



# 6<sup>th</sup> World Congress on Womens Health and Midwifery

July 11, 2022 | Webinar

## Scientific Tracks & Abstracts



## Sessions

Women's Health | Womens Health nursing | Abortion and Miscarriage | Pregnancy and Perinatology  
Gynaecological Disorders | Adolescent Gynaecology and Paediatric | Gynaecology and obstetrics

**Session Chair: Masaru Sakamoto** | Sasaki Foundation Kyoundo Hospital | Japan

### Session Introduction

**Title: Early and mid-trimester amniocentesis had different procedure-related risks for miscarriage: a retrospective cohort study**

**Philip Loquet**, Antwerp University Hospital, Belgium

**Title: Postpartum haemorrhage-nightmare to expertise**

**Shashi Late**, Senior specialist (OBG) and NBE teacher, India

**Title: Impact of pressure injury prevention protocol in home care services on the prevalence of pressure injuries in the dubai community**

**Sajitha Prasad**, Dubai health Authority, UAE

**Title: Postoperative fever**

**Rajni Mittal**, NDMC Medical College and Hindu Rao Hospital, India

Health Care in Women | Womens nutrition | Evaluation of Breast | Family Planning | Sexually Transmitted Diseases | Imaging and diagnostics | Causes of infertility and treatment | Gynaecological Disorders

**Session Chair: Jose Martinez** | University of Beira Interior | Portugal

### Session Introduction

**Title: Suitable lifestyle effects on Women's sexual health: Focus on Islamic lifestyle**

**Mohammad Rabbani**, University of Isfahan, Iran

**Title: Virtual sex dark secret of the pharmaceutical industry's shaded side**

**Rahul Hajare**, Indian Council of Medical Research, India

# WOMENS HEALTH AND MIDWIFERY

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## Early and mid-trimester amniocentesis had different procedure-related risks for miscarriage: a retrospective cohort study

**Philip Loquet**

Antwerp University Hospital, Belgium

Due to a high likelihood of losses, early amniocentesis (EA)—before 15 gestational weeks—is not advised. The majority of studies performed amniocentesis between 11 and 13 weeks of gestation, which is quite early in pregnancy. However, because it reduces the time between the screening (non-invasive prenatal test (NIPT)) and the diagnostic test, amniocentesis carried out at 14 gestational weeks may be a significant substitute for mid-trimester amniocentesis (MA) (amniocentesis). In this study, the risk of miscarriage associated to the surgery was compared between MA (15 + 0 to 17 + 6 weeks gestational age) and EA (14 + 0 to 6 weeks gestational age). This study compares the MA cohort to the EA cohort in a multicentric, retrospective cohort setting from 1 January 2007 to 21 November 2018. Within four weeks of the operation, a spontaneous abortion is considered procedure-related fetal loss. Exclusion criteria included multiple pregnancies, amniocenteses conducted after 17 or before 14 weeks, indications other than prenatal genetic diagnostics, and procedures carried out by gynecologists with less training. 1107 out of 1515 women (73.1%) had complete outcome information, including 298 (83.2%) from the EA cohort and 809 (69.9%) from the MA cohort. There was no discernible difference (EA 0.82 percent vs MA 0.36 percent;  $p = 0.646$ ). The difference was 0.46 percent (95% confidence interval: 0.123-3.699; odds ratio: 0.673). When EA was compared to MA in this study, there was no discernible difference in the procedure-related risk of miscarriage. EA might be regarded as a secure substitute, but more research is required.

### Recent Publications:

Zaghi M, Janssens K, Hectors W, Loquet P, Blaumeiser B. Tetrasomy 9p, a Prenatal Challenge: Two Novel Cases. *Reproductive Medicine*. 2022; 3(1):42-49. <https://doi.org/10.3390/reprodmed3010005>.

