

Malaria in pregnancy: A case of Ruhengeri district hospital in Rwanda



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Background

The increased susceptibility of pregnant women to malaria infection has long been recognized as a burden worldwide particularly in sub Saharan Africa. Globally, 125 million women are at risk to malaria every year and 10000 deaths occur during pregnancy. In Rwanda there was a significant increase of prevalence in 2014. pregnant women from malaria endemic areas experience a variety of diverse complications such as maternal anemia, miscarriage and deaths.

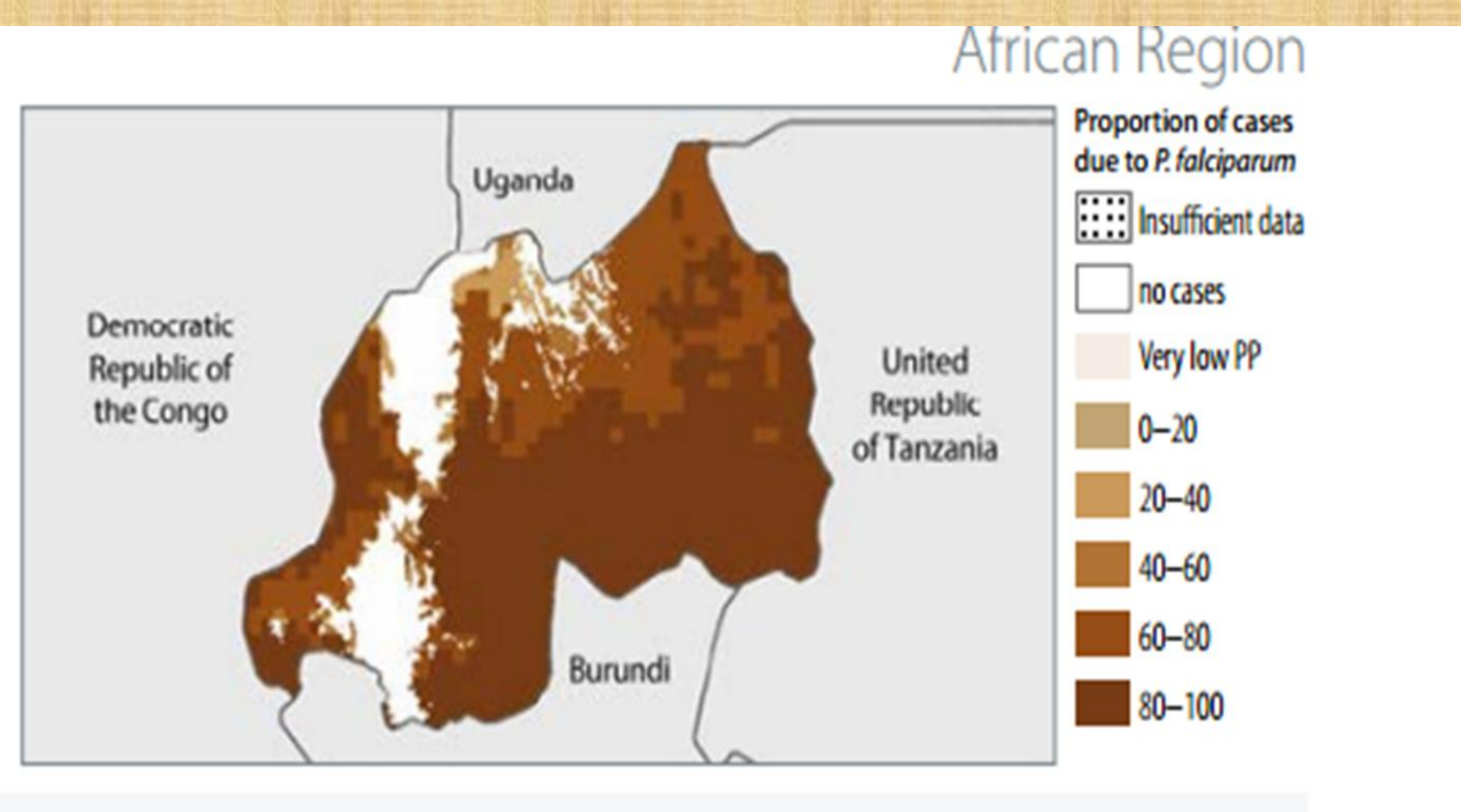


Figure: malaria endemic regions in Rwanda

Objectives

understand the outcomes and evaluate the management of pregnant women admitted to Ruhengeri District Hospital in Rwanda for malaria.

