



A STUDY OF PREVALENCE OF ANEMIA IN PATIENT OF AUB IN DIFFERENT AGE GROUPS

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ABSTRACT

Introduction: Abnormal uterine bleeding is defined as any bleeding pattern that differs in the frequency, duration and amount from a pattern observed during a normal menstrual cycle or menopause. It is one of the commonest gynecological problems for which women seek medical advice. **Objective:** To estimate the prevalence of anemia in patient of AUB in different age group. **Material and method:** A cross-sectional study was conducted in a tertiary health care center MY hospital Indore for period of 6 months, on 500 women in different age groups, attending gynae OPD with complain of abnormal uterine bleeding. **Result:** Due to acute or chronic blood loss associated with AUB manifested as frequent menses, heavy menstrual bleeding, most females with AUB develop anemia. The prevalence of anemia increases due to AUB in women. **Conclusion:** In present study also out of total 500 cases involved, 84 (16.8%) had severe anemia with Hb < 6gm% while in majority of cases (51.2%) had moderate anemia and mild anemia in 32% cases. In present study high prevalence of moderate and severe anemia was noted in AUB pt.

KEYWORDS : Abnormal uterine bleeding, heavy menstrual bleeding, Iron deficiency anemia

Introduction:

Abnormal uterine bleeding affects 10-30% of reproductive aged woman and up to 50% of perimenopausal woman. Pattern and causes of AUB differs in different age group. This may be seen at any age between, the menarche and the menopause, in nulliparous as well as in multiparous[1], Regular cyclic menstruation results the choreographed relationship between the endometrium and its regulating factors. Any type of disturbance between the regulatory mechanism of pituitary ovarian Axis[2] or pelvic diseases results in abnormal uterine bleeding.

International Federation of Gynecology and Obstetrics (FIGO) gave PALM-COEIN nomenclature to classify causes of AUB into PALM and COEIN group comprising of structural and non-organic entities respectively. AUB is the common cause of anemia and decrease iron store in woman.

Objective: To estimate the prevalence of anemia in patient of AUB in different age group.

Material and method: A cross-sectional study was conducted in a tertiary health care center MY hospital Indore for period of 6 months, on 500 women in different age groups, attending gynae OPD with complain of abnormal uterine bleeding.

TABLE 1 DISTRIBUTION OF CASES IN DIFFERENT AGE GROUPS

Age Group	No. of Patients	Percentage
upto 18 years	59	12
19-45 years	333	66
46 – 60 years	108	22
Total	500	100

Maximum number of patients belonged to the age group 19-45 years.

Table 2 SOCIOECONOMIC CLASSIFICATION OF STUDY POPULATION AS PER KUPPUSWAMY SCALE.

S N	SOCIOECONOMIC STATUS	No (%)
1.)	Upper Middle	48 (9.6%)
2.)	Lower Middle	98 (19.6%)
3.)	Upper Lower	236 (47.2%)
4.)	Lower	118 (23.6%)
	Total	500 (100%)

In present study maximum cases (70.8%) belonged to lower classes,

while only 9.6% cases belonged to upper middle class. This is due to the fact that study was conducted in government health care facility.

TABLE 3.) Distribution of study population on the basis of cause as per FIGO classification and endocrine disorders

S.No.	FIGO CLASSIFICATION	No(%)
1	P (polyp)	40 (8%)
2	A (Adenomyosis)	72 (14.4%)
3	L (Leiomyoma)	120(24%)
4	M (Malignancy)	30 (6%)
5	C (Coagulopathy)	1 (0.2%)
6	O (Ovulatory disorders)	130(26%)
7	E (Endometrial causes)	45 (9%)
8	I (Iatrogenic)	3(0.6%)
9	THYROID DISORDER	35 (7%)
10	Not classified	24 (4.8%)

Above table based on cause of AUB as per FIGO classification. Most common cause of AUB was ovulatory disorders (26%) followed by leiomyoma (24%). Thyroid abnormalities was found in 7%.

Table 4 Distribution Of Severity Of Anemia (Hb%) according to Age

Age (years)	No. of Patients	Hb%		
		<6	6-8	8-10
<18 years	59	19 (32%)	37 (62.7%)	3 (5%)
18-45 year	333	38 (11.4%)	172(51.6%)	123 (36.9%)
> 45	108	27 (25%)	47 (43.5%)	34 (31.5%)
		84 (16.8%)	256(51.2%)	160 (32%)

RESULT:

Due to acute or chronic blood loss associated with AUB which is manifested as frequent menses, heavy menstrual bleeding, most females with AUB develop anemia. In present study also out of total 500 cases involved, 84 (16.8%) had severe anemia with Hb < 6gm% while in majority of cases (51.2%) had moderate anemia and mild anemia in 32%.

In present study high prevalence of moderate and severe anemia was noted, due to the fact that major portion of the study population belonged to low socioeconomic status, the class of society that is usually less educated and ignorant about various government health schemes, having faulty nutritional habits yet constituting a major chunk of Indian population.

DISCUSSION

According to WHO , it is estimated that 52% of nonpregnant women of reproductive age are anaemic in India[3]. Women of reproductive age group , who suffer from menorrhagia and frequent menses pre pregnancy are more prone to develop anemia and related complication in pregnancy as compared to women with normal menstrual cycles. Anemic women who become pregnant are less able to tolerate peripartum hemorrhage and risk delivering babies with impaired neurological development[4]There is evidence that 25% perhaps more of women with the symptom of HMB have IDA[5], Anemia in turn leads to lethargy, decrease work capacity. Regardless of socioeconomic status, it is also apparent that cultural and medical professional normalization of the symptom of HMB adversely impacts the lives of women everywhere. Although this association between HMB and anemia seems to be very simple but addressing the issue and its complexities, as it involves breaking the misconception and false beliefs among women about the menses that is still considered a taboo in our society and often women hesitate to seek medical help for the same.

This further adds up to the disadvantages that are faced by people of low socioeconomic status owing to their ignorance towards health issues, poor nutrition and education. Including all this factor the severity of anemia increases with heavy menstrual bleeding. FIGO classification simplifies the diagnosis and cause of AUB that helps in making an organised approach towards management and treatment of AUB.

REFERENCES

- 1) Mary Ann Lumsden, Jay Mc Gavigan. Menstruation and Menstrual disorder. In: Robert W Shaw, W. Patrick Soutter, Stuart L. Stauton. Gynaecology. 3rd. ed . U. K, Churchill Livingstone;2003; 459-473
- 2) Schorge, Schaffer et.al. Abnormal uterine bleeding. In: Williams Gynaecology. 1st Ed. New York, McGraw-Hill; 2008; 174-96
- 3) World Health Organization, World-Wide Prevalence of Anaemia, 1993 to 2005, World Health Organization, Geneva, Switzerland, 2008.
- 4) Wieggersma AM, Dalman C, Lee BK, Karlsson H, Gardner RM. Association of prenatal maternal anemia with neurodevelopmental disorders. JAMA Psychiatry. 2019;76:1294–1304
- 5) Camaschella C. Iron-deficiency anemia. N Engl J Med. 2015;373:485–486.