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'A Better Tomorrow '

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**Department of Obstetrics and
Gynaecology, UKM**

1ST WINNER ORAL RESEARCH PRESENTATION

Endometrial Cancer in Pre-menopausal Women and Younger: Risk factors and Outcome

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ABSTRACT

Introduction: Endometrial cancer is the sixth most common malignancy in women and it is known to be a disease among postmenopausal women, but there is rising in the number of endometrial cancers among premenopausal women.

Objective: This study aims to determine the clinical characteristic, risk factors, outcomes and survival in pre and postmenopausal women with Endometrial cancer.

Methodology: A retrospective study was conducted in Hospital Melaka that involve all women who were diagnosed with endometrial cancer in Hospital Melaka from January 2002 until July 2020. All subjects' histopathological examination result was confirmed and their clinical data were extracted and transferred into a standardized data checklist and analysed.

Result: Total number of 392 cases was obtained from the Annual Cancer Registry Hospital Melaka. However, only 281 cases were studied, including 44.8% premenopausal and 55.2% postmenopausal. In the premenopausal group, there were higher incidence of obesity (30.8 + 8.6 vs 28.9 + 7.1), younger age at menarche (12.7 + 1.5 vs 13.3 + 1.6), lesser parity (1.47 vs 3.26), higher nulliparous women (46.8% vs 19.4%) as compared to postmenopausal group. The premenopausal group tends to be presented with a well-differentiated grading of tumour (52.4%) and a higher incidence of having concomitant endometrial hyperplasia (41.3%). The mean survival month among the premenopausal group is higher (200.3 + 7.9) months compared to postmenopausal group (153.9 + 6.5) months.

Conclusion: These findings correlate with good survival and prognosis among the premenopausal group compared to the postmenopausal group.

2ND WINNER ORAL RESEARCH PRESENTATION

Vitamin D Deficiency among Pregnant Women and their Newborns in a University Hospital, Kuantan during COVID-19 era

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ABSTRACT

Background: With the implementation of Movement Control Order (MCO) during the COVID-19 pandemic, more adults and children had limited sun exposure which is vital for Vitamin D production.

Objectives: This study was conducted to assess the prevalence of Vitamin D deficiency in parturient and their newborn, and the associated risk factors.

Methods: A cross sectional study was conducted involving 115 healthy pregnant women who delivered in SASMEC@IIUM. Maternal serum 25-hydroxyvitamin D [(25(OH)D] was taken within 24h of delivery, while cord serum 25(OH)D levels were taken from their newborn at birth. The linear relationship between the maternal and newborn serum 25(OH)D and the associated risk factors were identified.

Results: Results show that prevalence of Vitamin D deficiency 25(OH)D <50nmol/L was 88.4% in maternal and 87.4% in newborn, with only 11.6% of the maternal had a sufficient serum 25(OH)D ≥50nmol/L. The mean Vitamin D concentration in maternal was 33.9 nmol/L (SD = 16.05), and newborn was 35.7 nmol/L (SD = 14.26). The variables maternal serum 25(OH)D and newborn serum 25(OH)D were found to be strongly correlated, $r(113)=.877$, $p < .01$. Women who wear hijab and mask are more likely to have serum 25(OH)D deficiency compared with those

who not wearing hijab (94.7% to 55.6%), with significant relationship, $2 (1, N=112) = 22.54, p < .01$. Meanwhile, 90.4% of the mothers only had sun exposure less than 2 hours daily ($M = 1.67, SD = .97$) and this may have contributed due to the current pandemic COVID-19.

Conclusion: The lifestyle during the COVID-19 pandemic affects the prevalence of vitamin D deficiency in pregnant women. Malaysian women need Vitamin D supplements throughout their pregnancy in order to achieve the best epigenetics for the future generation.

Keywords: epigenetics, global health, nutrition, pregnancy

3RD WINNER ORAL RESEARCH PRESENTATION

Management of Cervicovaginal Atresia-a Case Series Review in Malaysia

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ABSTRACT

Introduction: Cervicovaginal atresia is a rare Mullerian anomaly. In the presence of functioning endometrium, typical presentation is primary amenorrhoea with distressing cyclical pain.

Objective: To describe three cases of cervicovaginal atresia managed by the PAG Unit, HCTM UKM with varying management approach.

Methodology: Cases aged 10, 13 and 25 were identified from medical files in PAG Unit, HCTM.

Case reports: The 10-year-old had cyclic debilitating abdominal pain for 6 months. MRI noted hematometra with no cervix and vaginal canal. She was treated successfully with continuous progestogen causing menstrual suppression. The 13-year-old had epilepsy and learning difficulties and was started on continuous progestogen. She developed an allergic reaction so a substitution to combined oral contraceptive (COCP) was made. This caused transaminitis. After counselling, the mother and patient decided on hysterectomy. The 25-year-old diagnosed at 13, with previous laparoscopic drainage of hematometra and menstrual suppression with hormonal treatment presented, requesting for a neovagina. She planned to get married and desired penetrative vaginal intercourse. A surgical neovagina was created and review after 3 months showed a patent vagina.