### Biography

Philip Loquet has been serving as the Department head in the field of obstetrics-fetomaternal medicine (14 years 7 months) since May 2014, and has served as the Feto-maternal medicine Director between 1990 and 2001 (11 years) Algemene geneeskunde Universitaire instelling Antwerpen, Onderscheiding Onderscheiding, Sciences et Mathematiques from 1976 to 1993. His major specialities include Lyon's Lycee du Parc Surgery, Clinical Research, Healthcare Management, Medical Education, Hospitals, Medicine, Ultrasound, Pediatrics, Healthcare, Patient Safety, Internal Medicine, EMR, Board Certified, and General Surgery.

[philip.loquet@gmail.com](mailto:philip.loquet@gmail.com)

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## Postpartum haemorrhage-nightmare to expertise

**Shashi L Kabra Maheshwari**

Senior specialist (OBG) and NBE teacher | India.

Postpartum haemorrhage is a maternal complication of concern. It accounts for nearly a quarter of maternal deaths worldwide.

PPH – Defined as

- Estimated blood loss of  $\geq 500$  mL after vaginal delivery or
- Estimated blood loss of  $\geq 1000$  mL after caesarean section or
- A Reduction in the patient's haematocrit level of  $> 10\%$  compared with prenatal value or Blood loss causing hemodynamic instability of sufficient degree to require blood transfusion.

### Causes of PPH:

- Tone – Atonic uterus (70%)
- Trauma- Lacerations, hematomas, inversion, rupture (20%)
- Tissue- retained tissue, invasive placenta (10%)
- Thrombin- coagulopathy (1%)

### Prevention of PPH?

AMTSL (WHO)

- Oxytocin (10 IU, IV/IM) is the recommended uterotonic drug for the prevention of PPH, within one minute of delivery.

Medical Management of PPH

Uterotonics:

- Oxytocin Drug of choice
- Methergine
- 15 Methyl Prostaglandin F 2 alpha
- Misoprostol
- Tranexamic acid

Surgical management of PPH

- Uterine balloon tamponade
- Brace sutures
- Stepwise devascularisation
- Hysterectomy

We should use all modalities of PPH bundle within 2 hrs for the management of such patient.

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## Recent Publications:

Maheshwari, Shashi & Kumari, Nisha & Ahmad, Syed Nawaz. (2018). Role of bilateral internal iliac artery ligation in severe obstetric and gynaecological hemorrhage. International Journal of Reproduction, Contraception, Obstetrics and Gynecology. 7. 1090. 10.18203/2320-1770.ijrcog20180898.

## Biography

Shashi L Kabra Maheshwari is a senior specialist for Obstetrics and also a National Board Of Examinations (NBE) teacher. She has earned many outstanding awards in the field of Gynecology and Obstetrics; some are IMA appreciation award, Recipient of wonder FOGSI award, APJ Abdul Kalam appreciation award, IMA WDW Karamveer award, Rashtriya Gaurav award, and Asia GCC award quality leader health. She has chaired many events like Association of Obstetricians & Gynaecologists of Delhi (AOGD) 20-22. She is also a national coordinator of LAQSHYA project which is in association with AIIMS Delhi GOI WHO. She is the President of Delhi Gynecologist Forum South West (DGF SW) and member of practical obstetric committee Federation of Obstetric and Gynecological Societies of India. Her areas of interests are high risk pregnancy, emergency Obstetrics, and Obstetrics Hemorrhage. She has organized more than 50 workshops on Postpartum hemorrhage (PPH).

drshashikabra@gmail.com

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## Impact of pressure injury prevention protocol in home care services on the prevalence of pressure injuries in the Dubai community

**Sajitha Prasad**

Dubai health Authority, UAE

**Background:** Pressure injuries (PIs) in the community have emerged as a health care burden in the past few years, leading to high rates of morbidity and mortality among the elderly population. There is evidence that simple risk assessment tools and protocols have reduced the prevalence of PIs considerably by shifting the focus to timely prevention and adequate management. The prevalence of PIs is high in-home care setting and utilizes a major share of the organizational resources for its treatment and prevention. Aim: This study aims to assess the impact of the newly developed PI prevention protocol for home care patients in Dubai. The objectives are to evaluate effective implementation of the proposed protocol and its impact on the prevalence of PIs in the community to identify the gaps for improvement in the future.

