NIGERIAN MEDICAL ASSOCIATION (NMA) ANAMBRA STATE

2022 ANNUAL SCIENTIFIC CONFERENCE AND 4TH LATE EMERITUS PROF. FESTUS AGHAGBO NWAKO MEMORIAL LECTURE

BOOK OF ABSTRACTS



23-June 2022 NMA House, Chukwuemeka Odumegwu Ojukwu University Teaching Hospital Awka, Anambra State

EDITED BY Okechukwu H Ekwunife Jideofor O Ugwu

DOI: 10.5281/zenodo.7525548

Burden of care and quality of life of caregivers of persons with schizophrenia in a Nigerian tertiary hospital: A cross-sectional study.

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Objective: This study assessed the relationship between the burden of care and the quality of life in carers of individuals with schizophrenia.

Methodology: This was a cross-sectional study involving two hundred and forty-six adult participants (outpatients with schizophrenia and their caregivers in ratio 1:1) in a psychiatric hospital. Patients between the age of 18 – 65 years, and their caregiver who were greater or equal to 18 years were recruited via consecutive random sampling. The Mini International Neuropsychiatric Interview (MINI-6), Brief Psychiatric Rating Scale (BPRS) and demographic questionnaire were used to confirm the diagnosis of schizophrenia, obtain the severity of psychopathology and demographic data of the patients respectively. The Zarit Burden Interview (ZBI) and WHO Quality of Life-Bref scale (WHOQOL-BREF) were deployed to obtain information on caregivers' care burden and their subjective quality of life respectively.

Results: One in five of the caregivers' experiences moderate-severe burden of care. Caring for unemployed patients (p= 0.03) and patients with severe psychopathology (p= 0.01), older age of caregiver (p = 0.033) and being a parent (p= 0.01) were significantly associated with high burden of care. The caregiver burden was found to be significantly negatively correlated with their quality of life.

Conclusion: The quality of life of carers of individuals with schizophrenia significantly, positively correlated with high level of care burden. We recommend that clinicians should endeavor to address some modifiable correlates, such as reducing the patients' illness severity and liaising with occupational therapists to empower patients with employable job skills.

Key words: Caregiver burden; Quality of life; Schizophrenia, Illness severity, Nigeria.

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Epidemiology of cryptosporidiosis in HIV positive patients treated in major tertiary/secondary hospitals in Rivers state, Southern Nigeria

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Objective: To evaluate the epidemiology of Cryptosporidiosis in HIV positive patients undergoing treatment at University of Port Harcourt Teaching Hospital(UPTH) and Zonal Hospital Ahoada (ZHA), Rivers State, Southern Nigeria.

Methodology:250 HIV positive patients were randomly recruited for the study consisting of 101 males and 149 females. Demographic data/information was obtained using a well-structured self –administered questionnaire. Stool samples were collected from each of the patients by standard methods. Modified Ziehl Neelsen (MZN) technique was employed to stain thick stool smears which were microscopically examined under high power magnification for the diagnosis of Cryptosporidium species oocysts.

Results: Out of the 250 samples, 19 were positive giving a prevalent rate of 7.6%. The age group with the highest prevalence (2.4%) was 30-40 years followed by 26-30 years (1.6%). The prevalent rate in females (5.6%) was significantly more than that of males (2%) (P < 0.05). Farmers were significantly more affected (3.2%) than other occupational groups (P < 0.05). Patients whose source of domestic water was bore hole had the highest percentage (89.5%) of infection. Personal hygiene (hand washing) had a significant effect on infection rate. Diarrhoea was the most frequent presentation of the disease.

Conclusion and recommendation: Cryptosporidiosis was prevalent in HIV positive patients who presented in UPTH and ZHA in Rivers State, Southern Nigeria. Strict environmental sanitation and provision of portable water are public health measures recommended to reduce the prevalence of this disease especially in HIV/AIDS patients.

Key words: Cryptosporidiosis, epidemiology, HIV, Rivers, Nigeria

Pattern of psychopathology and neurological soft signs among first episode psychotic patients in Neuropsychiatric Hospital, Sokoto

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Aim: To determine the prevalence and pattern of psychopathology and NSS among patients with FEP, and compare the prevalence of NSS with First-Degree Relatives (FDRs) and a healthy control group (HCG).

Methodology: A cross-sectional study of 606 participants, of 3groups, namely, participants with FEP, their FDRs and a HCG were consecutively enrolled. Psychopathology was assessed with Psychosis module of Mini International Neuropsychiatric Interview and Brief Psychiatric Rating Scale. NSS was assessed with 26-item Neurological Evaluation Scale (NES).

Results: Schizophrenia was the most frequent FEP diagnosis (39.1%). The prevalence of NSS in FEP, FDRs and HCG were: 100%, 95.0% and 47.0%, respectively. Participants with antipsychotic-naïve FEP showed 100% prevalence in all components of motor sequencing, more than 70% in all components of sensory integration, and more than 50% in major components of motor coordination and primary NSS. Negative symptoms dimension correlated with number of NSS (r=0.4) and NSS total score (r=0.3), while anxiety/depression dimension correlated negatively with number of NSS (r=-0.3) and NES total score (r=-0.2).

Conclusion: The findings of this study underscore the consideration of NSS as a viable marker for FEP.

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Synchronous splenic and intracerebral abscesses in a child: a case report

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Splenic abscess is a life threatening condition which is very rare in children. There is usually an infective focus or predisposing factors such as immunodeficiency towards developing splenic abscesses. Only one case of splenic abscess with brain abscesses in an adult has been reported in English literature.

We therefore report a case of an 11-year-old boy who was otherwise healthy but presented with fever and weight loss of two months' duration, right upper abdominal pain, vomiting, hypochondrial tenderness of 1-week duration, and later on developed a left hemiplegia and right facioparesis two days prior to presentation.

Diagnosis of splenic abscess and right intracerebral abscesses were confirmed with abdominopelvic ultrasound scan, abdominal and cranial computerized tomographic scans. He subsequently had percutaneous ultrasound guided drainage of the splenic abscess which was not successful necessitating splenectomy with aggressive antibiotics treatment to which the patient responded to with resolution of the brain abscesses and full recovery of power in all the limbs.

