Results: 106 physicians completed the questionnaires. Seventy-four (69.8%) reported being aware of tools available to assess total CVD risk. Among those aware, 87.1% agreed that CVD risk assessment is useful, 81% agreed it improves patient care, 74.3% agreed it leads to better decisions about recommending preventive therapies and 60% agreed that it increased the likelihood that they would recommend risk-reducing therapies to high-risk patients. However, 62.9% of these physicians felt it was time-wasting to use and only 21 (28.4%) actually use CVD risk assessment regularly in practice. The most commonly reported barrier was unfamiliarity with how to use risk estimation tools (52.8%). Female sex and the use of an Internet-enabled smartphone were associated with increased odds of being a 'user' of risk estimation tools (odds ratios 4.8, CI 1.4-16.9; and 5.9, CI 1.7-20.0, respectively).

Conclusion: Utilization of risk assessments in clinical practice is low. A major barrier was non-familiarity with how to use the tools. Continuous medical education and wider use of smartphone technology may represent health system approaches to tackling this issue.

NMA/ABS/2016/02

Acute kidney injury in a group of young adult Nigerians undergoing intense physical training

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Background/Objective: Rhabdomyolysis was first observed in ancient biblical times. Referred to as a "plague" following consumption of quail (Book of Numbers 11:31-35).

Crush syndrome with Acute Renal Failure (ARF) was reported during the Sicilian earthquake in Messina in 1908. The first detailed report of ARF related to the crush syndrome was by Bywaters and Beall observed in victims trapped during the London bombing in World War II (WW2). It was only decades later, in the early 1970s, that non traumatic causes of rhabdomyolysis were recognized and identified as potential causes of ARF.

The aim of this report is to highlight strenuous exercise and severe dehydration as risk factors for Acute Kidney Injury (AKI) in the tropics.

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Method: Relevant demographic and clinical data of seven (7) patients admitted for AKI were analysed including urinalysis and microscopy, haematological and renal indices.

Results: The mean age of the patients was 30 ± 4.73 years (26 -36). They were all males. Haematuria and oliguria were the commonest clinical features (83.3%) with facial swelling, fatigue and pallor (16.7%) being the least. Mean SBP was 138 ± 15.0 mmHg (120-160mmHg) and DBP 80 ± 7.01 mmHg (70-90 mmHg).

Pre-dialysis: Sodium 125.85 ± 3.94 mmol/L (121.71-130.1), Potassium 4.57 ± 1.80 mmol/L (2.67-6.4), Bicarbonate 17.0 ± 1.83 mmol/L (14-19.9), Urea 57.93 ± 6.83 mmol/L (50.76-65.1), Creatinine 2024.0 ± 421 μ mol/L (1581.61-2466.39), eGFR 2.78 ± 0.85 ml/min/1.73m² (1.932-3.63). There was proteinuria in 50% of patients and microscopic haematuria also had a frequency of 50%. They all had acute intermittent haemodialysis and all survived.

Conclusions: The risk for dialysis-requiring AKI following strenuous exercise and dehydration is high. Hence, we recommend strict screening and monitoring of individuals involved in intense physical training especially under physiologically challenging circumstances, as the risk of AKI can be significant.

Keywords: Acute kidney injury (AKI), Rhabdomyolysis, intense physical activity, dehydration

NMA/ABS/2016/03

Misuse of over the counter drugs: a study of the misuse of analgesics in Port Harcourt, Rivers state

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Background/Objective: Most drugs sold over the counter can be misused as they are bought over the counter without any prescription. This is a problem in Nigeria as most drugs except injections can be purchased over the counter. Misuse of analgesics occurs when the correct dose is not taken both in duration, dose and frequency. The aim of this study was to describe the pattern of analgesic misuse in Port Harcourt.

Research Method: A cross-sectional descriptive study using a self-administered questionnaire (n=210) conducted in 2014.

Results: Analgesic was misused by 90% of subjects, male 89.19% and female 90.17%. This is affected by educational status, no-formal education 100% and tertiary education 85.60%. Subjects in the age range 41-45 years misused analgesics more. The analgesic misused were acetaminophen 47.02%, Non-Steroidal Anti-Inflammatory drugs (NSAID) 36.57%, acetaminophen and caffeine 11.19%, and tramadol 5.22%. The commonest NSAID misused was ibuprofen 53.06%. Polypharmacy was practiced by 22.86 % (48). 10% of those taking NSAID had side effect. One of the subjects was taking more than two NSAID.

Conclusion: Analgesic drug misuse can lead to adverse effects. The cheaper the drug, the more likely it will be misused.