Significance of study

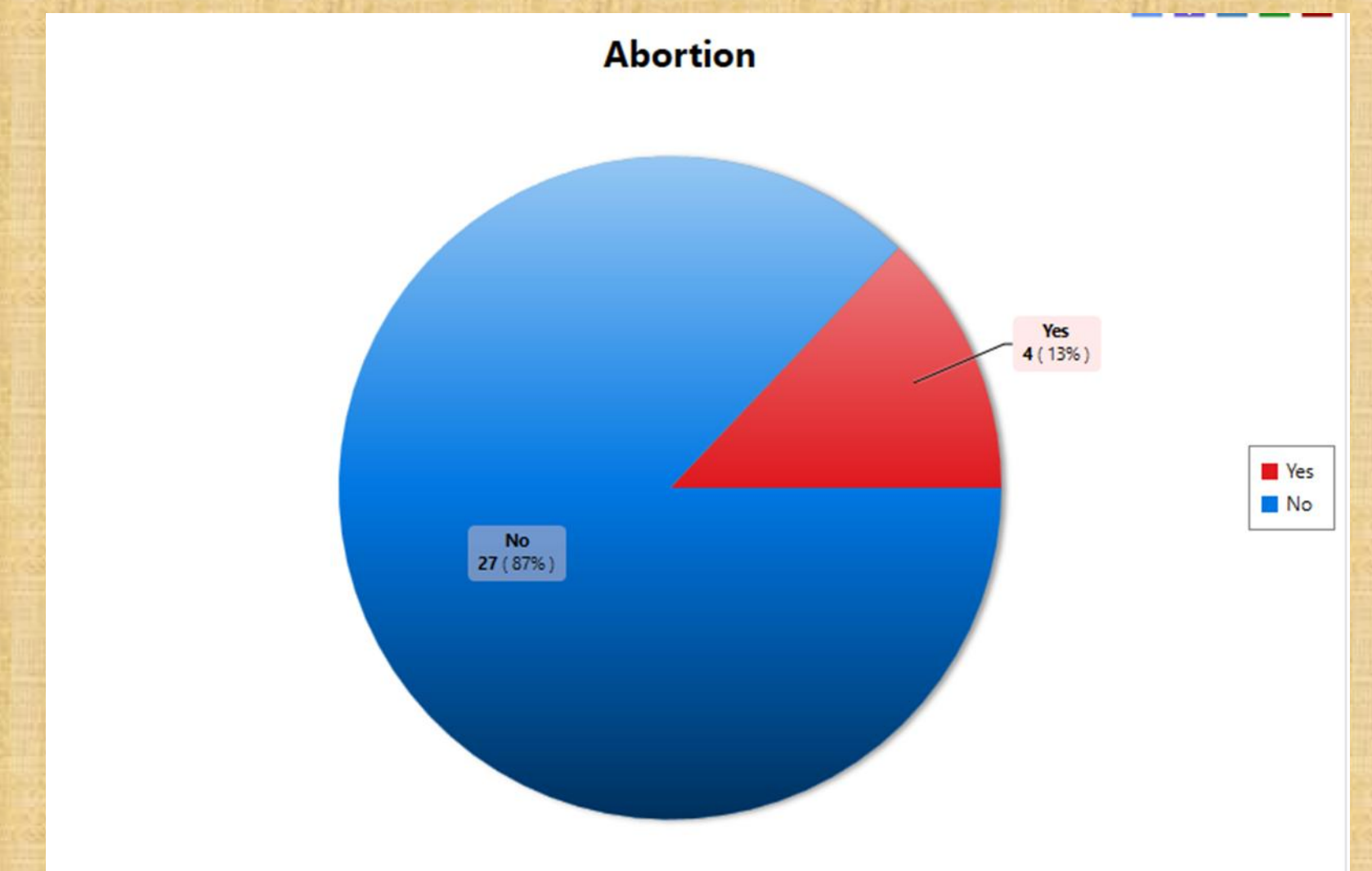
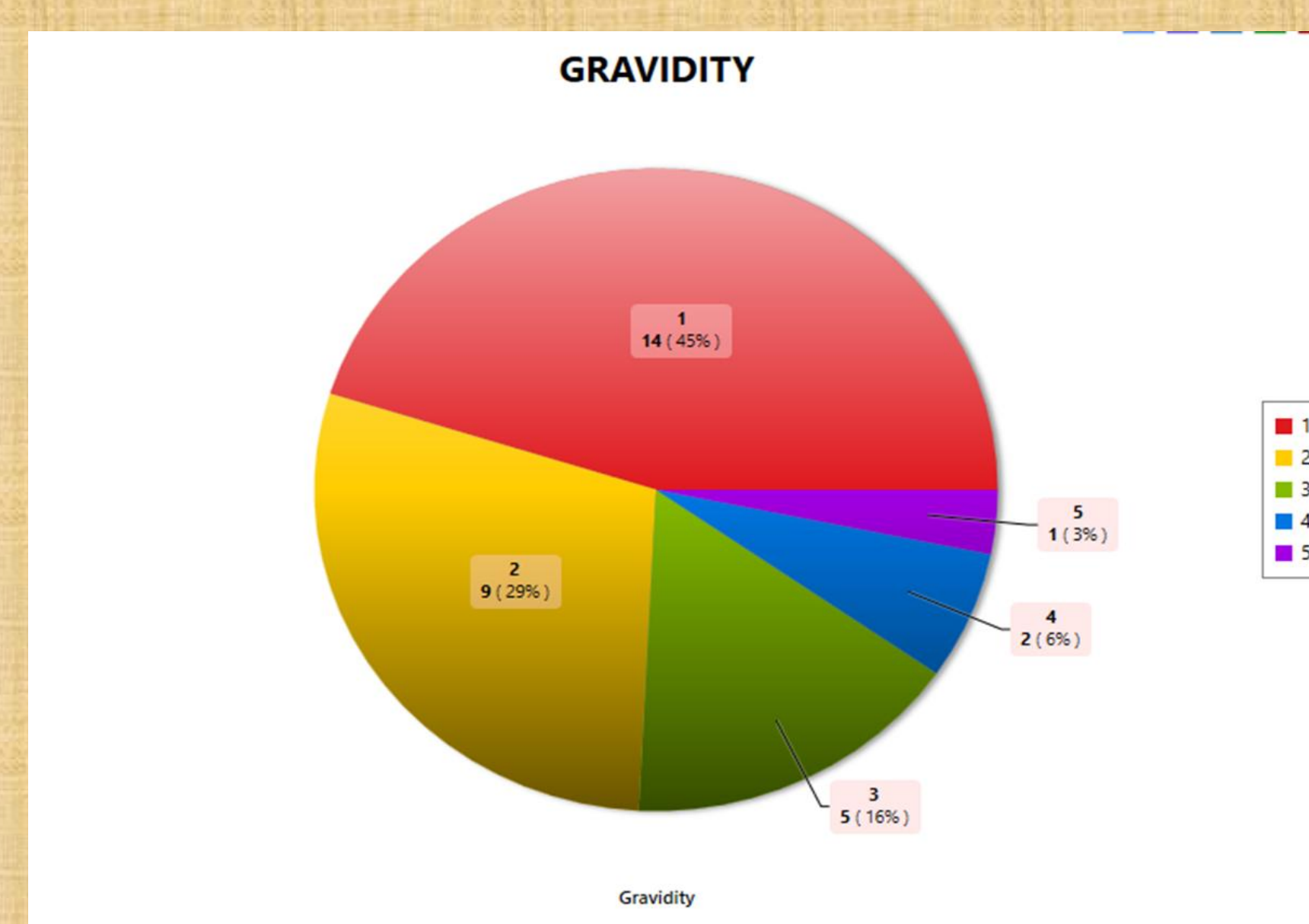
Malaria prevention and control through education (cutting bushes, closing windows early, avoiding stagnant water, sleeping under bed nets), distribution of mosquito insecticide treated nets in Mountainous region of Rwanda, specifically in pregnant women.

