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The Journal of Obstetrics and Gynaecology Research is the official Journal of the **Asia and Oceania Federation of Obstetrics and Gynaecology** and of the **Japan Society of Obstetrics and Gynecology**. The journal aims to provide a medium for the publication of articles in the fields of obstetrics and gynecology from within and beyond the Asia Pacific region. Organized in a reader-friendly format with articles available Early View ahead of print publication. Submissions of original articles both experimental and clinical, case reports and letters are welcome via **ScholarOne Manuscripts™**. Authors benefit from peer-review mediated through an internationally representative editorial board. The journal biennially presents Young Scientists Awards of 1000 US dollars to the authors of three papers selected by the international editorial board.

Aims and Scope

The Journal of Obstetrics and Gynaecology Research is the official Journal of the **Asia and Oceania Federation of Obstetrics and Gynecology** and of the **Japan Society of Obstetrics and Gynecology**, and aims to provide a medium for the publication of articles in the fields of obstetrics and gynecology.

The Journal publishes original research articles, case reports, review articles and letters to the editor. The Journal will give publication priority to original research articles over case reports. Accepted papers become the exclusive licence of the Journal. Manuscripts are peer reviewed by at least two referees and/or Associate Editors expert in the field of the submitted paper.

Keywords

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General Gynaecology/Urogynaecology

GGU P 01

Case Study: Lymphangioma Circumscriptum of Vulva – Report of a Rare Case

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Lymphangioma circumscriptum (LC) mimicking condyloma acuminata is reported here for its rarity. It is a localised group of thin walled and translucent vesicles resembling frog spawn 1. This is benign in nature and involves deep dermal and subcutaneous lymphatic channels. Typical clinical appearance is fluid filled septated vesicles that contain lymphatic fluid. LC can occur either as a congenital abnormality or as acquired damage to previously normal lymphatic channels. A fifty-one year old nondiabetic woman without any history of sexually transmitted disease and radiotherapy was admitted to our hospital with the complaint of extremely itchy vulvar lesion along with pain and swelling. Clinically, there were multiple vesicles grouped into textures resembling frogspawn particularly on the right side of the vulva involving labia majora and extending from the mons pubis to the perineal raphe and one small lesion over left labia lower part (Fig. 1) along with white discharge and broad swelling of the vulva. These fluid-filled vesicles first appeared 10 years back and these lesions had progressed in size very slowly till last year. General examination was normal and had normal Pap smear report of cervix, normal laboratory workup including blood biochemistry and serology for sexually transmitted diseases. Chest X-ray showed no lesion. Clinically it was diagnosed as a case of vulval wart with secondary infection. Patient was treated with some antifungal (clotrimazole powder.) and 5% Povidone Iodine solution three times daily for local cleaning for 5 days) was advised. Local excision of the lesion with elliptical incision all around it including 1 cm. of healthy margin, was done under spinal anaesthesia - including the vulval pad of fat. The wound was closed without a skin flap. Post operative recovery was uneventful. Histopathological examination confirmed the diagnosis of LC, with no evidence of malignancy and margins were free from lesion.

Discussion: Lymphangioma circumscriptum (LC) is a benign lymphatic malformation commonly occurring in shoulders, axillary folds etc. 3,4 and can present at any age. LC usually manifests with clusters of pseudo vesicles with thin walls. It can be asymptomatic but rarely may it appear as papules, nodules or wart-like lesions with pruritus, pain, secretion and cellulitis. Rarely the lesion can have a firm hyperkeratotic appearance. Since our patient's lesions were diffuse and extensive and the duration of disease was long (more than 5 years), hyperkeratosis and wart-like lesions may be due to long-term skin irritation. Most common cause of acquired form.

GGU P 02

Curb Teenage Pregnancy. Are we too Late?

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Aim: To study and evaluate the awareness of teenage pregnancy among patients attending the MCH clinic.

Methodology: A prospective questionnaire based survey carried out at the MCH clinic.