Key Words: Acetaminophen, Analgesic, Medication, Misuse



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NMA/ABS/2016/04

Nephrostomy using ultrasound guidance in Nigeria

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Background: Percutaneous nephrostomy is a technique in which percutaneous access to the kidney is achieved under radiological guidance. The access is often maintained with the use of an indwelling catheter. Ultrasound scan guidance has been shown to aid access into the kidney. The aim of this endeavour is to report the successful passage of a percutaneous nephrostomy using ultrasound as a guide.

Case Report: A 64 year old male who had castration resistant prostate cancer infiltrating the base of the bladder and encasement of bilateral ureteric orifices with resultant bilateral hydronephrosis for which a double J stent couldn't be passed cystoscopically. He therefore required a percutaneous nephrostomy.

Conclusion: In developing nations where cost of fluoroscopy poses a major challenge as a guide to access the kidney, ultrasound scan comes in as a cheap and effective means of access to kidney during a percutaneous nephrostomy.

Key words: Percutaneous, nephrostomy, ultrasound, challenge

NMA/ABS/2016/05

Clinical experience with progestogen only injectable contraception in a tertiary institution southern Nigeria: a ten year review

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BACKGROUND/OBJECTIVE: Progestogen-only injectable contraceptive (POIC) is a reversible and widely accepted contraceptive method. Although commonly associated with menstrual irregularities, it seems a common choice among our contraceptive users.

This study is aimed at determining the socio-demographic characteristics, acceptance, safety profile, efficacy and continuation rate of injectable progestogen contraceptives in our centre.

MEHODS: This is a ten year retrospective study of clients who accepted and used POIC at the family planning clinic of the University of Port Harcourt Teaching Hospital between first of January 2004 and 31st of December 2013. The case files of these clients were retrieved and their data extracted and analyzed using SPSS for windows 19.0 version.

RESULTS: There were one thousand and seventy five (15.35%) new acceptors of POIC out of the 7001 total new acceptors of contraception during this period. Six hundred and seventy seven (62.98%) used depot medroxyprogesterone acetate while 398 (37.02%) used norethisterone enantate. Six hundred and fourteen (57.1%) were spacers and 461 (42.9%) were limiters. Secondary amenorrhoea was the most common side effect occurring in 781 (72.7%) women. Eight hundred and fifty six (79.6%) were lost to follow-up while 57 discontinued POIC use due to pregnancy, implant insertion and complications such as weight gain. No pregnancy was reported among these women during the study period.

CONCLUSION: Progestogen only injectable contraceptive is still a common contraceptive option in our centre. Though efficacy and safety profile is relatively high, acceptance is dropping.

KEY WORDS: Injectable progestogen, Contraceptives, Decreasing acceptance, Port Harcourt



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Diagnostic yield and utilization of colonoscopy in Port Harcourt, Nigeria

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Background/Objective: Colonoscopy is the gold standard for investigating diseases of the large intestine. The practice of gastro-intestinal endoscopy is gradually evolving in our environment. The aim of this study is to describe the pattern of lower gastrointestinal disease presentation from colonoscopies in the surgical gastroenterology practice of a General surgeon.

Methods: A prospective observational study of all consecutive patients presenting for colonoscopy to two endoscopy referral centres in Port Harcourt Nigeria from July 2013 to June 2016. The variables studied were demographics, presenting complaint, endoscopic / histopathologic finding, adenoma and polyp detection rate. Data were collated and analysed using SPSS version 20.

Results: A total of 155 lower gastrointestinal endoscopies were performed during the study period with 124 colonoscopies in 95 males and 29 females. The age range was 4 to 86 years and the leading presenting complaint was bleeding per rectum. A diagnostic yield of 77% was recorded with haemorrhoids seen in 56(45%), diverticular disease 17(14%) and colorectal cancer 11(9%) cases. Transient bloatedness, abdominal discomfort and delayed diarrhoea from pre-procedure colon cleansing agent were the only complications recorded.

Conclusion: There is an increased utilization of colonoscopy by clinicians for treating gastrointestinal diseases. The practice of colonoscopy is beneficial and safe in our environment.

Key words: Colonoscopy, diagnostic yield, utilization.

NMA/ABS/2016/07

Umbilical cord torsion, intrauterine fetal death in a multipara with two precious caesarean sections: a case report

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Background/Objective: Umbilical cord torsion and other cord accidents are causes of perinatal morbidities and mortalities. Umbilical cord torsion accounts for 10 to 13% of stillbirth globally. The aim of this report is to present a rare clinical entity and create awareness on its management modalities.

Case Report: Mrs. P.O. 39 year old G4 para 2⁺¹ (2 alive) with two previous caesarean sections presented at the antenatal clinical at 36 week gestation with a 2 day history of absence of fetal movement. Intrauterine fetal demise was confirmed via a sonogram, which also showed positive Roberts' and Spaldings signs. The antenatal period was before now uneventful. She was diagnosed with an unexplained intrauterine fetal death and subsequently had an elective repeat caesarean section. The cause of death was noted to have resulted from torsion of the umbilical cord. Her post-operative period was uneventful. She was discharged on her 5th post-operative day.