**Methods:** This retrospective observational was conducted in 13 primary health care centers in Dubai, UAE. Data were collected from 249 patients' records at an average age of  $75.5 \pm 14.5$  years old with compromised mobility (bedbound/chair bound) from January to July 2019. The PI prevalence was assessed before and after 6 months of implementing the PI prevention protocol and comparison was done using a standardized skin assessment scale (Braden Scale). Internationally validated tools from the Agency for Healthcare Research and Quality and National Institute for Health and Care Excellence were used to ensure the reliable use of the Braden Scale and PI protocol compliance. The prevalence was calculated from the existing key performance indicators in the home care office and considering the significant improvement at p value of  $< 0.0001$ ) among both genders. Also, a significant improvement was detected in the use of Braden Scale and multidisciplinary care plan ( $p < 0.0001$ ).

**Conclusion:** This study indicates that standardization of care delivery reduces the increased risk and incidence of PIs with a potentially positive outcome on PI prevalence.

### Biography

Sajitha Prasad is a primary care physician specialized in family medicine with special interest in home care services and diabetes with 20+ years of clinical experience. She has a Masters in healthcare quality and patient safety from Royal college of surgeons in Ireland and Member of the Royal college of general practitioners.

sprasad@dha.gov.ae

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## Postoperative fever

**Rajni Mittal**

NDMC Medical College and Hindu Rao Hospital, India

Approximately 50% of patients get post-operative fever. Fever may have infectious or non-infectious causes. Post-operative fever is commonly attributed to non-infectious reasons and is typically thought to be benign. Particular attention should be paid to infectious reasons when a fever develops more than 48 hours following surgery. It's critical to rule out infectious causes of post-operative fever because they might have much more serious effects and require entirely different types of treatment. The most typical explanation for early postoperative fever is a non-infectious aetiology. Further evaluation is necessary if a patient's fever persists after 96 hours following surgery. In chronological order, the five "Ws" have been linked to significant causes of postoperative fever. Reactionary fever, pneumonia, urinary tract infection, surgical site infection, thrombosis, fever after blood transfusion, thrombophlebitis, and medication fever are significant causes of postoperative fever. Retained foreign bodies, adrenal insufficiency, and alcohol withdrawal are rare causes. Prophylactic antibiotics shouldn't be continued for long periods of time, nor should empiric antibiotic therapy be started. Unknown fevers will go away on their own over time without specific therapeutic measures. A systematic approach and knowledge of differential diagnosis help in reducing the differential diagnosis and implementing appropriate management.

### Recent Publications:

1. Bavini, S., Mittal, R. & Mendiratta, S.L. Ultrasonographic measurement of the transcerebellar diameter for gestational age estimation in the third trimester. *J Ultrasound* 25, 281–287 (2022). <https://doi.org/10.1007/s40477-021-00564-0>
2. Mendiratta SL, Anand S, Mittal R, Khan F, Nargotra N. Primary ovarian pregnancy: early diagnosis still a myth. *Int J Reprod Contracept Obstet Gynecol* 2016;5:3238-41.
3. Mendiratta S, Dash S, Mittal R, Dath S, Sharma M, Sahai RN. Cervical fibroid: an uncommon presentation. *Int J Reprod Contracept Obstet Gynecol* 2017;6:4161-3.

### Biography

Rajni Mittal has 30 years' experience in the specialty of Obstetrics and Gynaecology. She is a Chief Medical Officer (SAG) in Delhi, India. In her early studies, she completed her MBBS from Maulana Azad Medical College, New Delhi. Further, she passed part 1 and 2 of MRCOG (Member of the Royal College of Obstetricians and Gynaecologists) also did MD from Lady Hardinge Medical College. She took further post-graduation training in Association of minimal access surgeons of India, Women's health initiative training program in Gynaecology endoscopy in association with All of Medical Sciences, Laparoscopy and Hysteroscopy skills course in AMASI, and basic and advanced Laparoscopic and Hysteroscopic Surgery. She is currently working in NDMC Medical College and Hindu Rao Hospital in department of Obstetrics and Gynaecology. She has acquired awards in her field; some of them are RULA AWARDS: Research Peace Award, Prestigious IRDP Award – Best Paper International Award. She is also a National Board of Examination (NBE) faculty. She is an editorial board member and also board member of Gynecology and Obstetrics journal and various associations such as World Research Council, Indian Medical Association, Association of Obstetricians and Gynecologists of Delhi, and Federation of Obstetric and Gynecological Society of India. She has 10+ publications.

