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### Mood, pain intensity and pain relief in sickle cell disease

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**Objectives:** Pain evaluation is thwarted by the impact of confounders like mood and personal expectations. Factors which determine mood and pain perception can differ based on the setting. Here, we assessed the association between mood, pain intensity and pain relief in hospital versus home management.

**Design and Methods:** Participants were persons with homozygous sickle cell disease who experienced a painful crisis in the last year. They were asked to consider the last painful crisis and rate the pain intensity and mood when the pain was most intense, and the degree of relief following the first analgesic dose. Measurements were on a visual analogue scale of 1–10 with 10 being the worst pain, the best mood and the most pain relief experienced.

**Results:** Thirty-one persons participated, 32% of whom managed their last crisis at home. Overall, there was significant negative correlation between mood and pain intensity [-0.42 (95%CI -0.67, -0.07);  $p = 0.02$ ]. The correlation between the groups did not differ when stratified by treatment place. The mean pain intensity was significantly greater in those in hospital care: mean (SD) home score 4.9 (1.9) vs 7.0 (2.2),  $p = 0.02$ . Neither the mean mood nor pain relief scores differed when stratified by treatment place.

**Conclusion:** There is a negative correlation between improved mood and pain intensity; however, when stratified by treatment place the difference between the two was not significant. Hence treatment place is not a confounder between mood and pain intensity during the management of a crisis.

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### Sunscreen use among patients in two private dermatology practices in North Trinidad

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**Objectives:** To determine the knowledge of and patterns of sunscreen use among patients attending two private dermatology practices in North Trinidad.

**Design and Methods:** New patients attending two private dermatology practices in North Trinidad were invited to

participate in a sunscreen study. With informed consent, a self-administered 16-item questionnaire was completed. Data were analysed using SPSS 20.

**Results:** Two hundred and seventy-seven respondents completed the questionnaire, 75.5% were females. Age range 18–83 years; mean ( $\pm$  SD) 39.4 ( $\pm$  13.5) years; 39.0% were of African origin, Indian 15.9%, Mixed 37.2%, Caucasian 6.9%, Chinese 0.7% and other 0.4%. Two-thirds (66.3%) reported having had sunburn, 3% had a personal or family history of skin cancer and 66.4% reported sunscreen use. While 39.4% knew that sunscreens prevent sun damage, only 7.6% mentioned skin cancer risk. Of the 93 non-sunscreen users, 54.8% believed they did not need it. Fewer men than women used sunscreen 54.4% vs 70.3% ( $p = 0.016$ ); 62.3% of sunscreen users did so only for outdoor activities. There was no significant difference in sunscreen use between the lighter and darker skin types ( $p = 0.09$ ). The majority (73.6%) of those with previous sunburn used sunscreen vs 48.1% of people without a history of sunburn ( $p < 0.001$ ).

**Conclusion:** Persons of all skin types experience sunburn and while sunscreen use is recognized to prevent skin damage from sunlight, skin cancer risk is considered less important. Programmes that increase public awareness about the risks of exposure to ultra violet (UV) light and sun protection options available are essential, independent of skin phototype.

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### The knowledge, attitudes and practices of women who have attempted to terminate their pregnancies

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**Objective:** To determine the reasons why women terminate their pregnancies and their knowledge, attitudes and practices regarding contraception.

**Design and Methods:** A prospective study conducted at Port-of-Spain General Hospital on the patients at the Obstetrics and Gynaecological ward using convenience sampling.

The participants were divided into two groups: The patients who 1) attempted abortions and 2) did not attempt abortions. Their knowledge, views and practices regarding both contraception and abortion was determined through interviewer-administered questionnaires. Binary logistic regression was used to determine the significance of the demographical data with regard to abortion status.

**Results:** Of the 168 women interviewed, 114 never attempted abortions and 54 attempted abortions and both

groups showed great preference for condom use; 81.5% and 68.4%, respectively. Most women who attempted abortions (38.9%) felt that they were “not ready to be a parent” and 59.2% used misoprostol (Cytotec) to induce their pregnancies.

**Conclusion:** The level of knowledge of contraceptive methods of women who attempted abortions and those who did not was similar, however, their practices differed. More reliable, non-user dependent contraceptive methods should be promoted at the already operational family planning centres are proposed along with the heightened education about proper and continual use of more popular user dependent methods.

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##### **Obstetric characteristics and outcomes of pregnancies in a selected hospital in South Trinidad for the period 2008–2012**

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**Objectives:** To identify risk factors, maternal characteristics, outcomes and neonatal outcomes in teenagers 13–19 and older adults 25–35 years.