Conclusion: Due to the emulsion pain expressed by parturients with antenatal fetal death, mostly in those in whom the cause of death is uncertain and unexpected, we recommend that more steps be employed in antepartum fetal surveillance, including the use of Doppler which may pick up some vascular disorders that may increase the predictability of intrauterine fetal



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death. However, in resource poor countries the acquisition of these tools may still seem far-fetched.

Keywords: Umbilical cord torsion, intrauterine fetal death, caesarean section

NMA/ABS/2016/08

Routine screening for Hepatitis B virus and human immunodeficiency virus before upper gastrointestinal endoscopy: is it necessary?

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Background/Objective: Oesophagogastroduodenoscopy is a useful tool for accurate diagnosis and treatment of upper gastrointestinal (G) tract diseases. This investigation is gaining popularity in our environment. This study aims to determine the prevalence of Hepatitis B virus and Human Immunodeficiency virus HIV infections in GI endoscopy patients while assessing the need for routine pre-endoscopy screening for these diseases.

Methods: An observational study of patients undergoing upper gastrointestinal endoscopy in an ambulatory care endoscopy centre in Port Harcourt Nigeria from February 2014 to February 2016. There was routine hepatitis and retroviral screen test before all procedures with personal protective protocol adopted in all positive cases. The variables studied were demographics, screen test results and post infection rate. Statistical analysis was done using SPSS version 20.

Results: There were a total of 126 cases of upper GI endoscopies in 62 males and 64 females. The age range was from 15 months to 85 years. Positive screening test for Hepatitis B virus was 1.6% and 0.8% for HIV. A protocol of universal basic precaution was applied in all patients and there was no recorded case of post endoscopy infection.

Conclusion: Routine pre-procedure screen for Hepatitis and Human Immunodeficiency virus is not advised. A universal basic precaution protocol is recommended for all procedures.

Keywords: Oesophagogastroduodenoscopy, Hepatitis, Human Immunodeficiency virus, Screening

NMA/ABS/2016/09

Relationship between testicular volume and sperm count in infertile men in southern Nigeria

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BACKGROUND/OBJECTIVE: The gold standard for assessment of testicular function in men being evaluated for infertility is semen analysis. There however is a relationship between testicular volume and testicular function. Scrotal ultrasound can be used to measure testicular volume and thus based on this relationship be a pointer to testicular function. This study seeks to examine the relationship between testicular volumes obtained by scrotal ultrasound and testicular function in infertile men in Southern Nigeria.

METHODS: This was a prospective study of 100 infertile men referred to the Radiology department of the University of Port Harcourt Teaching Hospital, for scrotal ultrasound examination, over a nine month period. All scrotal ultrasound scans were carried out with a Mindray DC-8 diagnostic ultrasound system using a 7.5MHz transducer. Statistical analysis was performed using Statistical Package for the Social Sciences (SPSS) 20.0. The correlation between testicular volume and testicular sperm count was evaluated using Pearson's correlation. P-values less than 0.05 were considered statistically significant.



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RESULTS: The mean testicular volume (MTV) for the study population was $13.14 \pm 5.16\text{cm}^3$. There was a statistically significant positive correlation between testicular volume and total sperm count ($r=0.397$, $p<0.0001$). There was a peak in sperm concentration at a mean testicular volume (MTV) of $25.1\text{-}27\text{cm}^3$ while severe oligospermia (sperm concentration <5 million cells/ml) was observed with MTV of 7cm^3 or less.

CONCLUSION: Testicular volumes obtained from scrotal ultrasound examination correlate positively with sperm concentration in a non-linear fashion. A mean testicular volume of greater than 7cm^3 is necessary for sperm concentrations of > 5 million cells/ml.

Key words: Testicular volume, scrotal ultrasound, sperm concentration.

NMA/ABS/2016/10

Driving patient-focused quality improvement of primary health care in Nigeria: feasibility and opportunities using the patient evaluation scale (pes)

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Background/Objective: Patient evaluation of health care is an evidenced-based approach to quality assessment and improvement but knowledge and use in Nigeria is still minimal. This report explored the rationale, mechanism and opportunities for using the patient evaluation scale for patient-focused quality improvement of PHC in Nigeria.

Methods: Secondary research involving literature review and re-analyses of quantitative data from a cross-sectional national representative exit survey of patients experiences of PHC using the *patient evaluation scale (PES)*. A series of analyses and presentation of ratings and categorical responses were reported but specifically, the colour codes of performance (red light = serious deficiencies, yellow = suboptimal, green = optimal performance) relative to cut-offs of 50 and 75th percentile of a national reference distribution were illustrated.