This report is aimed to highlight the need for increased suspicion of splenic abscesses in children who are apparently immunocompetent and to add to the knowledge of management of this rare condition in children

We conclude that splenic abscesses with intracerebral abscess is a rare but life threatening condition which is amenable to treatment with drainage of abscess and aggressive guided antimicrobial therapy

Medical errors: knowledge and perception among doctors practicing in a state in South-East Nigeria

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Objective: To evaluate the knowledge and perception of medical errors among doctors practising in Anambra state.

Methodology: This is a cross-sectional study. The study instrument was self-administered questionnaire distributed between August 2021 and January 2022. Data was analysed using SPSS version 25 Demographic variables like age, gender, cadre of practice and years of post-graduation were obtained, Outcome variables were knowledge of medical errors, committal of medical errors in the past, common areas of medical errors, frequency of disclosure among respondents, and attitude towards disclosure and psychological disposition after error

Results: A total of 239 doctors partook, 84.1% were males. The mean age in practice was 38.0+/-10.7 years. Resident doctors accounted for 42.4% of the respondents. The respondents were 11.1 +/- 9.9 years' post-graduation. About 97.5% were aware of medical errors, while 89.1% agree that many doctors do commit medical errors. Medical prescription and Laboratory result ordering error where the most known medical errors. Only 71% believed that life threatening errors should be disclosed to the relatives. Among the respondents, only 66% admitted to have ever committed medical errors with wrong diagnosis and wrong prescription being the most common areas of error. Disclosure was very frequent in 8.2%, while 6.8% disclosed somewhat frequently, 42.2% occasionally, 19% somewhat infrequently, 23.8% very infrequently. Attitude towards disclosure was positive in 64.5%. Self-reported psychological disposition after medical errors was: Depression (65%), Anxiety (60%), Indifference (10.5%). One respondent had faced the law and was indicted.

Conclusion: Medical errors awareness is relatively high. Wrong diagnosis and prescription errors rank highest among the participants. There is need for institutional, team and individual approach to reduce these errors.

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Common ailments at presentation and outcome of management of under five children at Mother of Mercy Mission Hospital Umuna Orlu Imo State South east Nigeria (a 5-year retrospective study (1st January 2015 to 31st December 2019)

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Aim: To evaluate diagnosis at presentation and outcome of management of under five children at Mother of Mercy Hospital Umuna Orlu Imo State South East Nigeria.

Methodology: A retrospective study of diagnosis at presentation and outcome of management among under five over five years' duration (1stJanuary 2015 to 31stDecember 2019). A proforma was used to collect data from the folders of the respondents and data was analyzed using Statistical Package for Social Sciences (SPSS) version 20 IBM U.S.A. Results were presented in frequency tables, bar charts and pie charts.

Results: A total of 359 patients were studied. They were 215 (60%) males and 144(40%) females with the greatest respondents being children within the age range of 1-3 years (36%) and the least respondents were children within the age range of <1month. The commonest diagnosis at presentation was malaria 118(33%), diarrhea

disease 72(20%) upper respiratory tract infection 40(11%) other infections 129(36%). A total number of 154(43%) of the respondents were admitted into the ward and the major cause of admission was malaria. All patients were admitted through the clinic. There were 151(73%) discharges on getting well, 13(6%) patients were discharged against medical advice 21(10%) were referred to other centers and about 22(11%) deaths were recorded and it mostly occurred in children aged 1-3 years. The outcome of management of patients who presented as outpatient were not documented as they either got well or disappeared to follow up.

Conclusion: Malaria, diarrhea disease, upper respiratory tract infection and other infections were the major presenting problems among the under-five age group evaluated by the study

Key words: Ailments, diagnosis, presentation, outcome, management, under-five's, Orlu.

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Outcomes of pterygium surgery with anti-fibrotics

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Aim: To compare the outcomes of pterygium surgery performed with adjunctive bevacizumab and mitomycin C.

Methodology: Design: Prospective cohort study.

Outcome measures: Post-operative complications; post-operative visual acuity

Consecutive adult patients with pterygium seen at St Joseph Eye Hospital Mgbirichi in August-October 2019 were recruited into the study. At surgery they were randomized to receive either topical mitomycin C (0.02%) or sub-conjunctival bevacizumab (2.5mg/0.1ml) during surgery. One surgeon performed all the surgeries using bare sclera technique. Each patient was followed-up for 6 months for evidence of complications; pre- and post-operative visual acuities were also evaluated. Study was approved by Nnamdi Azikiwe University Teaching Hospital Research Ethics Committee.

Results: Ninety patients comprising 39(43.3%) males and 51(56.7%) females with mean age -55 \pm 4.0 years, range - 30-70 years, were studied. Complications at 6 months' post-surgery were persistent redness, 17 (18.9%); recurrence, 13(14.4%), granuloma, 2(2.2%). The recurrence rate significantly was less for mitomycin C, 2(4.4%), compared to bevacizumab, 11(24.4%) [Risk Ratio - 6.0; p<0.001]. Visual impairment reduced from 41.1% pre-operatively to 3.3% post-operatively (Risk Ratio - 2.5; p<0.05).

Conclusion: Study demonstrated good outcomes both in terms of minimal post-operative complications and improved post-surgery acuity. But mitomycin C is more effective in preventing recurrence.

Rapid point of care diagnosis of malaria among children presenting to the children emergency room of NAUTH, Nnewi- a preliminary report

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Objective: To determine the prevalence and associated factors of malaria among children that present to the Children's Emergency Room (CHER) of Nnamdi Azikiwe University Teaching Hospital, Nnewi using a rapid test kit.

Methodology: This is a preliminary report of a cross-sectional study conducted among children aged 0-18 years presenting at the CHER of NAUTH, Nnewi. Data on sociodemographic profile, temperature on presentation and malaria parasite rapid diagnostic test (MP-RDT) results were obtained using semi-structured questionnaires. Data analysis was done using STATA 16.0, means, frequency and percentages were calculated. Cross-tabulation was done for variables using Chi square (and Fisher's exact tests of association) where applicable, with level of significance for tests of association set at p <0.05.

