SUMMARY

This study was conducted in order to find out the pattern and prevalence of anaemia in pregnancy among pregnant women attending antenatal clinic in Faith Mediplex, Benin City.

Background: Anaemia in pregnancy is a common problem in most developing countries and a major cause of morbidity and mortality especially in malaria endemic areas. A deliberate desire to know the current situation and pattern of this condition in our environment prompted this study. This knowledge will motivate the antenatal care givers towards early detection and prompt management of anaemia in pregnancy.

Objective: The objective was to establish the characteristics of antenatal attendees in Faith Mediplex, Benin City who have anaemia. The study will also determine the relationship between gestational anaemia and some aetiological factors in order to make practical recommendations that will improve the management of this condition.

Study Design: The study was a descriptive, cross-sectional study and the sampling method was convenient (non-probability) sampling.

Method: This study was conducted among 400 pregnant women at booking in antenatal clinic of Faith Mediplex, Benin City from August to November 2010. A questionnaire was used to obtain sociodemographic data of each respondent. Physical examination was done measuring weight, height, blood pressure, and symphysio-fundal height. Blood was collected for haemoglobin concentration estimation, genotype, malaria parasite, HIV test and peripheral smear. Analysis of data was done using statistical package for social sciences. Version 16.0 (SPSS 16.0)
Results: The prevalence of anaemia in pregnancy was 58.0% (Hb < 11 gm/dl) among antenatal patient in Faith Mediplex, Benin City. There was association between gestational anaemia and socioeconomic status, gestational age and malaria which were statistically significant. Multiple logistic regression analysis revealed only malaria as a good predictor of anaemia in pregnancy. There were no specific trends between anaemia in pregnancy and maternal age, parity and trimester at booking, HIV and haemoglobinopathy. Peripheral smear showed that majority of the respondents (69.2%, N=155) had microcytic, hypochromic anaemia which is a qualitative marker for iron deficiency anaemia. With reference to degree of anaemia, half of the pregnant women had mild anaemia while 7.1% were of severe variety.

Conclusion / Recommendations: Prevalence of anaemia in pregnancy was very high among pregnant women attending antenatal clinic in Faith Mediplex, Benin City. Majority had microcytic hypochromic anaemia indicative of iron deficiency anaemia. Most of the women with gestational anaemia are of mild degree while good number had severe variety. Gestational anaemia had statistically significant relationship with socio-economic status, gestational age at booking and malaria. Logistic regression analysis showed that only malaria was found to be a good predictor of gestational anaemia. A robust public health education to encourage preconception counselling, early prenatal booking with iron supplement, educational and economic empowerment for all women, and promoting preventive measures against malaria (chemoprophylaxis [IPTp] and use of insecticide treated bednets at home) were strongly recommended. All these will ensure considerable reduction in gravid anaemia and safe motherhood.

Keywords: Anaemia, Pregnant women, Antenatal care, Prevalence, Pattern.