Discussion: Cervicovaginal atresia requires prompt evaluation and intervention. Management depends on patient profile and their wishes. Hormonal manipulation of the menstrual cycle is an option for those who do not fit surgical criteria. Creation of a neovagina serves to relieve obstruction and restore a normal sex life. A total hysterectomy is indicated after failed medical treatment or for those with neurodevelopmental challenges.

Conclusion: Management of cervicovaginal atresia requires referral to a tertiary centre and should be individualised.

Keywords: cervicovaginal atresia management; cervicovaginal; vaginal atresia; case series.

Comparing Childbirth Experience Between Induced and Spontaneous Labour During Covid-19 Pandemic

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ABSTRACT

Introduction: Every pregnant mother has a different expectation on each laboring experience and would want to imagine a pleasant journey about giving birth. A good childbirth experience boosts self-confidence, self-worth and feeling accomplishment. A bad childbirth experience leads to postpartum depression, fear of childbirth and some even experience post-traumatic stress disorder. Induction of labour (IOL) is a common procedure in obstetrics practice, done prior to onset of labour using mechanical or pharmacological methods. This questionnaire-based study was planned in order to improve our approach and service in making women more comfortable during the childbirth process albeit spontaneously or through IOL.

Objective: To compare childbirth experience among induced labour and spontaneous labour and to evaluate their contributing factors.

Methods: This was a cross sectional study where questionnaire was distributed to all postpartum women who had delivered in Hospital Canselor Tuanku Muhriz who fulfilled inclusion and exclusion criteria. Suitable participants were identified at postnatal ward just after delivery.

Results: A total of 314 women were recruited. Study showed no significant labour experiences difference among both IOL and spontaneous labour groups. Overall, both spontaneous and IOL groups had positive childbirth experience. Age, ethnicity body mass index labour analgesia and indication of IOL has influence in childbirth experiences.

Conclusion: Childbirth experiences were comparably positive in both groups possibly due to patients understanding of labour process and healthcare factors.

“Making Baby in Vagina Tube” – The Story of INVOcell: A Case Report

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ABSTRACT

Introduction: Intravaginal Culture (IVC) was proposed nearly 30 years ago to reduce the overall burden of setting up the modern embryological laboratory to facilitate access to reproductive care in a low-resource setting. The IVC technique uses a "small vaginal tube" created as a gas permeable culture device called INVOcell was then introduced. This device is used to culture the oocytes and sperm following the extraction. Then, it is inserted in the vaginal cavity – acting as a "natural incubator" aiming for fertilization and supporting the subsequent embryo development.

Case Report: A 34 years old woman presented with underlying subfertility due to tubal factors. She had a history of unilateral salpingectomy due to ectopic pregnancy. Her husband's semen analysis was normal. Therefore, she opted for Control Ovarian Hyperstimulation (COH) – IVF with an antagonist cycle. She received urofollitropin 300 IU daily (total dose - 1500 IU), then switched to HMG 225 IU daily (total 1150 IU). Upon three follicles reaching optimal size (> 18 mm³), ovidrel was used as a trigger agent prior to Oocytes Pick Up (OPU). Sixteen oocytes were retrieved, with thirteen mature oocytes (MII) and three immature (MI -2, 2 – GV). Five oocytes were placed in the IVC device, another four for conventional IVF, and the remaining four for ICSI. A total of twelve oocytes were fertilized; 80% were from IVC, 75% from conventional IVF, and 100% from ICSI. All were normal cleavage (2PN), except one was abnormal (3PN) from conventional IVF. At least eight fertilized oocytes (67%) progress to blastocyst up to day five culture. Surprisingly, good embryo quality; 5AA was seen in INVOcell culture compared to 5AC from conventional IVF culture. Others were acceptable embryo qualities; 1AB, ECB, and 4BB were frozen. We transferred the 5AA embryo from INVOcell during the same cycle – ET. The Beta HCG level was taken two weeks after embryo transfer, confirming biochemical pregnancy with a level of 83.3 IU/L. An ultrasound scan was done four weeks later, confirming a singleton viable clinical pregnancy. The pregnancy has progressed well-currently 32 weeks POA with details scan show

no gross structural abnormality.

Discussion: This case illustrates comparable fertilization, blasturation rate, and embryo quality between IVC, conventional IVF, and ICSI. Using the vaginal as a "natural incubator" do help in reducing the need for high technology embryological laboratory to implement IVF in a low resource center. The INVOcell can be commercialized with the proper selection of patients to ensure a good pregnancy outcome. Our case portrays a successful pregnancy following good embryo quality of 5AA form through the INVOcell culture method resulted in a successful pregnancy.