Results: A total of 100 questionnaires were analysed. From the analysis, 50.3% of respondents were between 20 to 30 years old, 38.7% between 31 to 40 years, 6% less than 20 years. 56 were of Malay origin, 15% Chinese and 29% were Indians. 21% received primary education, 62% had secondary education and 17% had tertiary education. 12.5% defined teenage pregnancy as 20 years and above, 42% (defined it correctly and 38% were unsure). 85.8% had heard about teenage pregnancy. Main source of information were from newspapers 53%, magazines 23%, rest from television and friends. 8% felt that teenage pregnancy can be prevented. 44% said that we prevent by creating public awareness, 27% said that parents should educate children, and 20% said by using contraception. 48% felt that teenage pregnancy was due to parental neglect, 23% due to broken families and 12% due to school dropouts. Only 28% of respondents agreed for sex education in primary schools. 15% felt that the children were too young, 30% want sexual knowledge to be a secret and 28% of parents feel shy to answer their questions. 63% said that teenage mothers should continue schooling, 37% said no of which 15% felt it was a humiliation, 14% felt they won't be able to concentrate

the trend was due to inadequate SRH education at schools. There was a significant difference between different types of devotees in agreeing whether a competent adolescent should be given the freedom to choose their own sexuality and to decide when to start having sex. In this context, Muslim respondents were least likely to agree on both constructs. The respondents' perception of the best contraception if required by an adolescent was condoms (52.2%). The Mann-Whitney test revealed that respondents significantly preferred parents to teachers in assisting adolescents' decision for contraceptive use. Interestingly, for respondents who supported in providing adequate SRH education at school and were aware of the benefit of contraception, may not agree in making contraception easily available for adolescents; Spearman's rho analysis reported a very weak relationship ($r = 0.07$) between the two constructs.

Conclusions: Malaysian adults were supportive of SRH education at school and support parental involvement in improving adolescents SRH. However, due to religious values and social norm, providing contraception and widening its accessibility to adolescents have become a controversial issue.

GGU P 13

Case Study of Cervical Ectopic Pregnancy

Sulaiman S, Azhary JMK, Chua SC

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Background: We report a case of a cervical ectopic pregnancy that was diagnosed using a transvaginal ultrasound and it was treated successfully with intramuscular (IM) Methotrexate. The gestational sac was shown to have reduced in size 2 weeks after presentation.

Case Description: A 36 year old lady in her second pregnancy had presented to us at 6 weeks period of amenorrhea with a chief complain of persistent vaginal bleed for 3 weeks. She has had two uterine surgery done in past for uterine fibroid (myomectomy) and delivery of her first child (lower segment cesarean section). On assessment, her vitals were stable and clinical she was not pale. Her abdomen was soft with no mass palpable. On vaginal examination revealed a healthy cervix, pin point cervical os with no active bleeding seen. However, the transvaginal scan (TVS) showed empty uterine cavity with a gestational sac seen within the anterior lip of the cervix measuring approximately 15 mm in diameter which was initially thought to be an intrauterine gestation sac by transabdominal scan. Fetal echo was clearly

seen (CRL: 8.8 mm) but no fetal heart activity was detected. An immediate B-hCG was 3761 IU/L. After discussion the option management with the patient, she opted for medical treatment. She was subsequently given IM Methotrexate 100 mg. At day 4 post administration of Methotrexate, the B-hCG fell to 2633 IU/L. The B-hCG continued to decrease to 1125 IU/L and 91 IU/L at day 7 and day 14 post treatment respectively. The repeated TVS at day 14 post treatment revealed neither a gestational sac seen within the cervix or free fluid in her pelvic cavity. We repeated a TVS and B-hCG 3 weeks after the administration of Methotrexate. The B-hCG was less than 2 IU/L and there was no signs of pregnancy by scan. She resumed her normal menses the following month. She was advised be on contraception for 6 to 12 months after treatment.

Conclusion: Diagnosis of a cervical pregnancy with the use of ultrasound maybe not be easy with a transabdominal scan. The option management for a hemodynamically stable woman with a cervical ectopic pregnancy should include medical treatment. This can decreased associated morbidity and improved the possibility of on-going fertility in affected patients.

GGU P 14

Imperforate Hymen in an Adolescent a Rare Cause of Acute Abdominal Pain: A Case Report

Aldo Suseno, John J.E. Wantania, Freddy W. Wagey

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Background: Imperforate hymen is a condition where hymen is completely closed so that menstrual blood cannot flow out. Imperforate hymen is likely the most frequent obstructive anomaly of the female genital tract, but estimates of its frequency vary from 1 case per 1000 population to 1 case per 10 000 population. A population-based study estimated the frequency at 0.5 case per 1000 women. The diagnosis in these patients is established based on history and physical examination. Imperforate hymen is a congenital malformation, but it can also occur as a result of scar tissue due to previous occlusive injury or infection.