Result: The response rate was 98.2% (range: 96.1 – 100% among study States). Red-signals were observed in 0 to 38% and 13 – 100% of indicators across facilities when the criteria of proportion of unfavourable feedback and ratings below the 50th percentile of the reference were respectively applied. Other opportunities in using PES for patient-focused quality improvement were demonstrated.

Conclusion: This study demonstrates the opportunities in patient-based review for the development of PHC in Nigeria. The simple, clear and actionable presentation of finding will make it suitable and attractive for use by researchers, practitioners and policy makers. Policies to encourage periodic nation-wide patient surveys, benchmarking, trend analysis, performance ranking for timely problem identification in Nigerian PHC system is advocated.

Key words: Primary health care, perceived quality, patient evaluation, benchmarking, review mechanism, Nigeria

NMA/ABS/2016/11

The prevalence and predictors of generalised obesity in a rural farming community in the Niger delta region of Nigeria

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Background/Objective: Obesity, an independent risk factor for cardiovascular diseases has become a global epidemic even in the developing nations of the world. Epidemiologic transition with rapid urbanisation is an important variable implicated in the rising prevalence of obesity.



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The prevalence of this major risk factor for cardiovascular disorders like hypertension, heart failure, coronary artery disease etc has not been richly studied in the rural setting of the Nigerian Niger Delta region despite the increasing urbanisation taking place in the region. The aim of this research therefore is to determine the prevalence and predictors of obesity in a rural farming community of the Niger Delta region of Nigeria

Methods: A cross sectional study involving 388 subjects aged 15 years and above. Demographic social and relevant medical information and social information were obtained using a questionnaire administered by face-to-face interview. Anthropometric (height, weight, waist circumference, Waist-Hip-Ratio) and blood pressure measurements were done. Blood samples were taken for fasting blood sugar.

Results: The overall mean age of the study subjects was 40.88 ± 16.52 . The mean age for males was 40.66 ± 17.23 and that for females was 40.98 ± 16.17 . The male to female ratio was 1:2.1. The prevalence of generalised obesity in this study was 3.4%. The females had a higher prevalence than the males ($p = 0.02$). The prevalence of obesity found to be highest in the 50 to 59 years age group. Pearson and Spearman's rho correlation analysis of BMI with other parameters revealed that educational status, waist circumference, and hypertension had significant association while logistic regression confirmed these variables as well as physical inactivity as predictors of obesity.

Conclusion: The prevalence of obesity in this rural community is 3.4% and educational status, waist circumference and hypertension are important predictors.

Key words: Prevalence, Predictors, generalised obesity, rural, Niger Delta

NMA/ABS/2016/12

A pilot study of the sonographic measurement of the liver length in school aged children in Port Harcourt

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BACKGROUND/OBJECTIVE: Ultrasonic evaluation of the solid organs of the abdomen in children is a common and important part in the evaluation of various pathologies. Clinical palpitation of the liver is not very accurate as a means of examination of the liver. There is a paucity of local references for this environment and African as a whole while this is well established in other climes and continents necessitating this study.

METHODS: A descriptive cross sectional study was done in Port Harcourt, South-South Nigeria where 177 healthy primary students aged 5-13 years were recruited from three different primary schools after consent was obtained from their parents. Their bio data was obtained as well as their height, weight, body mass index and body surface area. The liver was sonographically evaluated and the craino-caudal length of the liver obtained. Correlational studies were done and results recorded.

RESULT: A total of one hundred and seventy seven children took part in the study. 93 (52.5%) were male, 84 (47.5%) were female. The age ranged from 5-14 years with a mean age of 8.40 ± 1.93 years and a median age of 9 years.

The mean length of the liver for both sexes was found to be $11.98 \text{ cm} \pm 16.62$ with a median length of 12.2 cm. Correlation studies showed a weak positive significant correlation of the liver length with the age ($r = 0.24$), body mass index ($r = -0.29$), weight ($r = 0.35$) and body surface area ($r = 0.34$).

No significant positive difference in the mean between males and females ($p = .003$) was noted.



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Conclusion: The normal value of the length of the liver as determined will serve as a reference standard in its ultrasonographic evaluation in the paediatric population in Port Harcourt and Nigeria as a whole.

Key words: Ultrasound; measurements; liver length; school age children.

NMA/ABS/2016/13

The usefulness of the planar pinhole ^{99m}Tc-sestamibi parathyroid scintigraphy in preoperative localization of parathyroid adenoma in patients with primary hyperparathyroidism at an academic hospital in South Africa

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BACKGROUND/OBJECTIVE: Primary hyperparathyroidism (PHPT) is an endocrine disorder with increased secretion of parathyroid hormone and elevated serum calcium level. Parathyroid adenoma is the most common cause. The introduction of preoperative localization of parathyroid adenoma using ^{99m}Tc-sestaMIBI has made parathyroid surgery minimally invasive. It becomes important to determine its usefulness in actual localization of parathyroid adenoma by correlating such with surgical and histological outcomes.