Result: Sixty-six children participated in the study, out of which 40(60.6%) were males. The mean age of participants was 3.1 ± 1.1 years,31 (47.0%) children were febrile, with an axillary temperature above 37.4° C, while 35(53.0%) were afebrile. Only 10 (15.2%) of participants had a positive MP-RDT. Nine of the 10 positive participants (90%) were males. Prevalence of malaria among males is 9/40 (22.5%), compared to 1/26 (3.8%) among females. Gender significantly influenced MP-RDT (p= 0.039).

Conclusion: Malaria is more common among males. Reasons for this need to be explored. Presence of fever did not connote malaria.

Prevalence and vaccination status of hepatitis b surface antiginaemia among secondary school children in Onitsha

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Objectives: The aim of the study was to determine the prevalence of Hepatitis B surface antigen, sociodemographic factors and vaccination status against Hepatitis B Virus (HBV) in secondary school students in Onitsha.

Methodology: A cross sectional descriptive study in secondary school's students in Onitsha, South East Nigeria was carried out. The subjects were recruited using a multi-staged sampling technique and their HBsAg status was determined using the Monalisa™ HBsAg Ultra ELISA kit. They were given pre-tested questionnaires to fill at home with their parents and return.

Results: Of the 751 students assessed, 57 were sero-positive to HBsAg giving a prevalence rate of 7.6%. The sero-prevalence was highest in the age group 14-16years, more in males than females and lower in the high socioeconomic classes. Only 4.3% of the study group had received HBV vaccination and 93% of those who were seropositive to HBsAg had not received the protective vaccination.

Conclusion: High endemicity of Hepatitis B in the study population is a matter of grave concern and requires urgent action if Nigeria is to meet up with the WHO global hepatitis strategy of eliminating viral hepatitis as a public health threat by 2030. Asymptomatic HBV infection makes these children susceptible to chronic complications and they can become reservoirs for horizontal transmission. The introduction of routine testing for HBV in the school health program at the point of entry, prompt treatment of infected individuals and vaccination of unvaccinated adolescents and high risk groups against HBV will be an effective way of controlling the high prevalence of HBV infection in this population.

Reproductive health challenges of rural female adolescents in South Eastern Nigeria

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Objective: To determine the reproductive health challenges of female adolescents in a rural local government area of South Eastern Nigeria.

Methodology: A cross-sectional study of 250 female students of schools within Aniocha local government area in South Eastern Nigeria was done. Multistage sampling technique was used in the selection of participants. Simple random sampling of towns and schools were done while stratified sampling of the various classes in the schools were done. Analysis was done using SPSS 26

Results: Two hundred and fifty females were studied with a mean age of 14 ± 2.01 years. Majority (82.8%) of them had attained menarche while 99.6% of students had a good understanding of puberty. The mean age of coitarche was 11 ± 3.3 years and modal age group being 12-14 years. 13. Four (1.2%) had been raped while 22 (8.8%) of the respondents had been sexually harassed. Of those who had engaged in sex, only 21.8% used contraceptives.

Conclusion: Significant reproductive health challenges were present among female adolescents in the rural south Eastern Nigeria. There is still need for more sexuality education to prepare these young adolescents for a healthy sexual and reproductive life.

Crush injury of the urethra and vulva, an unusual cause of antepartum haemorrhage – a case report: challenges in management

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Objective: To highlight this uncommon cause of antepartum haemorrhage, the multi specialist involvement and strategies to overcome the challenges posed by management

Methodology: Documentation of patient's management from presentation to discharge, highlighting the peculiar challenges encountered in the process.

Result: We present a 30-year-old G4P2⁺¹lady who had crush injury of the vulva and urethra following a road traffic accident involving her motorcycle at 32 weeks' gestation. She was resuscitated from shock with intravenous fluids and blood transfusion and had supra-pubic cystostomy due to urinary retention. Two weeks after caesarean delivery of a 2.4kg male baby at 36 weeks of gestation, she had reconstruction of the urethra with rail-roading following a micturating cystourethrography. Patient and baby were discharged home from hospital a week after the reconstruction after spending a total of seven weeks on admission.

Conclusion: Crush injury of the urethra and vulva in pregnancy could result in death or near miss experience if not adequately handled. It may as in the case managed require the involvement of other specialists for a satisfactory outcome.

Rupture of Meckel's diverticulum in the early post caesarean delivery period- a diagnostic dilemma

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Objective was to highlight the need to think outside the box when we encounter unusual complications following a routine procedure or surgery we document the patient's management from presentation to discharge, highlighting the diagnostic dilemmas encountered in the course of management.

We present a 30-year-old $G3P_1^{+1}$ 1 alive unbooked lady who presented at our facility at a gestational age of 38^{th} completed weeks. She was worked up for elective Caesarean section on account of one previous Caesarean section, a previous laparotomy for ectopic pregnancy and an umbilical hernia with a draining (discharging) sinus.

The elective Caesarean section was uneventful however and she was commenced on graded oral sips on the second post-operative day. On the 3rd post-operative day, patient complained of abdominal pain which progressively became worse with distension. There was also associated increase in bowel motion with passage of watery stool with normotensive bowel sound. As a result of worsening abdominal pain and accompanying fever, oral feeding was stopped and abdominal X-ray (erect and supine) was done which was not remarkable apart from a little gas under the diaphragm.

The abdomen was subsequently re-explored 5 days after Caesarean section. Intraoperatively, about 600ml of faeculent fluid was evacuated. An associated finding of ruptured Meckel's diverticulum was identified 5cm from the ileo-caecal junction. It was about 6cm long with a base of 2cm.A segmental ileal resection, including the Meckel's diverticulum, and anastomosis was done. The patient made remarkable recovery following the surgery and was discharged home ten days later.

Conclusion: Rupture of Meckel's diverticulum in pregnancy or postpartum period is very rare. Appropriate treatment should be offered to avoid unnecessary morbidity or mortality.

The relationship between maternal serum leptin, umbilical cord leptin and birth weight in Negroid women: A cross sectional analytic study

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Objective: To determine the association between the mean maternal Leptin, mean neonatal (cord blood) Leptin level and the mean birth weight.

