

International Conference on Women's Health, Gynecology & Obstetrics

July 08-10, 2014 DoubleTree by Hilton Hotel Chicago-North Shore Conference Center, USA

Prevalence of anaemia among pregnant women attending antenatal clinic at Mbagathi District Hospital, Nairobi

Wanjiru Nduhiu-Githinji
University of Nairobi, Kenya

Background: In the world, more than half the numbers of pregnant women are anemic. The burden of disease is heavy yet poorly estimated. Knowledge of the current situation in our environment is necessary. This knowledge will enhance early detection and timely management of anemia in pregnancy. The prevalence of anemia in Kenya has been variously studied with no reliable statistics by region though estimates exist. In Nairobi specifically, there are no documented studies on prevalence. However, pregnant women attending antenatal clinic are routinely put on iron supplementation in their second through to third trimester of pregnancy but the burden of disease remains high as determined by anemia related fetal and maternal mortality and morbidity. This study will seek to determine the prevalence of anemia in Nairobi as well as its associated etiological factors. The results of this study as well as its recommendations will help put in place policies to effectively investigate and manage anemia in pregnancy and therefore reduce the burden of disease.

Objective: The objective was to determine the prevalence of anemia among pregnant women attending antenatal care at Mbagathi Hospital, a Level Four Government Hospital in Nairobi County. Pregnant women were enrolled in the study at their first antenatal visit and questionnaires were administered to obtain demographic information. All the women who had a hemoglobin level of less than 11g/dl had further laboratory investigations to evaluate etiologic type and severity of anemia.

Results: Out of 381 women enrolled in the study, one hundred and thirty eight (36.2%) were found to be anemic. Anemia was more prevalent in the second (46.0%) and third (52.6%) trimesters. Seventy one women (51.4%) had mild anemia, sixty six women (47.8%) had moderate anemia while only one had severe anemia. One hundred women (72.5%) had microcytic anemia while thirty eight (27.5%) had normocytic anemia. There was no case of macrocytic anemia. Associations between presence of malaria and helminthic infestations were not found to be statistically significant. Twenty women (5.3%) had their first visit in their first trimester while one hundred and fifty nine (42.7%) had their first visit in their second trimester and one hundred and ninety three (43.8%) in their third trimester. Other sociodemographic characteristics had no statistically significant relationships with anemia in pregnancy.

Conclusion: Microcytic anemia most likely due to iron deficiency was the most prevalent type. Routine iron supplementation should be encouraged early in pregnancy and educating women on early initiation of antenatal clinic attendance would reduce the problem of anemia in pregnancy. Early diagnosis, treatment and prophylaxis for anemia in pregnancy should be undertaken to reduce the burden of disease.

carolyne.nduhiu@gmail.com