METHODS: This is a retrospective evaluation which involved electronic data retrieval for patients with biochemical diagnosis of hyperparathyroidism who presented for parathyroid nuclear scan and subsequently had surgical resection and histopathological diagnosis at the UAH. A total of 11 patients were involved in this study. Data obtained was analysed.

RESULTS: The mean age of the study group was a 55.82±15.46 year (age range of 29 years to 81 years) and females constituted 81.8% of the study group. The mean corrected calcium level was high preoperatively (2.93±0.5) but normalized post-operatively (2.29±0.3) (p <0.001) while preoperative mean parathyroid hormone level was also high (26.86 ±44.5) but normalized post-operatively (5.66± 2.2) (p <0.001). All the 11 patients had positive ^{99m}Tc-Sestamibi scan for parathyroid adenoma and 27.3% of these patients had multiple (two) parathyroid adenomas. A total of 14 parathyroid adenomas were therefore detected. The surgeons detected and excised parathyroid adenomas at locations depicted by the ^{99m}Tc-sestamibi scan for all the eleven patients and 14 sites. All of the fourteen excised tissue were subsequently confirmed by histology to be parathyroid adenoma.

CONCLUSION: Findings of this study showed accurate localization of parathyroid adenoma in all the patients as confirmed by surgery, histology and normalized post-operative corrected calcium and parathyroid hormone. Hence dual-phased ^{99m}Tc-sestamibi scintigraphy in the preoperative localization of parathyroid adenoma in patients with primary hyperparathyroidism at the Universitas Academic Hospital, Bloemfontein is a useful procedure.

NBA/ABS/2016/14

Comparison of psychiatric comorbidity and quality of life in persons with tuberculosis and people living with hiv in university of Port Harcourt Teaching Hospital

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BACKGROUND/OBJECTIVE: Tuberculosis and HIV are two chronic infective medical diseases associated with psychiatric comorbidity, which further affect the quality of life of the sufferers. The study was to determine and compare the relationship between psychiatric comorbidity and quality of life in persons with tuberculosis and PLWHIV.



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METHODOLOGY: Two hundred and thirty subjects living with HIV and 140 subjects with tuberculosis were recruited. Subjects were further administered with the study's instruments including the socio-demographic questionnaire, GHQ-12, the brief version of the WHO Quality of Life instrument (WHOQOL-Bref) and WHO Composite International Diagnostic Interview (WHO CIDI). Results were presented via descriptive and analytical methods.

RESULTS: The study found a prevalence of psychiatric co-morbidity of 19.8% among PLWHIV and 28.4% subjects to tuberculosis ($p = 0.004$). For the PLWHIV, domain scores quality of life were as follows; 60.71 ± 15.57 , 62.34 ± 26.32 , 61.57 ± 25.04 , 55.15 ± 14.00 and 65.81 ± 21.84 while tuberculosis was 57.73 ± 13.87 , 56.84 ± 46.36 , 53.37 ± 45.04 , 52.85 ± 15.10 and 49.81 ± 21.84 ($p = 0.003$) for physical, psychological, social relationship, environment domains and general health facet respectively. Furthermore, presence of psychiatric comorbidity significantly inversely correlated with quality of life among persons with both medical diseases.

CONCLUSION: The study found a statistically significant higher prevalence of psychiatric co-morbidity and lower quality of life among the subjects with tuberculosis compared with PLWHIV. Findings suggest strongly that the management of both medical conditions however should include attention to their mental health status as well as subjective quality of life of these patients in order to enhance the quality of care.

KEY WORDS: CORRELATION, COMORBIDITY, QOL, TUBERCULOSIS, PLWHIV, UPTH

NMA/ABS/2016/15

Reasons for declining use of progestogen only injectable contraceptive in a Niger delta tertiary institution, Nigeria

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BACKGROUND/OBJECTIVES: Earlier studies showed that progestogen only injectable contraceptive (POIC) is the most popular contraceptive choice in our centre. Recent review however noted a significant shift, hence the need to find out why this decline in the demand for progestogen only injectable contraception. The aim of this study was to determine the reasons for the growing discontinuation/declining acceptance of progestogen only injectable contraceptives among women assessing our family planning clinic for contraception.

METHODS: This is a ten year descriptive retrospective study of clients who accepted and used POIC at the family planning clinic of the University of Port Harcourt Teaching Hospital between the 1st of Jan. 2004 and 31st of Dec. 2013. The case files of these clients were retrieved and their bio data, desire for further pregnancy, reason for discontinuing use side effects and complications extracted and entered into a data bank and analyzed using SPSS for windows 19.0 version.

