

# Obstetrics & Gynaecology specialist training in Malaysia during Covid-19 pandemic: Trainees' perspective

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## ABSTRACT

**Introduction:** The Covid-19 pandemic that struck the world had changed the global health system and caused changes in clinical practice and practitioners' exposure. The aim of this research is to study the perception of UKM Obstetrics and Gynaecology postgraduate students about the impact of Covid-19 pandemic on their specialist training. **Methods:** The survey had been carried out through Google Form among students enrolled in Doctor of Obstetrics & Gynaecology (DROG) program in UKM and consist of three sections: socio-demographic information, changes in role during Covid-19 and perception towards training. Quantitative analysis performed using Statistical Package for the Social Sciences (SPSS). **Results:** Out of 47 respondents, 13 were working in MOH hospitals, 17 in UKM Hospital and 17 in both MOH and UKM hospitals. 32 students (68.1%) felt increment in seeing obstetric patients and 31 students (65.9%) performed more obstetric procedures during Covid-19 pandemic. 29 students (61.7%) claimed had been seeing less gynaecological patients and 40 students (85.1%) performed less gynaecological surgeries. Total of 35 students (74.5%) agreed that Covid-19 pandemic had affected their mental well-being and 42 students (89.4%) agreed their social well-being had been affected. 43 trainees (91.5%) agreed that Covid-19 pandemic had negatively impacted their surgical skills in gynaecology. Mean for training perception score is 52.53 and there is no significant difference in mean score among students according to difference in study year and training hospitals. **Conclusion:** Covid-19 pandemic had caused negative impact to the specialty training among Obstetrics & Gynaecology postgraduate students in UKM.

# Omental feeding fetus: A rare phenomenon

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## ABSTRACT

**Introduction:** Ectopic pregnancy comprises 1-2% of overall pregnancy and abdominal pregnancy's incidence is 1:10,000. Identification of such pregnancy is crucial due to high mortality and morbidity rate. We describe a case to instill insights of such condition and enhancing clinical skills in tackling this potentially life-threatening condition. **Case Description:** A 30-year-old, G2P1 at undetermined period of gestation presented to the Emergency Department with persistent abdominal pain for 4 days with syncopal attack. Examination reveals a pale, hypotensive and tachycardic women with guarded and distended abdomen. There was an abdominal mass palpable which was equivalent to an 18-weeks gravid uterus size. Transabdominal ultrasound reveals empty uterus with thin endometrium. Gestational sac seen anterior to the uterus with CRL measuring 5.67 cm (consistent with a 12 weeks' fetal gestation). Fetal heart pulsation was seen. Free fluid noted at Morrison pouch. Patient underwent an emergency laparotomy and there was 3L hemoperitoneum, adhesion of uterus to bilateral pelvic wall and a rupture of the left fallopian tube. A mass covered by omentum containing gestational sac measuring 10x8 cm was seen. Left salpingectomy and adhesiolysis were done. Total blood loss was 6 liters. **Discussion:** Abdominal pregnancy can be primary or secondary. Based on the histopathological examination the latter is proven – an undiagnosed tubal pregnancy which ruptured and implanted onto the omentum. Diagnosis was concluded via ultrasound by the demonstration of gestational sac outside the uterus with fetus surrounded by abdominal wall material (bowel). Major concern intraoperatively is to separate the implantation from highly vascularised omentum.