group 15-45 were included for study. According to WHO, anemia in non-pregnant women is classified as mild, moderate, and severe (less than 80g/dl) on the basis of hemoglobin concentration. RESULTS: A total of six studies satisfy the inclusion criteria were included for study purpose. It includes a total of 4684 anemic women ranging from 26 to 3863 from different rural and urban areas of India. The overall prevalence estimate was 53.2% (95% CI, 41.1-64.9). Prevalence in rural and urban parts of India was found to be 55.2% (95% CI, 12.6-41.5) and 49.5% (95% CI 32.9-66.3), respectively. Among non-pregnant women, the prevalence was 52.6% (95% CI, 36.2-32.9) (0.001-0.005) the maximum number of patients followed by moderate 19.3% (95% CI, 18.1-21.0-6), and severe 2.2% (95% CI, 1.8-2.7).

CONCLUSIONS: Anemia is highly prevalent in Indian women. Nearly equal prevalence was reported from both rural and urban women population. Mild form of anemia was found to be more prevalent.

PSY20

ASSESSMENT OF IRON DEFICIENCY AND ANEMIA IN PREGNANT WOMEN IN FRANCE: AN OBSERVATIONAL STUDY

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OBJECTIVES: Anemia and iron deficiency are common during pregnancy and expose mothers to several risks such lower resistance to infections or reduced tolerance to significant blood loss and to surgical interventions during labor. Regarding the foetus, presumed risks include unfavorable obstetric outcomes notably, premature birth, low birth weight and fetal death. The present study aims at exploring the prevalence of iron deficiency and anemia among pregnant women in France and at evaluating the management of these conditions.

METHODS: A prospective observational study was conducted between June 2014 and June 2015. Randomly selected investigators (gynecologists, obstetricians, midwives registered in the CEGEDIM® database) were asked to include consecutive pregnant women attending for a consultation. At study initiation, a two-section questionnaire was completed by both the patient (self-assessment) and the investigator. Data collected consisted in age, gestation week, laboratory values (e.g. Hb, ferritin), and the prescription of iron (as monotherapy or in combination) and anti-anemia advice given/received.

RESULTS: 1506 patients were enrolled by 95 centres and data were analyzed for 1478 women. Investigators estimated that almost 60% of women were at moderate or significant risk of iron deficiency. Ferritin levels were <15 µg/L in 39% of patients (25.9% in 1st trimesters, 80.5% in 1st trimesters, respectively) and the overall prevalence of anemia was 15.8%. However, the proportions of these conditions increased with longer pregnancy duration. Medication for iron deficiency was prescribed to 57.3% of patients. 98.5% of anemic women and respectively 97.8% and 73.6% of women at significant or moderate risk of iron deficiency were prescribed medications (most iron-based). Among women receiving treatment, 45.1% had clinical signs of anemia and 39.3% received systemic iron preparations (i.e. ferrous fumarate).

CONCLUSIONS: In French clinical practice, the iron deficiency and anemia prevalence during pregnancy align with medical expectations. These conditions are managed according to national/international recommendations.

PSY21

PREVALENCE OF TRANSTHYRETIN FAMILIAL AMYLOID POLYNEUROPATHY IN PORTUGAL

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OBJECTIVES: Translational Familial Amyloid Polyneuropathy (TTR-FAP) is a rare, progressive, debilitating and life-threatening neurodegenerative disease. Although Portugal has one of the largest TTR-FAP foci in the world but recent epidemiological data is lacking. The purpose of this study was to estimate TTR-FAP prevalence in Portugal.

METHODS: Patient anonymized patient’s data was requested to Administração Central do Sistema de Saúde of Portugal to estimate the TTR-FAP disease has a prevalence of 20 per 100 000 inhabitants and that Portuguese ACSS electronic prescription database is useful, relevant and an adequate source of information for exploring the prevalence of TTR-FAP in Portugal. The municipalities with higher TTR-FAP prevalence are: Póvoa de Varzim (198), Vila Nova de Gaia (134), Boticas (111) and Barcelos (110).

RESULTS: A rare disease, Portugal has one of the largest TTR-FAP foci in the world but recent epidemiological data is lacking. The purpose of this study was to estimate TTR-FAP prevalence in Portugal. Altogether, 1,033 UCD cases in the EUS in 2015 and 2024, respectively. The prevalence was 1,89 per 100,000 in the 0-4 year-old age group, 1,63 per 100,000 in the 4-14 year-old age group and 1,57 per 100,000 in the 15-17 year-old age group.

CONCLUSIONS: From our knowledge, this study provides the first prevalence estimate of UCD in the EUS markets. With 1,027 estimated cases in 2015, it is expected that UCD treatments will be expensive given the small size of the patient population. Further, we extrapolated the trend from 2001-2012 to forecast the number of newborns through 2024. These data were entered into the incidence-survival model to calculate the prevalence of UCD from 2015-2024. RESULTS: We estimated a prevalence of 1,89 per 100,000 population in the 0-17 year-old age group resulting in 1,127 and 1,033 UCD cases in the EUS in 2015 and 2024, respectively. The prevalence was 1,89 per 100,000 in the 0-4 year-old age group, 1,63 per 100,000 in the 4-14 year-old age group and 1,57 per 100,000 in the 15-17 year-old age group.

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