RESULTS: There were one thousand and seventy five (15.35%) new acceptors of POIC out of the 7001 total new acceptors of contraception during this period. Six hundred and seventy seven (62.98%) used depot medroxyprogesterone acetate while 398 (37.02%) women used norethisterone enantate. Secondary amenorrhoea was the most common side effect occurring in 781 (72.7%) women. Eight hundred and fifty six (79.1%) were lost to follow up while 57 (5.3%) discontinued POIC use due to desire to get pregnancy, change of choice to implant and complications such as weight gain. No pregnancy was reported among women that were compliant during the study period.

CONCLUSION: There was a significant drop in the use of progestogen only injectable contraceptive within the period of study and reasons such as opting for longer acting reversible



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contraceptives (implants and intrauterine device), complications such as weight gain and irregular menstruation; and the desire to get pregnant among others were documented.

KEY WORDS: Injectable progestogen. Contraception. Declining use. Implants. Weight gain.

NMA/ABS/2016/16

Review of medroxy progesterone for contraception in the University of Port Harcourt teaching hospital, Port Harcourt, southern Nigeria

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BACKGROUND/OBJECTIVES: Depot medroxy progesterone acetate (DMPA), a reversible Progestogen-only injectable contraceptive is the most common contraceptive choice from previous studies in this centre. Observational study tend to suggest that this preference is no longer high, hence this study. This study is aimed at determining socio demographic characteristics, acceptance, safety, efficacy and continuation rate of depot medroxy progesterone contraception in this centre.

METHODS: This is a ten year retrospective study of clients who accepted and used DMPA at the family planning clinic of the University of Port Harcourt Teaching hospital between first of Jan. 2004 and 31st of Dec. 2013. The case files of these clients were retrieved and their data extracted and entered into a data bank and analyzed using SPSS for windows 19.0 version.

RESULTS: Six hundred and seventy seven clients used depot medroxy progesterone acetate out of a total of 7001 new acceptors of contraception during this period; giving acceptance rate of 10.3%. Three hundred and fifty three (52.1%) were spacers while 324 (47.9%) were limiters. Secondary amenorrhea was the most common side effect occurring in 503(74.3%) women. Four hundred and eighty two (71.2%) were lost to follow up, continuation rate was 22.5% while 43(6.5%) discontinued DMPA (that is, for every 4 that is continuing, 1 discontinue). No unplanned pregnancy was reported in these women during the study period.

CONCLUSION: Though depot medroxy progesterone remains a common choice of contraception among our clients, discontinuation rate is marked and lost to follow up huge; apparently due to multifaceted reasons which include its side effects, a change to longer acting contraceptive and desire to get pregnant.

KEY WORDS: Depot medroxy progesterone, Contraception, Port Harcourt.

NMA/ABS/2016/17

Risk factors for psychosocial hazards among workers in a tertiary institution in Nigeria

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BACKGROUND/OBJECTIVES: Work place Psychosocial hazards are assuming a central place in occupational health and safety, especially in developing countries like Nigeria. Psychosocial hazards refer to the mental stresses including all sources of fatigue and stress caused by work, work structure, design and regulation that affect output and employee's wellbeing and health. A number of risk factors may predispose workers to certain work place hazards. The study was to assess the possible risk factors for psychosocial hazards among Workers at the University of Port Harcourt.



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METHODOLOGY: Ethical approval for the study was obtained and 600 consenting staffs of the University of Port Harcourt were recruited by systematic random sampling and a risk Matrix which is a validated instrument (interviewer administered) as well as a pretested structured closed ended self-administered questionnaires were distributed among respondents. Results were presented using descriptive and analytical methods.

RESULTS: From the study, risk factors for Psychosocial Hazards included work load with 548 (98.2%), followed by home-work interface with 458 (82.0%), lack of possibilities to advance forward 392 (70.1%), lack of career development 327 (58.7%), work content with 329 (60%) while constant state of alertness (CSA) was the least with 98 (17.6%).

CONCLUSION: There is need for the University to institute appropriate occupational health and safety measures to address preventable risk factors and reduce the harmful occurrences of psychosocial hazards in the institution in order to improve the working environment, productivity and health of workers.

Key Words: Risk factors, psychosocial hazards, workers

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Willingness to pay for clinical preventive services of patients attending the general out-patient clinic of a tertiary hospital in south-south Nigeria

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Background/Background: Non-communicable diseases are now very prevalent in Nigeria, but the uptake of clinical preventive services (CPS) that have been shown to be very effective in their control has been very poor. The poor uptake has been linked to factors that include the cost and delivery of the services. This study assessed the willingness of respondents to pay (WTP) for a packaged CPS, delivered in one service point.

