



**NIGERIAN INSTITUTE
OF MEDICAL RESEARCH**



**6TH ANNUAL SCIENTIFIC
CONFERENCE**

10th – 12th November 2015

THEME:

**ENDING THE COMMUNICABLE
AND NON-COMMUNICABLE
DISEASES DIVIDE IN NIGERIA**

Sub Themes

1. Impact Of Maternal And Perinatal Morbidities On The Growing Burden Of Non-communicable Diseases
2. Strengthening Health Systems In Response To Disease Epidemics
3. Onset Of Communicable And Non-communicable Diseases: The Interplay Of Environment, Poverty And Nutrition.
4. Integrating Laboratory Services For Quality Management Of Communicable And Non-communicable Diseases.

Venue:

**Institute's Auditorium
NIGERIAN INSTITUTE OF MEDICAL RESEARCH
Lagos Nigeria**

19/10/15

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Ending the Communicable and Non-communicable Diseases Divide in Nigeria

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of non-Communicable Diseases
Strengthening Health Systems in response to disease epidemics
Onset of Communicable and Non-Communicable Diseases: the
interplay of Empowerment, Poverty and Nutrition
Integrating Laboratory Services for quality Management of
Communicable and Non-Communicable Diseases

Tracks

Health Systems and Policy/ Non-Communicable Diseases
Malaria / Communicable Diseases
Maternal, Reproductive and Child Health/ HIV/TB

Featuring

Distinguished Lecture Series

Date: Tuesday, 10th - Thursday, 12th November 2015

Venue: Nigerian Institute of Medical Research 6 Edmond Crescent Yaba, Lagos

Distinguished Guest of Honour

His Excellency (Senator) Arthur Ifeanyi Okowa
Executive Governor of Delta State

Chief Host:

Mr. Linus Awute, *mni*
Permanent Secretary, FMOH, Abuja

Conference Chair

Prof Maurice Iwu
President
Bio-Resources Development
And Conservation Programme

Host

Prof. Innocent Achanya Ootobo Ujah, *mni*
Director General/CEO
Nigerian Institute of Medical Research

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were randomly selected for the DC. Semi-structured interviewer administered questionnaire was used. Physical examination was done to detect the presence of features of malnutrition. Data were analyzed using descriptive statistics, t-test and Chi-square test at $p=0.05$.

Results: 63.2% of mothers of children attending DC belong to upper SEC, 34.6% middle SEC and 2.2% low SEC compared to HE where 16.4% upper SEC, 38.8% middle SEC and 51.1% low SEC. Signs of malnutrition were more prominent among children cared for at HE. About 7.9% of children had bony prominence, 9.3% skin changes, 1.8% limb oedema, 2.1% fluffy hair and 6.1% pallor. Over half (55.0%) of the children from HE were stunted, 22.1% underweight and 4.5% wasted compared to DC 43.5% stunted, 5.1% underweight and 2.2% wasted.

Conclusion: Social economic class of the mother persists as a strong predictor of child's nutritional status and prevention against Communicable diseases.

WEMCOP02

Improving Reduction in Maternal Mortality in Semi-urban Communities in South West Nigeria

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Background: Maternal mortality represents a sensitive index of the prevailing health conditions and general socio-economic development of a nation. Developing countries have

been particularly worst hit, with Nigeria rated second globally at 560 maternal deaths per 100000 populations in 2013. There are still uncertainties as to the extent of this burden owing to current challenges with information and data collation in Nigeria, especially in rural and hard-to-reach areas.

Objective: The study aimed at identifying non-medical factors associated with maternal mortality and we hypothesized that no significant relationship existed between non-medical factors and maternal mortality

Methods: We analyzed secondary data from the 2010 Covenant University project on non-medical determinants of maternal mortality in Ado-Odo/Ota Local Government Area, Ogun State. We employed an informant approach questionnaire design, and information on maternal mortality was recorded from 360 eligible respondents-husbands who lost their wives within the last 3 years of the survey. Descriptive statistics and regression analysis were further applied.

Results: Regression analysis result showed that 'person who pays the treatment costs' ($P= .000$) and 'place of consultation' ($P= .000$) were significant on influencing maternal mortality. The F-test (17.384) confirmed the hypothesis that non-medical factors influence maternal mortality.

Conclusion: Our findings suggest that in a semi-urban setting with depleted health care system, empowering and improving the status of women may reduce maternal mortality and prompt better Safe Motherhood Initiative.

WEMCOP03

Sexual Function and determinants among HIV infected south western Nigerian women

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Background: Recent studies have demonstrated the impact of HIV infection on female sexual function, with only few addressing the effect of antiretroviral drug (ARV) use on sexual function. Sub-Saharan African is home to over 80% of women living with HIV, yet only limited number of published studies addressed the association between HIV, ARV use and female sexual function.

Objective: To determine the effect of HIV infection and antiretroviral drug use on female sexual function were evaluated.

Methods: Two thousand nine hundred and seven women (1086 HIV positive; 1821 HIV negative) seen between May 2013, and December 2015 at various community outreaches and clinics of the Nigerian Institute of Medical Research Lagos, were interviewed using the General health (GHQ) and Female sexual function index (FSFI) questionnaires. Obtained information was coded and managed using SPSS for windows version 20. Multiple logistic regressions was used to determine the relationship between HIV infection, antiretroviral drug use and FSFI scores. $P < 0.05$ was considered as statistically significant at 95% confidence interval (CI).

Results: Female sexual dysfunction (FSD) was found to be higher in HIV positives (71.4%) compared to 60.9% in HIV negative women ($P < 0.05$; OR: 3.5; CI: 2.1-6.9). The rate of FSD among

HIV positive women on ARVs was significantly ($P < 0.03$; OR: 3.2; CI: 1.9-5.6) lower (64.9%) compared to women not ARV (77.9%). Low FSFI scores were noted among women with severe HIV diseases, menopausal and depressive illness. Among respondents on ARVs, those on protease inhibitor (PI) based regimen (68.3%) had significantly lower FSFI scores compared to those not on PI (61.7%) based regimen ($P < 0.05$; OR: 2.1; CI: 1.2-4.7).

Conclusions: Female sexual dysfunction is common among our cohort. HIV infection, none use of ARV drug, menopausal state and lower GHQ score were found to be associated FSD. This finding highlights the importance of sexual health care in the management.

WEMCOP04

Prevalence and Factors associated with Child Sexual Abuse among Adolescents in Mushin, Lagos State

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Background: Child sexual abuse is a worldwide phenomenon involving more than 200 million children annually. There is a dearth of community based findings on the subject from our sub-region.

Objective: This study aimed to determine the prevalence and factors associated with sexual abuse among adolescents in Mushin community, Lagos State.

Methods: Multistage sampling was used to recruit participants and a semi-