Case Description: JK, female, Minahasan, 12 years 9 months, came to Emergency department at Pancaran Kasih Hospital, Manado on September 27th, 2014 with main complaint of never had menstruation yet accompanied by lower abdominal pain. Treatment of Imperforate Hymen can be done in non surgical and surgical measure. An imperforate hymen at the time of puberty must corrected by surgically. The objective of a hymenotomy procedure is opened the hymenal membrane in such a

way as to leave a normally patent vaginal orifice that does not scar. Currently, in this patient has done hymenotomy and vaginal drainage that aims to remove the existing hematocolpos. The prognosis of this patient is dubia.

Conclusion: Imperforate hymen is a rare condition but should be easy to diagnose when it presents. It should be suspected in pubertal girls who presented with acute abdominal pain.

GGU P 15

Case Series of Endometriosis Presenting as Acute Appendicitis

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These are 2 case series of patients who presented with acute abdomen and were operated for acute appendicitis. The cases were from 1998–2014. 1 had obvious endometriosis whilst the other had clean pelvis. All 2 clinically had acute appendicitis and underwent appendectomy. HPE however showed the pathology was actually endometriosis.

Conclusion: Pelvic endometriosis may present purely as appendicitis, following HPE confirmation, further treatment will be as conventional endometriosis.

GGU P 16

Application of Robotic Single-access Surgery in Benign Gynecological Fields

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Purpose: To evaluate the feasibility and safety of robotic single-access surgery using da Vinci single-site in benign gynecologic fields.

Method: prospective analysis of thirty six patients treated with robotic single-access surgery for benign gynecologic conditions from February, 2014 to August, 2014 at department of obstetrics and Gynecology, Keimyung university, school of medicine.

Result: Thirty six patients had robotic single-access using da Vinci single-site surgical platform including thirty four cases of total hysterectomy and two cases of ovarian cystectomy. No additional port was necessary and there was no case of conversion to multiport or laparotomy. There was no major complications; however there was one minor complication of fever.

Conclusion: Robotic single-access surgery using da Vinci single-site surgical platform is feasible and safe for benign gynecologic surgery. It restores triangulation and provides stable 3D HD visualization and precise ergonomic control. Nevertheless some limitations still exist including limited range of motion, inadequate movement of nonarticulating instruments and restricted usage of electrosurgical appliances. Further developments for instruments and prospective multicenter randomized clinical trial are necessary to prove and evaluate the possible benefits of robotic single-access surgery.

GGU P 17

A Prospective Comparative Randomized Controlled Trial on the Effectiveness and Efficacy between Laminaria Tent and Gemeprost (CERVAGEM) in the Management of Mid Trimester Missed Miscarriage

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Objective: To compare the effectiveness and efficacy of laminaria tent and gemeprost in the management of mid trimester missed miscarriage.

Methodology: A 10 months randomized controlled trial over a total of 68 patients in Hospital Universiti Sains Malaysia (HUSM) and Hospital Raja Perempuan Zainab II (HRPZ II) who had mid trimester missed miscarriage from November 2005 till August 2006, were randomized to receive either laminaria tent or gemeprost. The primary outcomes were the completeness of abortion in 48 hours or less, and the induction-abortion interval in both groups. Secondary outcomes were side effects of the trial drugs, length of hospital stay and maternal acceptance.

Results: The mean induction-abortion interval was significantly shorter in the gemeprost group (18.9 +/- SD 15.4 hours) than that in laminaria tent group (43.1 +/- SD 13.26 hours), $P < 0.001$. There was statistically significant difference ($P < 0.001$) in patients whom had aborted within 48 hours. 30 (68.2%) patients in gemeprost group, whereas only 14 (31.8%) patients in laminaria tent group aborted within 48 hours. There was statistically significant difference in term of completeness of abortion in patients whom had aborted within 48 hours, $P = 0.04$. There were 12 (85.7%) patients