Methods: The study was conducted in patients attending the General Out-patient Clinic of the University of Port Harcourt Teaching Hospital, Port Harcourt, using a descriptive cross-sectional study design. Data was collected using a semi-structured interviewer-administered questionnaire, and assessed the respondents' attitude towards CPS and their WTP for the services, which was determined using the contingent valuation method.

Results: A total of 422 questionnaires were administered and analyzed. The respondents had an average age of 36.04 ± 1.99 years; majority had at least secondary school education (90.05%), were Christians of Pentecostal denomination (50.95%), self-employed (52.13%), with an monthly average income of more than N50, 000 (56.64%). More than a third of the respondents (35.31%) had patronized some form of CPS in the past, but would prefer more thoroughness (66.44%) and shorter waiting time (28.19%). Most (89.57%) of the respondents were willing to pay for CPS. More than a quarter (25.93%) were willing to pay the prevailing cost of assessing the services from the multiple service points in the hospital, 33.84% were willing to pay less, while 34.28% were willing to pay more. The monthly income of the respondents significantly affected their willingness to pay for the services (p-value = 0.000).

Conclusion: The respondents showed a willingness to pay for packaged CPS. The uptake of the services can be improved if the price is subsidized, and is therefore advocated.

Keywords: Non-communicable diseases, Clinical Preventive Services, willingness-to-pay, General Out-patient Clinic, south-south Nigeria

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Knowledge, attitude and use of clinical preventive services among patients attending the general out-patient clinic of a tertiary hospital in south-south Nigeria

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Background/Objective: Non-communicable diseases are now very prevalent in Nigeria, but the uptake of clinical preventive services (CPS) that have been shown to be very effective in their control has been very poor. The poor uptake has been linked to factors that include improper knowledge and poor attitude towards the services. This study assessed the knowledge, attitude and use of the services, as part of formative research for a social marketing programme for the services.

Methods: The study was conducted in patients attending the General Out-patient Clinic of the University of Port Harcourt Teaching Hospital, Port Harcourt, using a cross-sectional study design. Data was collected using a semi-structured interviewer-administered questionnaire.

Results: A total of 422 questionnaires were administered and analyzed. The respondents had an average age of 36.04 ±1.99 years; majority had at least secondary school education (90.05%), were Christians of Pentecostal denomination (50.95%) and self-employed (52.13%). Most (76.30%) of the respondents were aware of at least one form of CPS. All believed that CPS are effective in the prevention of non-communicable diseases, but only 18.25% believed that CPS alone would be enough to prevent the diseases. The religious denomination of the respondents significantly affected their conviction in the effectiveness of CPS (p-value = 0.000). More than a third of the respondents (35.31%) had accessed some form of CPS, and they did that for reasons that include the symptoms they felt (37.58%) and the pressure put on them by friends and relatives (32.89%). The respondents that did not access the service gave reasons that include believe that the services are not very effective in preventing the diseases (39.31%) and the fear of positive result (26.59%).

Conclusion: The awareness of the respondents of clinical preventive services is high, but the uptake of the services is poor. Concerted effort is therefore required to increase the uptake of the services.

Key words: Non-communicable diseases, Clinical Preventive Services, knowledge, attitude, use, General Out-patient Clinic, south-south Nigeria

NMA/ABS/2016/21

An assessment tool for the prevention of untimely death in Nigeria

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Background: Disease pattern in Nigeria is changing from communicable diseases to non-communicable diseases. However, the approach to patient care used in hospitals have not changed, neither have the expectations of the general public for the quick recovery of patients treated in the hospitals. These have resulted in poorer treatment outcomes and patients' dissatisfaction that sometime result in discharge against medical advice and medical tourism. This sad state of affair is not because of poor medical expertise, but the persistent emphasis on



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acute care, which is almost useless in the management of the emerging health problems. Prospective medicine is being advocated to ensure that the threats to life are identified long before they become hazardous, and a health risk assessment tool is a recognized way of making the routine medical check-up convenient and cost-effective.

The assessment tool: This tool is developed to identify and manage all the possible causes of injury, disease and death in Nigeria, through the intelligent use of a validated composite questionnaire, elaborate physical examination and a battery of medical tests. The causes of injury, disease and death assessed in the tool went beyond the traditional medical purview to include such social problems as inter-personal violence, which is a growing cause of untimely death in Nigeria. This ensures that all the possible causes of injury, disease and death are identified and managed in a systematic manner. This facilitates the development of a personalized health plan for the client that can serve as a roadmap for a long and healthy life; and ensures the mainstreaming of such important lifestyle changes as smoking cessation, self-care and weight loss programs in patient management.