Methodology: This was a cross sectional analytical study carried out over 5-month period. The control group were neonates with normal birth weight and their mothers. The normal birth weight was defined as birth weight between 2.50 to 3.99kg. The case(experiment) groups included neonates with macrosomia and their mothers. Blood samples were collected from the pregnant women at term and cord blood was also collected after delivery. The serum was extracted and used to determine the leptin level in the mothers and their neonates. Other relevant information was obtained with a proforma.

Data was analyzed using Stata statistical package version 14. Continuous variables including age, birth weight mean leptin levels were summarized by mean \pm standard deviation. There was test of associations between variable to determine significant relationship at a p-value of < 0.05

Result: A total of 45 mother-neonate pairs that completed the study were used in the analysis. This comprises of 23 mother -neonate pair with actual for weight and 22 motherneonate pair with macrosomia. The mean birth weight was 3.78±0.05. The mean cord leptin level was 4.33±1.93ng/l. The value was not significantly higher in macrosomic neonates when compared to those with normal weight (4.59±1.86 versus 4.06±1.87) with a p-value of 0.36. The mean maternal serum leptin was 4.90±1.82. This did not have statistically significant relationship with the birth weight with a p-value of 0.22. The abdominal circumference of the neonate had a significant association with the cord leptin level (p-value =0.0361).

Conclusion: There is no significant association between cord blood leptin level and birth weight among negroid black women.

Conflicting diagnoses: 'a mis' or 'an error'? —achieving quality in clinico-pathology consults

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Objective: People are constantly looking for quality products and services. Managers, including healthcare professional, globally consider quality as a strategic goal to achieve competitive advantage. Quality healthcare is the "Provision of appropriate standard healthcare in technically competent manner, with good communication, shared decision making and cultural sensitivity." Referring a case for a "second opinion" is a traditional, formal approach to achieving quality in clinico-pathology consults. In the pursuit of quality in diagnosis via second opinion, some errors occur which not only breed confusion to the clinician, but also increases cost in terms of time, finance and complications on the patients. It is our aim to enlighten ourselves in order to eradicate this avoidable cost.

Methodology: We present here six case scenarios to underscore not only the need, but also the ideal process for requesting second opinion to achieve quality in healthcare. The first was a case of an ulcerated breast lesion that was diagnosed as an inflammatory lesion by a pathologist, and non-Hodgkin lymphoma by another. The second was a pleural fluid cytology suggestive of malignancy and a second/reviewed impression suggestive of inflammatory (? Tuberculosis)/reactive (both negative for malignancy). The third was an abdominal lesion diagnosed as my fibroblastic tumour and a second diagnosis suggestive of inflammatory lesion. The fourth was a gastric tissue with first and reviewed diagnoses of inflammatory and malignancy respectively. The fifth was a case of divided breast tissue sent to 2 pathologists with no residual/residual tumour seen. Lastly, a 'would have been divided' endometrial tissue with a diagnosis of endometrial carcinoma in an endometrial polyp and relatively normal endometrium.

Conclusion: Requesting second opinion in histopathology consults helps achieve quality in clinical care with minimal cost on clients when properly done.

Phototherapy Services for Newborn with Jaundice; Availability and Practices in Southeast Nigeria

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Objectives: Severe neonatal hyperbilirubinemia remains a cause of neurologic damage in children with a higher incidence in low-income countries. Phototherapy, which is the standard of care for neonatal hyperbilirubinemia is not only necessary but an essential neonatal service that should be readily available in all health facilities with delivery services. The study describes the availability and distribution of phototherapy service in secondary health institutions in Southeast Nigeria.

Methodology: This was a cross-sectional descriptive study carried out in four of the largest cities in Southeast Nigeria using convenient sampling methods. Researcher administered questionnaire was used to obtain information regarding availability of phototherapy machines, its use and personnel availability

Results: A total of seventy-seven facilities were surveyed. Fifty-five (71.4%) of the studied facilities manage jaundice in their facility. Of these, 45/55 (81.8%) use phototherapy in the management of jaundice in newborns. The most used phototherapy is LED (42.2%). Others were fluorescent (26.6%), fabricated LED (11.1%) and fabricated fluorescent (20%). Routine serum bilirubin assay was done in 60 (77.9%) of the facilities even though majority was done in laboratories outside the facility. Non-invasive serum bilirubin monitoring was available in only two facilities. Only 21 (47.7%) had a servicing protocol for their phototherapy machines, and just 12 (27.7%) of these services were offered by a biomedical engineer.

Conclusion: Phototherapy use in secondary health facilities is suboptimal. There is urgent need for states health authorities to collaborate with private health facilities especially those offering maternal and child services in provision of phototherapy machines as well as in training health workers for optimal management of neonatal hyperbilirubinemia.

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Bronchial foreign body mimicking chronic cough and recurrent bronchopneumonia: diagnostic dilemma in a resource-poor setting.

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Objective: The importance of high index of suspicion in diagnosing small objects in the airway in order to avert delayed or missed diagnosis with its attendant complications.

Case Report: A Six-year-old male admitted through the Children Emergency Room (CHER) with 6 months' history of recurrent cough and fever associated with initial choking spells, noisy breathing and shortness of breath. Child was said to have "swallowed" a plastic object which the care givers and attending physicians assumed had been passed out in faeces. He was managed as a case of recurrent bronchopneumonia with oral and parenteral medications with temporary relief of symptoms. Chest x-ray done at presentation showed evidence of left lung collapse with ipsilateral mediastinal shift but no demonstrable FB. He had a diagnostic rigid bronchoscopy and a plastic object was discovered within the left main bronchus and subsequently retrieved. Broad spectrum antibiotics, anti-inflammatory and antipyretics were administered. By the second day post-op, all chest symptoms had resolved, and repeat chest x-ray showed normal findings.

Conclusion: Any child with a history of recurrent cough and shortness of breath that is unresponsive to medical treatment qualifies for Otolaryngological review to rule out bronchial FB via diagnostic bronchoscopy. Negative Radiological findings do not exclude the presence of foreign body.

Keywords: Foreign body, Aspiration, Bronchopneumonia, Radiograph, Bronchoscopy.