ELECTRONIC-POSTERS

No	Topic	No
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Reproductive Endocrinology		
RE P 14	Diagnostic Performance of Hysterosalpingography for Intrauterine Pathology in 150 Infertile Women: Comparative Analysis with Hysteroscopy <i>Gaurav S Desai, Abhishek Chandavarkar, Sriram Gopal, Ganpat Sawant (India)</i>	RE P 19
RE P 15	Multiple Micronutrients (MMN) in Infertile Woman Undergoing Ovulation Induction: A Randomized Control Trial <i>Farzana Deeba, Parveen Fatima (Bangladesh)</i>	RE P 20
General Gynaecology / Urogynaecology		
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GGU P 02	Curb Teenage Pregnancy. Are we too Late ? <i>Mimita M, Magendra R, Farouk A (Malaysia)</i>	GGU P 22
GGU P 03	Awareness of Contraception among Women Attending the Maternal and Child Health Clinic <i>Mimita M, Magendra R, Farouk A (Malaysia)</i>	GGU P 23
GGU P 04	Evaluation of Female Sexual Dysfunction among Women Attending the Clinic <i>Mimita M, Magendra R, Farouk A (Malaysia)</i>	GGU P 24
GGU P 05	Evaluation and Outcome of Pap Smear Screening Programme at MCH Clinic <i>Mimita M, Magendra R (Malaysia)</i>	GGU P 25
GGU P 06	LPS Progress the Development of Endometriosis in Murine Model <i>Kaoru KEYAMA, Anna TANI, Sumika MATSUI, Takeshi KATO, Minoru IRAHARA (Japan)</i>	GGU P 26
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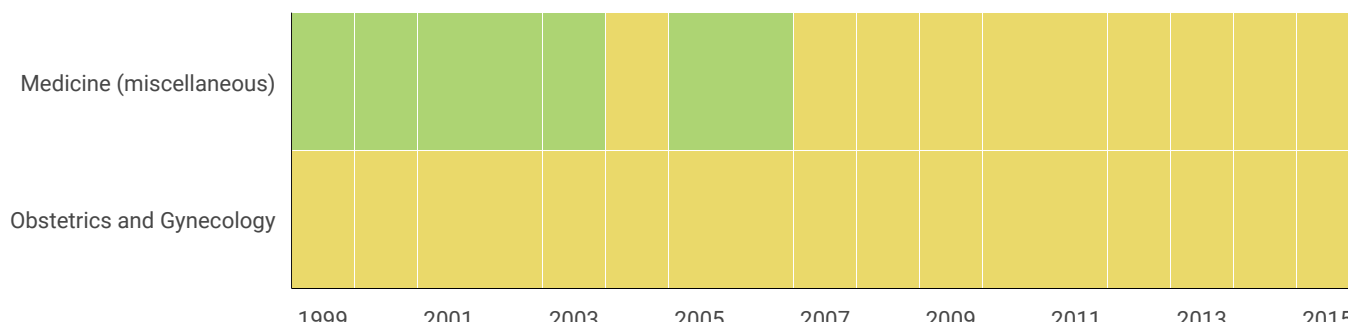
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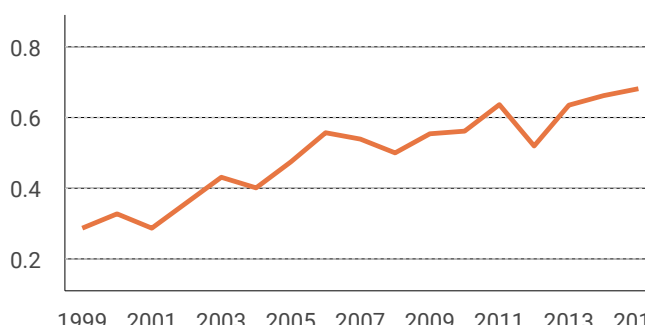
H Index