**Design and Methods:** A retrospective study conducted in a public general hospital in South Trinidad for the period 2008–2012. Data were collected from clerical and maternal registers. A total population of 14 791 was obtained; of these 2965 were teenagers and 11 826 older women. A sample size of 340 participants was identified by simple random sampling, 270 non-teenage mothers, and 70 teenage mothers. Data were collected using a pre-developed data coding sheet. Data were analysed by SPSS version 12.0.

**Results:** Among teenagers, there was a significantly higher rate of anaemia ( $p < 0.001$ ) and episiotomy ( $p < 0.001$ ). Teenagers also had increased rates of vaginal infections, lower segment Caesarean section, forceps deliveries, preterm deliveries, low birthweight and apgar score in infant and less neonatal unit admissions. Among adults, there was a significantly increased rate in pregnancy-induced hypertension ( $p = 0.041$ ), and increased rates in gestational diabetes, human immunodeficiency virus, syphilis, vaginal lacerations, postdates and post term deliveries.

**Conclusion:** Taking these areas into consideration, teenage pregnancy could have even better outcome by means of improved quality maternal care.

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##### **The epidemiology of fetal macrosomia and outcomes in a major teaching hospital in Trinidad**

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**Objectives:** The purpose of this study was to estimate the incidence of fetal macrosomia in a large teaching hospital located in the capital city of Port-of-Spain.

**Design and Methods:** All babies born at the Port-of-Spain General Hospital in 2010 and 2011 that were  $\geq 4000$  g were eligible for entry into the study. All indices associated with prenatal care and obstetric outcomes were measured.

**Results:** The incidence of fetal macrosomia was 5.4% in 2010 and 3.9% in 2011. The Caesarean section rate was 27%. Macrosomia occurred more commonly in African mothers compared to East Indian mothers.

**Conclusion:** Macrosomia is an emerging common complication of pregnancy, in a population with high rates of obesity; its prediction is imperfect, and there are no reliable interventions to improve outcome in uncomplicated pregnancies. Elective Caesarean section is seldom a suitable alternative, and elective induction of labour appears to increase rather than decrease the Caesarean section rate.

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##### **Knowledge, attitudes and practice related to depression management among physicians employed at the Public Hospitals Authority, Nassau, Bahamas**

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**Objective:** Depression is a very common but debilitating mental health issue that is often under diagnosed, and under treated. This study aimed to determine the knowledge, attitudes and practise of physicians employed by the Public Hospitals Authority, Nassau, Bahamas as it relates to depression management.

**Design and Methods:** A cross-sectional descriptive study was done utilizing a convenience sample at departmental meetings for psychiatry, family medicine, internal medicine, obstetrics and gynaecology, emergency medicine, surgery and anaesthesiology. A 33-item questionnaire was utilized, and the data analysed using the Statistical Package for Social Sciences (SPSS). Specialty-based and other variations were examined.

**Results:** One hundred and ten physicians participated in the study: 50% male and 50% female. Overall, participants had poor knowledge regarding depression, moderately stigmatizing attitudes, but good management of depression. Psychiatrists had excellent knowledge, good attitudes toward depressed patients and excellent management of depression. Generalists had poor knowledge, good attitudes and good management of depression, while non-generalists had poor knowledge, moderately stigmatizing attitudes and fair management of depression.

**Conclusion:** Although overall knowledge may be poor, physicians overall have good management of depression.

implications for religious institutions, clergy, suicide crisis responders and health providers.

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### **Religiousness and suicide in an adolescent sample from Trinidad and Tobago**

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**Objective:** To examine the associations of religiousness with suicide in adolescents residing in Trinidad and Tobago.

**Design and Methods:** Data are from Trend Research Empowering National Development (TREND) on adolescents in Trinidad and Tobago study. This is a school-based student survey that employed a two-stage cluster sample design to produce a representative sample of 4448 high school students from the 2008 student population for the highest grades in Trinidad and Tobago. Key measures included: suicide ideation, plans, attempts and treatment; religious affiliation, self-rated religiosity, attendance at religious services, reading, watching, or listening to religious content, and prayer; and race, age, gender, form level and parents' education.

**Results:** Connections were observed between religiousness and suicide. Catholic and Adventist affiliation reduced the odds of planning suicide, while Hindu and members of "other" religious groups showed greater odds of being treated for a suicide attempt. Self-perceived religiousness, attendance at religious services, and prayer were all related to lower odds of suicide ideation. Self-perceived religiousness and prayer were related to lower odds of planning suicide. The only variable to impact on reported suicide attempts was attendance at religious services as fewer attempts were associated with increased attendance at religious services.

**Conclusions:** Religiousness shows important associations with multiple measures of suicide. The nature of the relationship relies on both type and extent of religiousness and suicidal ideation and behaviour. An important role of religiousness in suicide prevention may exist and there are