Assessment of immunity against HBV among children aged 2-17 years in Nnewi, Anambra state

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Objective: To assess the prevalence of HBsAg, the presence of anti-HBS among vaccinated children aged 2-17 years and the titre levels of anti-HBS among those who have anti-HBS.

Methodology: This was a cross-sectional study of consecutive children aged between 2 – 17 years seen at the outpatient clinic of NAUTH, Nnewi. Five (5mls) of venous blood was collected from each of the study participants into plain vacutainer tubes and transported to the laboratory for processing. The samples were analyzed for HBV serological markers and anti-HBs titre. Titre of anti-HBs of $\geq 10 \text{IU/L}$ was considered protective while titre less than $\leq 10 \text{IU/L}$ unproductive.

Results: A total of 60 children were used for the study. There was equal male and female distribution (1:1). Most of the respondents (36.7%) were between 10-14 years. 15% of the respondents had their immunity assessed following immunization using panel test. Anti-HBs titre was <10 iu/l in 56.7% of the children and $\ge 10 \text{iu/l}$ in 43.3% of the respondents.

Conclusion: After 18 years of introduction of the HBV vaccine into the National program of immunization and routine infant immunization against hepatitis B virus in Nigeria, it appears that most children are not protected against HBV after completing three doses of the vaccine. A large scale study would be desirable to confirm this finding.

Iatrogenic vesico-jejunal fistula six years following subtotal hysterectomy: diagnostic challenges and management

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Objective: We present a case of vesico-jejunal fistula occurring 6 years after a subtotal hysterectomy done in a private hospital from use of intra-abdominal nylon sutures.

Case details: The patient is a 50-year-old woman who presented to our facility with 6 months' history of faecaluria. There was associated history of urinary frequency, urgency, pneumaturia and dysuria. She had subtotal hysterectomy 6 years prior to presentation. Cystography, Abdominal computed tomography scan, and cystoscopy done revealed a bowel fistula with the bladder. She had exploratory laparotomy which revealed extensive intra-abdominal nylon suturing of bladder and jejunum. She was treated and did well postoperatively.

Conclusion: Enterovesical fistula can follow wrong suture use in surgical procedures even many years after the procedure. High index of suspicion and imaging modalities are needed for early diagnosis and prompt management.

Urethral stricture and urethroplasty practice in a teaching hospital in Anambra, South-eastern Nigeria

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Objective: We reviewed the urethroplasties done at a tertiary hospital in South-Eastern Nigeria.

Methodology: This is a retrospective study of our urethral strictures and urethroplasties for 5 years spanning from January 2015 to December 2019 at a Teaching (Tertiary) hospital in Anambra South East Nigeria. Data was retrieved from the case notes of all the urethral stricture cases which presented to our facility in these 5 years and analysed using Microsoft Excel.

Results: A total of 186 patients were diagnosed with urethral stricture disease within the 5 years' period. However, only 28 (15.1%) of them had urethroplasty within the period, mostly due to lack of fund. Of those who had urethroplasty, their ages ranged from 4 – 64 years with a median of 29.50 years. Motor vehicular road traffic accident (RTA) was the most common (46.43%) aetiology. Excision and anastomosis was the most common type of urethroplasty performed (71.43%) and the most common complication was stricture recurrence (32.14%).

Conclusion: Though urethroplasty techniques have become more refined, accessibility of care continues to hamper treatment in Sub-Saharan Africa due to socioeconomic issues.

Bloodless Management of Significantly Elevated Transcranial Doppler Velocity Value in a Jehovah's Witness Child with Sickle Cell Disease: A Tertiary Centre Experience

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Objective: To show the possibility of the management of SCD patients with significantly elevated transcranial Doppler (TCD) velocity values suggestive of a high risk of stroke.

Case Presentation: A 3-year old Jehovah's Witness male with SCD who presented with a 9month history of elevated TCD velocities ranging between 193 and 203cm/s despite the daily intake of hydroxyurea, iron-free blood tonic and proguanil. Multiple investigations revealed neutrophil counts of approximately 3000 cells/mm3, and rising Haemoglobin F values. Exchange blood transfusion was not provided owing to the caregivers' religious convictions against blood transfusion. Following a rise in TCD value to 227cm/s, hydroxyurea dosage was increased to 30mg/kg and omega 3 supplements initiated at 1000iu twice daily. A month later, an alarming TCD value of 242cm/s was detected with elevated neutrophil count of 8670 cells/mm3. The urgent need for exchange blood transfusion was again rejected by the caregivers. On the suspicion of omega-3 induced neutrophilia and Vitamin A overdose which can lead to raised intracranial pressures, omega-3 was withdrawn and the tonic substituted with folic acid and multivitamin tablets. Hydroxyurea was further increased to 35mg/kg. Within two weeks, a repeat TCD ultrasound showed a remarkable drop in velocity to 188cm/s. The neutrophil counts also significantly declined to 3630 cells/mm3. The child is currently stable and no longer at high risk of stroke.

Conclusion: Hydroxyurea continues to play a key role in the management of stroke in SCD patients. The impact of omega 3 and blood tonics in the routine management of SCD in children require further evaluation.

Keywords: sickle cell disease, stroke, omega 3, hydroxyurea, Jehovah's witnesses Sect, transcranial Doppler, fish oil

Disseminated Tuberculosis in A Vaccinated 8 Year Old Child -Case Report

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Objective: To highlight the possibility of disseminated tuberculosis in a BCG vaccinated child

Case Report: An eight-year-old female who presented with a 3year history of recurrent fever, increasing abdominal swelling, neck swelling and progressive weight loss. She had cough at the onset of symptoms but cough however has stopped, child was vaccinated at birth with BCG, no contact with chronically coughing adult, has drenching night sweats ,last of 4 children, both parents separated, examination revealed a chronically looking child febrile(temp 37.9oc),pale, puffy face, fluffy hair, bilateral pitting pedal oedema, pustular rashes interdigital webs, umbilicus, gluteal cleft; cervical lymphadenopathy tender, matted together 3cmx3cm,hepatosplenomegally and ascites. MTB genexpert of the salivary fluid was positive for MTB; severe hypoalbuminaemia 0.7g/dl, Hb 6.7g, ESR 43mm/hr.Cervical lymphnode biopsy histology showed caseous granulomatous lesions. Diagnosis of Disseminated tuberculosis in a malnourished child and generalized scabies were made, she was subsequently commenced on anti-tuberculous drugs, it D3, vit B6, Zinc gluconate, ivermectin, permethrin cream, high protein diet and transfusion. She is currently on the continuation phase of the anti Tb drugs with significant improvement