The assessment tool is easy to use: The health risk assessment questionnaire can be self-administered, and can even be done through the internet; while the rest of the tool are structured to guide the health care provider (not necessarily a doctor) through the rest of the assessment. However, specialist input is needed in the interpretation of the results, and in the packaging of the personalized health plan for the client.

NMA/ABS/2016/22

The use of cassava-based Nigerian staple foods in the prevention and management of Non-communicable diseases in Nigeria

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Background: The epidemiological transition has firmly berthed in Nigeria, with the rising prevalence of various non-communicable diseases, in almost every community in Nigeria. Diet and nutrition are known drivers of this transition. Cassava based staple foods are considered as “super foods”, especially in southern Nigeria and eaten at least once a day. This review article discussed the possible ways cassava-based staples can be processed and/or stored for the control of the emerging non-communicable diseases.

Materials and Methods: Data for the review were collected from peer review journals and include information required to improve the nutritional value of the cassava-based staples, those needed to reduce their glycaemic index and microbial and chemical hazards, and those required to process and store them into forms that are better suited to life in urban centers.

Results: Cassava contains deadly cyanogens, rich only in carbohydrates and grossly deficient in other nutrients, but has an annual per capita consumption in Nigeria of 120kg. These have been linked to malnutrition, konzo, goiter and tropical ataxic neuropathy; which can be prevented if the cassava is enriched with the deficient nutrients, possibly using genetic modification, and fermented for at least three days. The cassava-based staples also have high GI, which can be reduced by re-processing them to retain more chaff, dehydrating the wet variety, and eating them with soups rich in leafy vegetable. The staples should be stored in packages that limit the growth of pathogenic micro-organisms; and marketed in forms that are convenient for the urban population.

Conclusion: Cassava-based staples have a prominent role to play in the fight against non-communicable diseases in Nigeria, especially if all the identified hazards in them are corrected.



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The processing of palm oil for the prevention and control of Non-communicable diseases in Nigeria

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Background: The prevalence of noncommunicable diseases has continued to increase in Nigeria, as predicted by the epidemiological transition theory. The successful management of these diseases depends on the identification and control of their risk factors. The search for the possible risk factors should extend beyond the usual culprits, as the emergent epidemic seems to be indiscriminate. Palm oil is the most commonly used cooking oil, but has been linked to several non-communicable diseases, mainly due to its saturated fatty acids content. This review article is to explore possible ways of making the palm oil cardiovascular friendly.

Materials and Methods: Data for the review were collected from peer review journals and include information on the fractional composition of palm oil, the link with non-communicable diseases, the plausible reasons for the continued use of palm oil in Nigeria and options for the production of palm oil with lesser saturated fatty acids.

Results: Palm oil is made up of 95% fatty acids, with saturated and unsaturated fatty acids in about the same proportion. It also contains significant concentrations of carotenoids, tocopherols and other phytonutrients. The consumption of palm oil was shown to increase blood cholesterol level; and its substitution with oil rich in unsaturated fatty acids resulted in a significant decrease in the prevalence of hypercholesterolemia and coronary heart disease. But its abandonment would result in energy and micronutrient malnutrition, hence the need for a blend of palm oil that contains less saturated fatty acids. This can be realized using genetic modification and temperature driven fractionation of the oil.

Conclusion: Palm oil in spite of its saturated fatty acids content still has a significant role to play in the management and control of non-communicable diseases in Nigeria, especially with the reduction of its saturated fatty acids content.

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Can palm wine metamorphose into a health drink?

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Background/Objective: As the prevalence of non-communicable diseases continues to increase in Nigeria, efforts at finding effective control measures should extend to seemingly contradicting areas. Palm wine is widely drunk in southern Nigeria, where it is portrayed as a social lubricant. This review article explored ways of repackaging this traditional beverage, for the prevention and management of the emerging non-communicable diseases.

Materials and Methods: Data for the review were collected from peer review journals and include information on the composition and fermentation process of the wine, the health implications of the constituents, and the information required to repackage and market the wine to meet the objectives.



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Results: Palm wine is a heavy suspension of largely non-pathogenic yeasts and bacteria that do not support the growth of most pathogenic organisms. It is made up of more than 90% water, 4.14% carbohydrate, 0.14% protein, several minerals, some flavonoids and a variable concentration of alcohol. The polyphenol content of palm wine is comparable with those of conventional wine, and palm wine has been shown to cause up to a 21.8% decrease in gastric acid secretion, hence can be useful for peptic ulcer patients. Palm wine also has some anti-sickling properties, and the ability to reduce the osmotic fragility of the sickle cell, which can be beneficial to patients with sickle cell disease.

Conclusion: Palm wine has several health benefits that can be harnessed for the control of the non-communicable diseases, especially if it is stopped from fermentation. The low alcoholic palm wine should therefore be promoted for widespread use, using the social marketing technique.

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