

TEENAGE PREGNANCY IS NOW HIGH-RISK PRIORITY

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A hospital study has found significantly higher rates of infection, haemorrhagic complication, toxemia and neonatal morbidity and mortality in teenage pregnancies than in older ones.

The adolescent mothers also tend to have more low-birth weight newborns compared with those in the 20-39 age group.

The study has suggested that medically, demographically and from the public health aspect, teenage pregnancy be considered a high risk and a national priority.

The study, presented at the annual convention of the Philippine Gynaecological Society, was undertaken by Dr. Herminia Baja-Panlilio, senior consultant at Jose Fabella Memorial Hospital; Dr. Aida Espiritu-Salud, a visiting physician; Dr. Fernando Sanchez, head of the department of preventive medicine, and Dr. Ma. Trinidad Vera, senior resident, both of the University of the East RMMM Centre.

The authors inclined to believe that the teenage mothers are inherently susceptible to obstetric problems more because of extrinsic factors such as inadequate prenatal care and poverty (most come from a low socio-economic level) than due to immature physical or emotional status. The religious and cultural modes and social stigma contribute to the problem.

The study covered 645 teenage primigravidae out of 38,328 admissions to the maternity wards of Jose Fabella in 1978. It classified the cases by age and gravidity; and frequency of complications and deaths in each group were determined. The study found a high 12 per cent rate of teenage pregnancy among the cases admitted at the hospital as against 2 per cent in the cent at the national level, indicative of more frequent occurrence of teenage pregnancy among the poor, from which level most of the patients at the hospital came.

The study found that while the teenage group has a significantly lower abortion rate than the higher age groups, it had four times higher infection rate. The study attributed this to a higher rate of induced abortion among the young mothers who were usually unwed.

Haemorrhagic complications during the latter part of pregnancy occurred about six times more in the teenage primigravidae but no cause could be established for the significant difference.

The rate of toxemia among the teenage primigravidae-154.8 per 1,000 compared with only 20.6 among the older groups-suggested a psychological difference in the stability of the vascular system. "It is possible that a personality makeup might be involved i.e., those who are likely to be toxemic or hypertensive are likely to marry and bear children early," the authors said.

The teenage group had-221.8 low-birth-weight newborns per 1,000, compared with 168.2 in the older groups. This could be attributed to the higher percentage of primigravidae who usually have smaller babies than multigravidae, and to the higher frequency of toxemia, the authors said; also, that the high incidence of low birth weight most likely contributed to the high neonatal death rate in the group.

Among the causes of maternal death, toxemia and haemorrhage came up three times more than infection and heart disease.

The authors noted that even if the national fertility rate went down, teenage pregnancies could continue to grow in view of the high proportion of youth in the population. Another aggravating factor is that most teenagers are not protected by contraceptives or other family planning practices.

In the light of these findings, the study proposed intensive care for adolescent pregnancy, and counselling and other emotional support.

Services to be extended this special group could include "prevention of recurrent pregnancies and provision of opportunities to discover more rewarding alternatives than pregnancy in their attempts to mature," the study noted.

SMOKING TRIGGERS VASOSPASM

Dr. Eugene Braunwald, professor of medicine at Harvard Medical School, said that coronary vasospasm plays an important role in some cases of sudden death, particularly in young people. Most of these patients have no evidence of atherosclerosis at postmortem.

"I also believe that this may be the mechanism by which cigarette smoking has an adverse effect on the heart," he said.

"It is known that nicotine causes increased platelet aggregation with subsequent local release of the powerful vasoconstrictor, thromboxane A₂. Thus it seems likely that cigarettes cause ischaemic heart disease by triggering vasospasm".

EMERGENCY SURGEONS CONFERENCE IN BRIGHTON JUNE NEXT

The 5th International Congress of Emergency Surgery will be held in Brighton, England in June 1981. The Congress is being hosted by Casualty Surgeons Association of Great Britain, which is the official body representing accident and emergency doctors throughout the United Kingdom.

Previous Congresses were held in Milan, Zurich, Paris and Barcelona.

The technical programme for the Congress has been planned to ensure wide coverage of accident and emergency medicine.

Further information can be had about the Congress, from Millstream Conferences. The fee is:

Registration by 30th September 1980- -80+-12 VAT

Registration by 31st March 1981-100+ - 15 VAT

Registration after 31st March 1981-120 +-18 VAT

The capacity for the Congress is limited to over 1,000 delegates.

TREATMENT TRIAL WITH PATIENT'S OWN MARROW

A nuclear physicist is being treated with an experimental method of leukaemia therapy at the Royal Free Hospital in Hampstead, London.

Doctors removed some of his own bone marrow when he was in remission and froze it. They then "cleansed" it of leukaemia cells and successfully transplanted it back when he had a relapse.

Five leading leukaemia specialists, giving details of the programme, said that they did not see big prospects for improving the treatment by drugs alone. They thought that the future success lay in bone marrow transplants. Dr. Raymond Powles, a consultant physician at London's Royal Marsden Hospital, said that although the disease could be temporarily halted in 80 per cent of cases by conventional methods, in about 50 per cent of them it returned.

Consequently, doctors had been experimenting with marrow transplants. The important consideration was to find a good match; otherwise the recipient rejected the transplant. Using new strong immunosuppressive drugs, a mismatch could now sometimes be made to work.

The most effective method now seemed to be to inject patients with some of their own bone marrow taken from them when they were in a milder phase of the disease. The difficulty, however, is that the marrow often had some residual leukaemia cells in it, which eventually started up the illness again.

Hence the experimental method being tried of "cleansing" the cells by treating them with antibodies.

TENTH NEPAL MEDICAL CONFERENCE FEBRUARY NEXT

Nepal Medical Association is holding its Tenth All Nepal Medical conference on February 19, 20, 21, and 22 next year at Kathmandu.

It is a bi-yearly event. The NMA has invited Pakistan Medical Association (Centre) to participate in the event. The PMA has sought applications from its members to attend the Kathmandu conference, and present a paper.

Scientific session is the main event of the conference, and there will be seminars and symposium on current medical topics. Scientific papers on many medical subjects will be presented in the conference. Scientific papers should be sent by December 1980, so that these could be published in the souvenir edition of Journal of Nepal Medical Association, which will be then distributed at the time of conference.

The participants themselves will have to bear their accommodation and travel expenses. Accommodation will be arranged for t accordingly.