Effects of Sanitation Practices on Adverse Pregnancy Outcomes in Urban India

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ABSTRACT

INTRODUCTION: Several risk factors predisposing women and their live-born to adverse outcomes during pregnancy have been documented, little is known about sanitation as a factor contributing to adverse pregnancy outcomes. The role of sanitation in studying adverse pregnancy outcomes remains largely unexplored in Indian context. This study is an attempt to bring the focus on sanitation as a factor in adverse pregnancy outcome. METHODS: The study is based on fourth round of National Family Health Survey covering 26,972 women in the age-group 15-49. The study variables include the mother's age, Body Mass Index (BMI), education, anaemia, and Antenatal care (ANC) visits during the last pregnancy. Children study variables include Low Birth Weight (LBW), the order of birth (Parity), and the death of the children occurred to the women in last five years. **RESULTS:** Findings from the study show that women who do not have access to the toilet within the house have a higher risk of adverse pregnancy outcome. In the multivariable model, there is no association found for adverse pregnancy outcome among women who do not have access to toilet and women who are using a shared toilet. Teenage (15-19 years), uneducated, underweight and anemic mothers are more likely to face APO as compare to other mothers in similar characteristics group. DISCUSSION: Our findings contribute to the decidedly less available literature on maternal sanitation behaviour and adverse pregnancy outcomes. Our results support that sanitation is a very significant aspect for those women who are about to deliver a baby.

KEYWORDS: Adverse Pregnancy Outcome, Sanitation, Low Birth Weight, Urban India.

Erectile Dysfunction Among Methadone Maintenance Patients

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ABSTRACT

BACKGROUND AND OBJECTIVES: Erectile dysfunction is one of the adverse effects of methadone. Erectile dysfunction affects more than half of methadone patient population. However, their behavior for seeking treatment is little known. This study aims to assess prevalence, risk factors as well as health seeking behavior for erectile dysfunction among methadone patients. METHODS: This is a cross-sectional questionnairesbased study. Seventy-six methadone patients from three primary health cares were assessed by using the International Index of Erectile Function 5 (IIEF-5). Patient with erectile dysfunction was further assessed with health seeking behavior questionnaire. **RESULTS:** The prevalence of erectile dysfunction was 46.1%. Age was found to be the only significant risk factor associated with erectile dysfunction in methadone patient (p<0.05). More than half patients (66.7%) with erectile dysfunction thought their sexual life was affected with the condition. Fifty-three percent of methadone patient had ever sought treatment for erectile dysfunction. Herb was the most popular self-treatment options among those with ED. **CONCLUSION:** The health seeking behavior for erectile dysfunction among methadone patient was at unacceptable level. The strategies are needed to increase awareness and detection of erectile dysfunction among methadone patients

KEYWORDS: Erectile dysfunction, opioid use disorder, methadone maintenance therapy