

Evaluation of the effectiveness of Dienogest in long term: A retrospective study on long term treatment of Dienogest among endometriosis patients at Hospital Seberang Jaya, Pulau Pinang in seven years (Year 2016-2022)

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ABSTRACT

Introduction and Objectives: Endometriosis, a chronic disease is associated with severe, excruciating pain during menses, chronic pelvic pain, infertility etc. It affects 10% of women of reproductive age, worldwide. Current treatment with Dienogest effectively reduced pain symptoms, is devoid of androgenic properties, and glucocorticoid or mineralocorticoid activity. However, information regarding efficacy for long-term use is limited. This retrospective study is to determine and evaluate the efficacy of Dienogest in the treatment of women in the reproductive age group diagnosed with endometriosis at Hospital Seberang Jaya, Penang. **Methods:** Data on female patients in the reproductive age group, diagnosed with endometriosis and treated with Dienogest from January 2016 to December 2022 were collected and analysed. **Results:** The mean age (SD) of 100 patients (ranged from 22-50 years old) was found to be 36.2 (7.3) years old. Dienogest had successfully reduced the symptoms of endometriosis such as dysmenorrhea (80.7%) and abdominal distention (71.4%) ($p=0.001$). Longer treatment of above 3, 5, and 10 years recorded 100% positive improvement than those treated for 1-3 years (89.7%) or less than a year (48.0%) ($p=0.000$). Patients, diagnosed with endometrioma ($n=78$), uterine fibroid ($n=9$) and other ovarian cysts ($n=5$) and treated with Dienogest showed positive improvement at 75.6%, 66.7% and 40.0%, respectively ($p<0.001$). No significant findings ($p>0.05$) were recorded between Dienogest and improvement of treatment in terms of age, parity, marital status, type of employment, cyst size, infertility, and family history of endometriosis or gynae-related cancer. **Conclusion:** Long-term treatment with Dienogest successfully improved the symptoms of endometriosis.

Incidences, risk factors and management of postpartum haemorrhage among anaemic and non-anaemic patients in Hospital Seberang Jaya, Penang – A retrospective study (Year 2020)

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ABSTRACT

Introduction: Postpartum haemorrhage (PPH) remains a leading cause of maternal deaths contributing to 25% of global maternal mortality. We aimed to identify the incidence, risk factors, and management of PPH among our patients. **Methods:** We conducted a retrospective analysis of women who delivered in Hospital Seberang Jaya in the year 2020. We divided the cohort into two groups; anaemic versus non-anaemic patients. **Results:** A total of 346 cases of primary PPH out of 6,488 deliveries in year 2020 was recorded. The incidence of PPH was 5.4%. Incidence of PPH in anaemic and non-anaemic patients were 1.8% and 3.6%, respectively. Almost half (49.5%) of the patients had identifiable risk factors to PPH with induction and augmentation of labor being the main contributing risk factors in anaemic (29.6% and 24.7%) and non-anaemic (17.8% and 31%) groups. Followed by poor spacing in anaemic and non-anaemic patients at 16% and 17.8%. The major cause of PPH is Tone (37%) in anaemic and Trauma (41.9%) in non-anaemic patients. Majority of anaemic and non-anaemic PPH patients received injection of Pitocin (87.7% and 94.6%), followed by syntometrine (65.4% and 51.9%) and tranexamic (59.3% and 72.9%). **Conclusion:** The incidence of PPH in Hospital Seberang Jaya is consistently at par with population-based studies (5.0%). The commonest risk factor to PPH in Hospital Seberang Jaya is induction and augmentation of labour followed by poor spacing. Co-morbidities associated with PPH include diabetes and blood disorders. The interventions used are syntometrine, pitocin, carboprost, tranexamic followed by surgical measures.