Discussion: Tuberculosis disease is uncommon in children vaccinated at birth as BCG has been shown to offer protection for 10-15years, however in the scenario of severe immunosuppression like in certain of HIV infection, malnutrion, cancers, tuberculosis infection and disease can occur. Making diagnosis of Disseminated tuberculosis in children may be delayed because of tissues and organs involved, majority of the children do not produce sputum as most swallow the sputum and difficulty accessing tissues for histology. This was the case in the index child where diagnosis was made after 3 years of onset of symptoms. Severe protein malnutrition and low socioeconomic class may have been the risk factor for disseminated tuberculosis infection in the index case similar to the findings of Caleb Attah et al.

Conclusion: DTB in BCG vaccinated child can occur from reactivation of latent Tb or new infection following severe immune suppression. High index of suspicion, availability of tissue for histology aids early diagnosis and treatment.

Key Words: DTB, vaccinated, malnutrition

Ureteroscopy and laser lithotripsy for upper tract stones in a urology centre in Anambra state: our initial experience

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Objective: To demonstrate the outcome of initial experience of upper tract stone management with ureteroscopy and laser lithotripsy in 32 patients.

Methodology: The data of thirty-two patients who had ureteroscopy and laser lithotripsy for upper genitourinary tract stones at a private urology centre in Awka, Anambra State Nigeria from September 2020 to June 2022 (20months) were retrospectively studied. Their sociodemographic data, clinical symptoms, the location and size of the stones, preoperative and postoperative stent use, hospital stay, complications and stone-clearance rates were analyzed.

Results: A total of 33 procedures were performed for 32 patients. The mean age of the patients was 44.7 ± 12.2 years. The mean stone size was 15.4 ± 6.7 mm, with a range of 8.0-39mm, with Hounsfield unit ranging from 233-906. The stone was on the right tract, left tract and bilateral in 46.9%, 43.7%, 9.4% of the cases respectively. The patients had a mean length of hospital stay of 3.31 ± 1.45 days. The stone clearance rate was 90.3%. 53.1% of the patients had post-operative complications with 40.6% of those accounted by post-operative fever which resolved with antibiotics. There was treatment failure in one patient due to the inability to scope the ureter on account of ureteral stricture.

Conclusion: Ureteroscopy and laser lithotripsy is a safe and effective option in the management of upper tract stones with the advantages of being performed via a natural orifice, being less painful, reduced risk of severe bleeding and irreversible loss of renal parenchyma, and short hospital stay.

Key words: Ureter, Stones, Ureteroscopy, Holmium laser, Lithotripsy.

Bilateral auto-enucleation: A case report

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Objectives: To present a case of bilateral auto-enucleation in a 75-year-old male Nigerian - a rare occurrence in the elderly.

Method: Report of a male patient that plucked out his 2 eyes.

Result: A 75-year-old man presented at Guinness Eye Centre Onitsha, having plucked out his 2 eyes a day earlier. His wife reported that he was behaving abnormally who had recently; when she came to bring breakfast she saw her husband's 2 eyes on the floor and bleeding from the 2 eyes. Both patient and wife were living alone and no one came to their house that morning. The patient said he gouged out his eyes in obedience to a voice urging him to do soothed couple recently lost their only male child.

Examination showed a fully conscious, calm elderly man with normal vital signs, bilateral lid and periorbital oedema, chemosis and disorganised orbits with absence of the eye balls. His wife brought a polythene bag containing neatly wrapped two intact eyeballs, each with about 5cm of attached optic nerve.

Conclusion: Although auto-enucleation is not common among ophthalmic patients in Nigerians, this report should alert medical practitioners of this devastating ophthalmic consequence of neglected psychiatric disorder in the elderly.

Successful Expectant Management of a Dichorionic Quadruplet Pregnancy to 38weeks 1day Gestation Without Complication

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This is to report a case of successful expectant management to 38weeks gestation of a Dichorionic Quadruplet without complication.

A 26years old G₃P₂₂Alive student presented for booking at the antenatal clinic of Holy Rosary Specialist Hospital & Maternity, Onitsha on 10/3/2015 following a 16weeks amenorrhea. She had normal term singleton pregnancies and deliveries in 2010 and 2013. She later had a perceived one-year period of secondary infertility, and got pregnant after a course of Clomiphene Citrate. A booking ultrasound done on 24/3/2015 revealed an 18week Dichorionic Quadruplet with compatible foetal parameters. There was no family history of multifetal pregnancies.

She had an elective caesarean section on 12/08/2015, at a gestational age of 38wks and 1day. Findings at delivery include, 3boys 1girl with excellent Apgar scores, and birth weight range of 2.6-2.2kg. She recovered well from surgery, and was discharged home on the 5th post-operative day. She came for postnatal clinic on 24/09/2015, and had counselling for family planning.

Conclusion: Quadruplet pregnancies can be expectantly managed successfully to 38wks gestation as reported. Interventions like "Cervical Circlage" and pre-term delivery are not "sine qua non" to the management of Quadruplet pregnancies.

Assessment of health care utilization among women of child bearing age in all Nnamdi Azikiwe University Teaching Hospital (NAUTH) outstations, Anambra State, Nigeria

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Objective: This study sought to assess the health care utilization among women of child-bearing ages attending out-patient clinics (OPC) in all Nnamdi Azikiwe University Teaching Hospital [NAUTH] Outstations in Anambra State, South-Eastern, Nigeria.

Methodology: This was a cross-sectional descriptive study carried out in the Out-patient clinics of all NAUTH Outstations. Systematic random sampling was used to recruit the respondents. Data collection was by the use of a self-administered questionnaire. Ethical clearance was obtained from the ethical and research committee of NAUTH, Nnewi. The level of significance was set at p<0.05.

Results: A total of 300 women that met the inclusion criteria were recruited with a mean age ± SD of 29.4 (± 0.7) years. The proportion of respondents who utilized the health care facilities was 252 (84.67%), while12.67% attended maternity homes and 2.66% preferred to stay at home.