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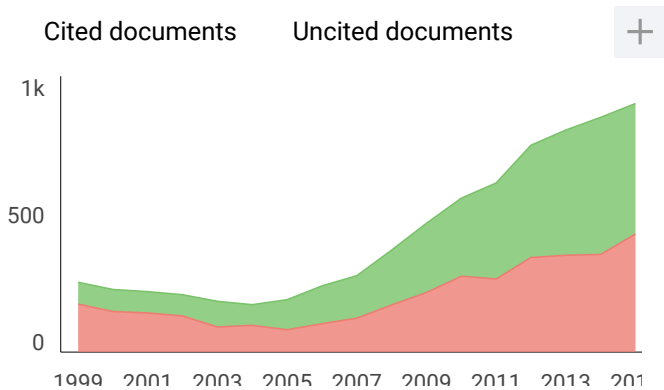
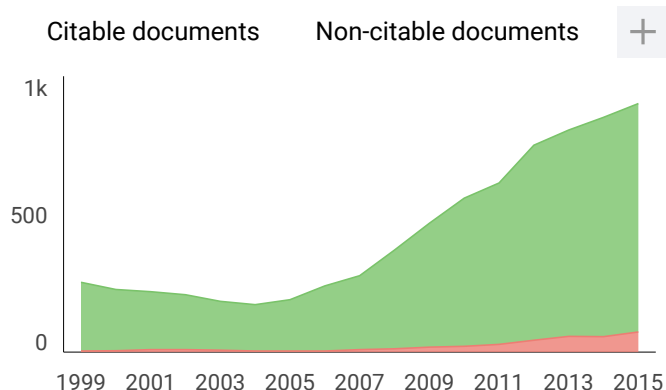
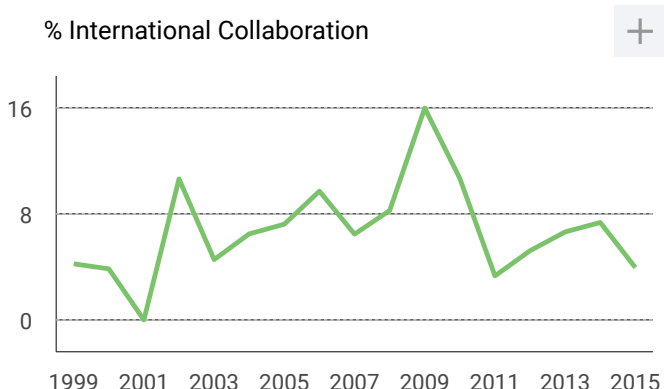
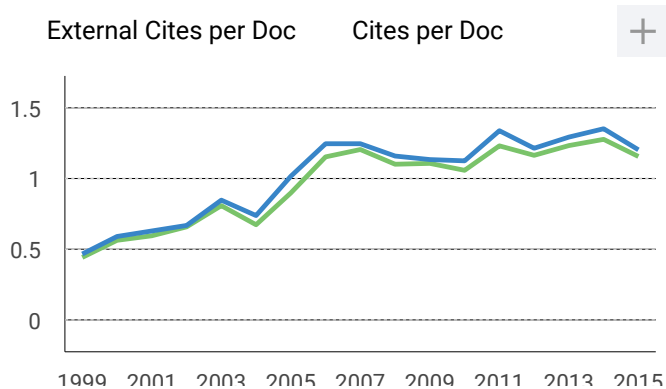
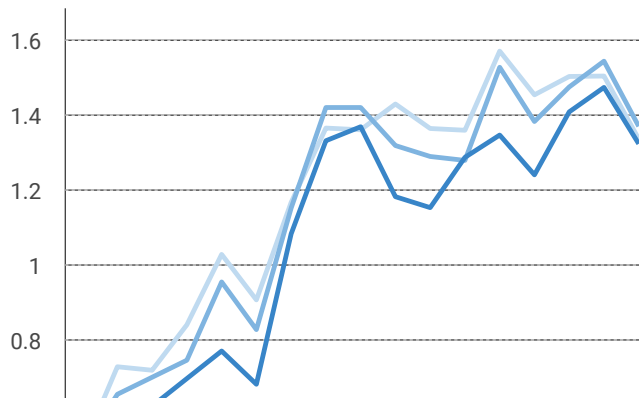
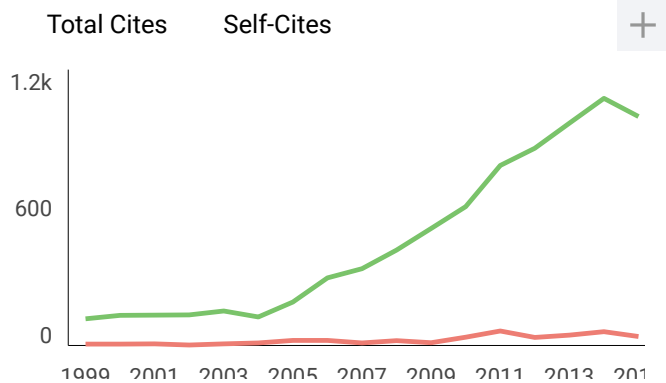
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1	Australian and New Zealand Journal of Obstetrics and Gynaecology	journal	0.814 Q2	49	132	377	2928	538	311	1.71
2	Journal of Obstetrics and Gynaecology Research	journal	0.521 Q2	38	304	901	6046	996	828	1.10
3	Breastfeeding Review	journal	0.310 Q3	19	10	66	195	30	41	0.50

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