rajnimttl@yahoo.com

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## Suitable lifestyle effects on women's sexual health: focus on Islamic lifestyle

**Mohammad Rabbani Khorasgani**

University of Isfahan, Iran

Despite ongoing attempts to manage and prevent STDs, many people still experience their human and financial costs. It appears that women are more likely to experience the physical and psychological effects of STDs. STD development and dissemination are influenced by human lifestyle, particularly sexual relationship lifestyle. The survival of infectious agents in the body and environment, as well as the rate at which infections spread, are all impacted by lifestyle. Additionally, human lifestyle is related to the amount and quality of sexual interactions, as well as the onset age, various sorts, freedom or restrictions of sex connections. It is crucial to pay attention to the relationships between religion, lifestyle, and sexual relations because religion can be seen as a significant component influencing human living. Islam, a religion with a thorough plan for human life, expresses key ideas for many human relationships, such as sex relationships that have a good impact on sex health and STD prevention and control.

There are Islamic general recommendations, guidelines, or regulations that have positive effects on sex health, such as the necessity of paying attention to one's health, avoiding activities that are harmful to one's health, paying attention to others' rights, the positive effects of Islamic ethics and jurisprudence "Feghh" on maintaining and promoting one's health, the requirement to wash one's body before participating in certain Islamic rituals (cleanliness is the start of praying: ablution), and the The insistence that prevention is preferable to treatment, the significance of medicine, and preventing non-scientific interventions on human health.

Additionally, there are certain guidelines and rules in the Islamic lifestyle that may have an impact on the prevalence of STDs, particularly in women. These guidelines include: 1. Promoting marriage at the earliest possible age and emphasizing the importance of the family as a fundamental social unit, 2. Moderation in life: Neither reckless behavior nor asceticism, 3. Human body cleanliness and hygiene against dirty substances including blood, urine, excrement, and semen, 4. A discussion of societal customs and how they affect the prevention of virus spread, 5. The prohibition of jobs that could lead to undesirable outcomes including the emergence and spread of infections, 6. Particular guidelines for treating sex as a necessary aspect of life: Enhancing chastity (It is prohibited to have sex in public or in front of children and it is also important not to reveal specific details about one's self-intimate relationship to others), prohibiting sex during a woman's period, prohibiting alcohol consumption, and thus preventing uncontrolled consumption of alcohol are all legal sexual activities that are restricted to marriage. More interdisciplinary research is deemed necessary to explain the strong influences of a healthy lifestyle on the prevention and control of STDs, particularly in women.

### References:

1. Rabbani Khorasgani M (2021) Woman's Health Improvement through Lifestyle Modifications: Focus on Islamic Lifestyle. J. Women Health Care and Issues, 4 (5); DOI:10.31579/2642-9756/057.
2. Rabbani Khorasgani M (2018) Effectiveness of the lifestyle modifications in prevention and control of sexually transmitted diseases (STDs): Focus on Islamic lifestyle. Clin J Obstet Gynecol 1: 056-057.
3. Rabbani Khorasgani M (2019) Prevention and Control of Cardiovascular Diseases by Beneficial Use of Islamic Lifestyle. On J Cardio Res & Rep. 1(4). OJCRR.MS.ID.000516.