Methods

- document review of articles and reports on malaria prevalence and outcomes in pregnant women from Rwanda.
- Clinical observations during my medical clerkship
- Patients records review at RH district Hospital (Feb-August, 2016).
- All Data was analyzed using Epi Info 7.

Results

- The average age was 27.8 years old,
- Gravidae (G) were: G1=41.9%, G2=32.3%, G3=19.3%, G4=3.2% and G5=3.2%.
- The gestation week's average was 22.6 weeks and 35% was admitted in June (41%) has severe malaria where 12.9% had aborted.
- 80% have been treated by Artesmin combination and 19.3% by Quinine.
- The average of hospitalized pregnant women was 3.9 days (94.4 Hours) and no death case. Most of the cases are in the rainy season.



Discussion

- Primigravidae women (first trimester) they may not be able to differentiate the malaria symptoms from pregnancy symptoms?
- Teenager pregnancy who may be fearing parents?
- Late consultation can it be related to self medication vs lack of insurance
- This Increased Cases Of Severe Malaria Can Be Explained By Low Awareness, Poor Infrastructures, Lack Of Insurance

Conclusion & Recommendation

- patients can get cured with less complications once they reached Hospitals
- As Malaria's treatment is now available and efficient,
- The needed intervention for Prevention and control SHOULD BE MUCH DIRECTED TO COMMUNITY
- Focusing on primigravidae women,
- Students association, Policy makers, NGOs can Do Education, Advocacy and financial issues
- further researches to be done

References

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