Conclusion: Many women utilized the facilities and the impact is the reduction of morbidity and mortality among this reproductive age group which gives credence to the importance of healthcare utilization services by women of reproductive age.

Key words: women of reproductive age, health care utilization, tertiary health facility out stations.

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Seroprevalence, seroconversion and mother-to-child-transmission of dual and triplex infection of HIV, hepatitis B and C viruses among pregnant women in Nigeria: A national cohort study

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Objectives: To evaluate the seroprevalence, seroconversion and mother-to-child transmission (MTCT) rates for dual and triplex infections of HIV, hepatitis B and hepatitis C virus among pregnant women in Nigeria.

Methods: A multicentre prospective cohort study was conducted in six tertiary hospitals randomly selected from the six geopolitical zones of. All eligible consenting pregnant women were tested at recruitment for HIV, Hepatitis B and C virus infections. Those positive for at least two of the infections in any combination were followed-up. Those negative for the three infections or positive for only one of the infections at recruitment were retested at delivery. Positive tests were confirmed using PCR technique. The primary outcome measures were seroprevalence, seroconversion and MTCT rates. Data were managed with SPSS for windows version 23, with primary outcomes analyzed as % and 95% CIs. Ethical approval was obtained from NHREC (NHREC/01/01/2007-23/01/2020).

Results: Of 2,775 participants enrolled, 13 (0.47%; 95% CI, 0.25% to 0.80%) and 4 (0.14%; 95% CI, 0.04% to 0.37%) were seropositive to dual and triplex infections, respectively. Of the 13 participants 'seropositive to dual infections, 6 (46.15%; 95% CI, 16.94% to 100.46%) were seropositive to HIV and HBV, 4 (30.77%; 95% CI, 8.38% to 78.78%) were seropositive to HIV and HCV and 3 (23.08%; 95% CI, 4.76% to 67.44%) were seropositive to HBV and HCV. However, 2403 out of 2775 (86.59%; 95% CI, 83.17% to 90.13%) participants were followed up till delivery. Of the 2403 participants followed up, 2,386 did not have dual or triplex infection at enrolment. Of these 2,386, 3participants were seropositive for dual infection of HIV and HBV at repeat testing at delivery, giving a seroconversion rate of 0.13% (95% CI, 0.03% to 0.36%). No participant had seroconversion for HIV-HCV or HBV-HCV or for triplex infections. The MTCT rates was 0.0% for dual and triplex infections.

Conclusion: We observed a relatively high seroprevalence rates for dual and triplex infections of HIV, hepatitis B and hepatitis C viruses in Nigeria but a low seroconversion and zero MTCT rates. Funding: TETFund National Research Fund 2019 (Grant number TETFund/DR&D/CE/NRF/STI/33).

Eradication of childhood killer diseases in Nigeria: the journey so far

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Objective: To determine the prevalence of the six childhood killer diseases among the under five children presenting to Nnamdi Azikiwe University Teaching Hospital (NAUTH) Nnewi, Anambra State.

Methodology: This is a retrospective cross-sectional study of under five children who presented to NAUTH Nnewi from 2016 to 2020. The data was analysed using SPSS version 26.

Result: The mean age of the children studied is 22.56 months. Fifty-three percent (53%) were males. The prevalence rate for the six childhood killer diseases was 0.87%. Of all the cases that presented, 86.1% of them were immunized accordingly. The prevalence rate for the others are as follows: Diphtheria (0.07%), pertussis (0.04%), tuberculosis (0.61%) and tetanus (0.15%).No cases of polio and measles were recorded Case fatality rate for the six diseases was 22.5%. There was better disease outcome in those who were immunized.

Conclusion: Substantial progress with respect to elimination of the childhood killer diseases has been made. However, there is still need for more effort if they are to be eradicated entirely. Encouraging families to immunize their children is key to decreasing transmission of these childhood killer diseases as well as having better disease outcomes when infected.

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Knowledge, attitude and practice of personal hygiene among secondary school students in Anaocha local government area, Anambra state, Nigeria.

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Objective: This study seeks to assess the knowledge, attitude and practice of personal hygiene and associated factors among secondary school students in Anaocha Local Government Area, Anambra State, Nigeria.

Methodology: Using a cross-sectional study design, a multistage sampling technique was used to sample 280 students in 3 selected secondary schools in Anaocha LGA. Data was collected using a semi structured self-administered questionnaire for a period of 3 weeks. Data was analyzed using SPSS version 21.

Results: 56.3% of respondents(n=156) were females and mean age was 15.7 ±2years. A significant number of the respondents (99.3%) have good knowledge of personal hygiene and the source of their knowledge was mainly from their school and teachers by extension (69.3%). Majority could identify the components of personal hygiene and some of the consequences of lack of personal hygiene. 85.9% strongly approve of personal hygiene and (71.0%) think everybody should promote the practice of personal hygiene. Majority of the respondents practiced personal hygiene properly and adequately including having their bath daily 99.3%, brushing teeth (98.9%), washing fruits before eating them (83.0%) and washing hands after visiting the toilet (98.6%).

Conclusion: The students of Anaocha local government area have good knowledge and attitude towards good hygiene and they have good personal hygiene practices.

Recommendation: Personal hygiene should be incorporated into school's curriculum at all levels. School managements can be encouraged to provide amenities within the school community that will enhance a good practice of personal hygiene

Spina bifida: 13-year experience in a tertiary health institution in South-East Nigeria

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Objective: to review the cases managed in our institution in the last 13 years

Methodology: This a retrospective study of all cases of Spina Bifida managed between 2006 and 2021. Demographic data like age and sex were collected; diagnosis, presenting symptoms, operation done, and complications were also retrieved using a preformed template. These were analysed with simple descriptive statistics.

Results:

A total of 71 cases were managed on the said period, 57% of cases were seen between 2006 and 2009, the overall average was 5.9 cases/year. Male accounted for 57.7%. The modal age group was one year and below. More than 70% presented for the first time in the first two years of life. Spina bifida cystica accounted for 94%. Among those with available records, the most common anatomic site was lumbosacral (34/40), fourteen cases had associated hydrocephalus needing initial cerebrospinal fluid diversion. Excision and repair was the surgery done. Eight cases had surgical site infection while 7 had post-operative sepsis. Of the 25 cases that had documentation on outcome, 84% (21/25) were discharged, 12.5% (13/25) deaths were recorded while one case signed DAMA.