### Biography

Mohammad Rabbani Khorasgani is a professor of microbiology at the University of Isfahan, Iran. He has DVM and PhD in microbiology. He has published more than 70 articles about infectious diseases, evaluation of natural materials effects for prevention and control of diseases especially infectious diseases. Many of his researches focused on probiotics. He has some interdisciplinary articles especially about, bioethics, Islamic lifestyle and health relationship.

m.rabbani@biol.ui.ac.ir



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## Virtual sex dark secret of the pharmaceutical industry's shaded side

**Rahul Hajare**

Indian Council of Medical Research, India

Even if betrayals, lying, and adultery also occur in real life, extramarital dating makes it easier for these things to occur online. Virtual sex and dating have never been an easy notion to grasp, but they have never been more difficult than they are right now, largely due to their increased popularity. Online dating has become more popular as a way for people to escape the monotony of their daily lives and get some fresh air. As the relative anonymity of the digital world provides them with an area where they feel safe and do not put themselves at any kind of risk, it has a terrific way for people to explore their inner yearning and blissfully smile.

### Recent Publications:

Rahul Hajare. Co- Relation of Ageless Glow Skin, and Traces the Evolution of Various “Second Chance”. Glob J Oto, 2018; 16(1): 555929. DOI: 10.19080/GJO.2018.16.555929

Rahul Hajare. Irreversible Loss of Fibromyalgia Students Lessons Learnt from Ongoing Counseling during Follow-Up Pharmacy Institutions in India. Archives of Community and Family Medicine. 2019; 2(1): 14-18

Rahul Hajare. How to Attach King Table Over Co-Worker Dislike Burnside Pharmacy Institute in Pune University Specialized Study. Volume 5 Issue 3, DOI: 10.23880/apct-16000180.

### Biography

Rahul Hajare is a post-doctoral student of eminent scientist and retired director of the National AIDS Research Institute of Pune, Dr. Ramesh Paranjape. He graduated in pharmacy in 2003 from Amravati University in Amravati. In 2005, with distinction, he received his Master of Pharmacy from Nagpur University's Institute of Pharmaceutical Science and Education, PhD from Vinayaka Mission University in Salem, Tamil Nadu, in 2012, and a postdoctoral degree from the Indian Council of Medical Research in New Delhi, India, in 2015.

rahulhajare17@gmail.com

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## The outcome of eating disorders: influenced factors for ED relapse and postpartum depression among women recovered completely from E.Ds.

**Mariko Makino**

Toho University, Japan

The purpose of this study was to determine whether factors contributed to postpartum depression and eating disorder (ED) relapse in women who had recovered from E.Ds. 25 people gave their agreement to take part in the study. The investigation lasted for ten years. Twelve participants who had relapsed after birth were among the 16 persons who had ED relapse during pregnancy. Twelve women suffered perinatal depression. Regarding the frequency of postpartum depression and ED relapse after delivery, there was no discernible difference between the family support group and non-support group. There were no low-body-weight newborns among the women who did not experience postpartum depression. All of the women in the non-ED relapse group gave birth vaginally. There was no discernible difference between the relapse group and the non-relapse group in terms of maternal problems. Between the relapse group and the non-relapse group, there was no discernible difference in the rate of postpartum depression. Infants of pregnant women who experienced a brief relapse or who had a history of EDs typically have normal weight babies. This study found a connection between the recurrence of EDs and postpartum depression. Postpartum depression was more common in pregnant women with ED histories compared to healthy women. Support groups and non-support groups did not differ from one another. It implied that there might be tension in ED's familial relationship. The findings might have confirmed that pregnant women with ED histories are more likely to relapse during labor and delivery and experience postpartum depression. As a result, EDs must be carefully watched both during pregnancy and after delivery.

### References:

Makino M, Yasushi M, Tsutsui S. The risk of eating disorder relapse during pregnancy and after delivery and postpartum depression among women recovered from eating disorders. *BMC Pregnancy Childbirth*. 2020 May 27;20(1):323. doi: 10.1186/s12884-020-03006-7. PMID: 32460729; PMCID: PMC7251919.

### Biography

Mariko has two PhDs. One was from Toho University and the other was from the University of Melbourne. Her ancestor was the first man exported silk from Yokohama to NY. She has been influenced by her ancestor and she belonged to JICA (Japan international Cooperation Agency which was controlled by Foreign Ministry) for 25 years. She visited over 100 countries to help the people living in developing countries. Her hobby was mountaineering including climbing, canoeing, skiing. She likes kimono.

makimakimamariko@gmail.com