Conclusion: Spina bifida is still a problem in our clime though relatively less compared to other climes and appears to be reducing in incidence. Improved antenatal care and continued advocacy are encouraged.

Awareness of Pelvic Surgeries Undergone and possible effects of Such Surgeries Among Patients Presenting for HSG on Account of Infertility

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Objective: To document the patients' awareness of the various pelvic surgeries undergone prior to referral for HSG on account of infertility and ascertain the possible uterine and tubal manifestations of such surgeries on HSG.

Methodology: This is a prospective and analytical study of 200 women referred for hysterosalpingography on account of infertility. History of previous abdominopelvic surgeries including the names, how long ago, indications, and outcomes were obtained. Analysis was with simple frequency, bar charts, pie charts and Pearson correlation test using the Statistical Package for Social Sciences, version 21. $P \le 0.05$ was considered statistically significant.

Result: Pelvic surgery was found to be common among infertile women presenting for HSG. The patients were aware of the surgeries they underwent.

A total of 118 subjects underwent D&C, followed by appendectomy in 39, Caesarean section in 26 and myomectomy in 20 subjects in that order. Altogether, 157 subjects underwent D&C and or other pelvic surgeries. Intrauterine adhesions were diagnosed with HSG in 14(11.9%) of subjects with D&C, 1(2.6%) with appendectomy, 9(34.6%) with CS, and 5(25.0%) with myomectomy. Tubal abnormalities were diagnosed in 67(56.8%) of subjects with D&C 19(48.7%) with appendectomy, 12(46.2%) with CS, and 12(60%) with myomectomy.

Conclusion: The patients were commonly aware of the pelvic surgeries undergone. Intrauterine and tubal pathologies were common among infertile women with pelvic surgery, hence the need for improved medical and surgical management of such patients as a means of promoting healthcare excellence.

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Ocular myasthenia gravis: Case report

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Objective is to report a case of ocular myasthenia gravis – a rare condition in children A 6 6-year-oldirl who presented initially with right ptosis which worsened with exertion; later both eyes were involved and she experienced diplopia. A neostigmine test resulted in marked improvement in the patient's ptosis. Ocular myasthenia gravis was diagnosed and she was commenced on treatment.

Conclusion: Ocular myasthenia gravis though rare, may occur in children. Ophthalmologists and other physicians who attend to children remain aware of the possibility of this disease among this age group.

Prevalence and pattern of superficial fungal infections among primary school pupils in Nnewi and Ukpor

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Objectives: we examined the prevalence and pattern of SFIs among primary school pupils in Nnewi and Ukpor.

Methodology: A cross-sectional study was conducted among 1562 primary school pupils between April and July, 2019. Subjects were selected using stratified random sampling technique. Data was analyzed using SPSS version 21.

Results: The pupils had a mean age of 9.0 ± 2.0 years and male: female ratio of 1:1. The overall prevalence of SFIs was 28.9%. The prevalence of SFIs was significantly higher among pupils in public compared to private schools (39.9% versus 14.6%, p<0.001). Tinea capitis was the predominant form accounting for81.4% (367/451) of SFIs. The black dot type (53.3%) and gray patch (35.4%) were the commonest tinea capitis variants. Other SFIs identified among the children were tinea corporis (8.5%) and pityriasis versicolor (8.5%), tinea fasciei (3.6%), tinea unguim (3.1%), and cutaneous candidiasis (0.3%). The most prevalent organisms were T. tonsurans (37.9%), T. mentagrophyte (28.8%) and T. rubrum (18.7%). About a third (34.1% [154/451]) of children who had SFI receive no form of treatment while majority (67.4% [174/258]) of those who were treated received inappropriate treatment using local remedies.

Conclusion: The burden of SFI is high among school children in Nnewi area, especially among those who attend public schools. There's need to create awareness on preventive strategies such as avoidance of overcrowding, improved personal hygiene and environmental sanitation as well as prompt/proper treatment of SFIs among school children and their caregivers.

Patterns of neurological disorders among children presenting at the neurology unit of Chukwuemeka Odumegwu Ojukwu University Teaching Hospital Amaku, Awka

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Background: Many children in Nigeria suffer from detrimental, debilitating and lifelong neurologic disorders many of which are highly preventable using simple cost effective interventions.

Objective: we examined the pattern of neurological disorders among children presenting at the neurology unit of Chukwuemeka Odumegwu Ojukwu University Teaching Hospital Amaku, Awka.

Methodology: A retrospective review of the hospital records of children who presented at the Paediatric Neurology Unit of COOUTH between 1st March 2020 and 31st March 2022 was carried out. Data was abstracted using a proforma and analyzed using SPSS Version 21. Statistical significance was set at p<0.05

Results: A total of 138 children aged 0 to 15 years were seen in the unit during the period under review, out of which 115(83.35) were diagnosed to have chronic neurological disorders. Those who had chronic neurological disorders had a male: female ratio of 1.9:1 and majority (75%) of them were below 5 years of age. The commonest presenting complaints were delayed milestone (43.4%), seizures (23.8%) and speech disorders (17.2%) while the commonest diagnosis were cerebral palsy (34.7%), seizure disorder (29.8%) and attention deficit hyperactivity (8.9%). Perinatal asphyxia (47.7%), neonatal jaundice (17.0%) and CNS infections (12.5%) were identified as the major risk factors responsible for the neurologic disorders.

Conclusion: Cerebral palsy and seizure disorders constitute the major neurological disorders among children seen in our institution. Efforts should be intensified at reducing the incidence and impact of perinatal asphyxia, neonatal jaundice and CNS infections, which were identified as the major culprits, in order to curb the menace of these debilitating lifelong neurologic sequalae. Effective implementation of proven interventions such as the Integrated Maternal Newborn and Child Health Strategy (IMNCH) strategy and Integrated Management of Childhood Illnesses (IMCI) is recommended.