

# SOGPNEWS & VEWS



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### President SOGP

Prof. Alfreed Zafar



I extend my warm greetings to all of you. By the grace of ALMIGHTY ALLAH and by the will of my esteemed associates, I feel honored to be the 16th President of SOGP. SOGP is the oldest functional society of Obs and gynae in Pakistan. Together we can bring a change in women's health care by infusing hope and enthusiasm. Our aims are to upgrade Obs and Gynae training and research by building more libraries, taking measures to reduce maternal and perinatal mortality, steps to improve training of traditional birth attendants and midwives. Moreover, Improving the collaboration between BHU's,

RHC's, THQ's, DHQ's and tertiary care hospitals. Upgrading the education of HO's, PG's and specialists by establishing skill labs, arranging workshops and seminars for them. We are planning to arrange surgical camps and breast cancer screening programs for rural areas. Our goal also includes to promote sub-specialties of Obs and Gynae, and take steps to send trainees abroad for sub specialty training.

Flag carriers are only as good as the people around them and I'm blessed to have high performing team with me. I want the next generation of Obstetrics and Gynecology to be stronger, more skilled and empowered to make a difference in health care.

I will try to fulfill all these goals with the help of previous executive council and members of society. Many events have staged in the running year from our platform and many more to come.

Presidents who preceded me cultivated this legacy of academic perfection and innovation that has left a profound mark on all of us. So we are looking further by standing on the shoulders of giants (very well said by Newton). I thank them and take it as my honor to follow them humbly.

### Secretary General

Prof. Nusrat Shah



Greetings to you all.

It is an honor and privilege to be the General Secretary of SOGP, a Society which stands for excellence and high standards in education and practice for the profession of Gynecology and Obstetrics.

On behalf of the New SOGP Executive Council I would like to take this opportunity to thank the out-going Executive Council for conducting the SOGP Elections in a smooth and transparent manner. I would also like to thank all members for participating in SOGP elections as without their support no activity of the society can be successful.

I extend my heartiest congratulations to the out-going Council for their wonderful performance and for successfully achieving their goals and objectives related to betterment of women's health. Now the challenge is for us to continue projects started by the previous Council and also to achieve the goals we have set for ourselves within the next three years, before we pass on the torch to the new office bearers.

The new team of SOGP, under the dynamic leadership of Prof. Fareed Zafar, has taken upon itself a great responsibility, that of educating the young gynecologists of Pakistan so that they are better able to save the lives of mothers and babies. In addition, the new council has a broad vision and mission for improving the health of women and also to help them achieve their basic rights of respect, dignity and equality.

We request all members to get involved in the educational programs of the society and provide us with their valuable feedback in order to help us improve our performance. We would also appreciate the help and guidance from the previous council members.

# Past President SOGP

Prof Tasneem Ashraf



Dear Colleagues and Friends

I am thankful to Almighty Allah to whom I give all the Glory, Honour and Adoration for the opportunity he gave to me to be the President of this great and wonderful organization. At this occasion I want to extend my warm welcome to all newly elected office bearers and congratulate them for being in the executive board of this august organisation. After 3 years of my tenure as president SOGP, the time has come for me to leave the office. But I have the feeling of fulfilment and satisfaction that SOGP remained very dynamic throughout our tenure and we have achieved most of our set targets. It is heartening to see that SOGP has gained Pace and Unity.

There is a spirit for team work and lot of enthusiasm among members of local chapters. During my term of office all the office bearers were very cooperative and supportive. My utmost gratitude to all my office bearers, executive and committee members, I feel so proud and honored to lead this excellent team. My especial message for all SOGP members is;

- · Don't forget to send your maternal death data on our Gmail account.
- · Include Breast and Cervical cancer screening in your clinical practices.
- · Follow SOGP guidelines and protocols especially for PPH and GDM.
- · Improve your clinical skills by becoming RCOG Associate Member.
- · Send Research Proposals to SOGP secretariat.
- · Keep yourself actively involved with all SOGP programs and keep in touch with SOGP through our website, WhatsApp and face book accounts for updates.

I love you all and very grateful for all your useful ideas and valuable suggestions and appreciate you for the support and the encouragement you gave me.

At the end I want to wish the very best to the new team and pray that SOGP may continue to progress and flourish at greater speed than today. Long live SOGP, Long Live Pakistan

### Past Secretary General SOGP

Prof.Haleem a Yasm in



Dear Members,

I am indeed very pleased to write this message to all of you as this newsletter is the last one from the previous executive committee of SOGP. I am grateful to all members of SOGP, Chairpersons of different sub committees and local chapters of SOGP. I want to mention with profound gratitude the courage and support provided by President Prof Tasneem Ashraf and vice presidents of SOGP. All executive members have been of great help to carry out so many activities of society. Members all

over the country are the real force behind any organization and SOGP has been very fortunate to have very active senior and junior members who always participate delightedly in different activities. These three years have added a lot to my learning experience and I have also tried to deliver all responsibilities with full zeal. I wish SOGP a very prosperous future with new executive members and all local chapters and sub committees We must always strive hard to enhance the quality of health care of our women through excellence in knowledge and professional skills. Great regards for all senior and new members of SOGP. May Allah help us all.

### SOGP Secretariat:

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### SOGP OFFICE BEARERS

President

Prof. Alfareed Zafar (Punjab)



### Vice President

Prof. Sadiah Ahsan Pal (Sindh)



### Vice President

Prof. Tanveer Jamal (KPK)



Vice President

Prof. Aisha Siddiqua (Balochistan)



Secretary General

Prof. Nusrat Shah



Joint Secretary

Prof. Tayyaba Waseem



Treasurer

Prof. Sonia Naqvi



Executive Mem bers:

Prof. Khair-un-Nisa



Prof. Tazeen Abbas



Prof. Shamsa Humayun



Prof. Amtullah Zarreen



Prof. Tasneem Ashraf



Prof. Haleema Yasmin



# FIRST NATIONAL CONFERENCE ORGANIZED BY SOGP ABBOTTABAD CHAPTER 6th - 7th August 2016 Sem inar Hall Ayub Medical College Abbottabad

Gynae con 2016 was organized in Ayub Medical College, Abbottabad by Prof. Dr. Aziz un Nisa Abbasi and her team of SOGP Abbottabad Chapter on 6th and 7th August, 2016. Leading obstetricians and gynecologists of Pakistan delivered state of the art presentations. Research papers were discussed in eight highly inform ative scientific sessions. The highlights of the two day national conference included oath taking cerem ony of SOGP Abbottabad Chapter, panel discussion of SOGP on zika virus in pregnancy and ghazal night. The inaugural session, attended by the chairm an and members of BOG, had Health Minister Khyber Pakhtunkhwa as chiefguest. The zealand enthusiasm of participants from allover the country made the conference











# PROCESS OF ELECTION W AS SUCCESSFULLY COMPLETED AND FINAL ELECTION HELD ON 2ND MAY, 2016

Chief Election Officer : Prof.SubhanaTayyab

Deputy Election Officer: Dr. Talha Zafar

Candidate representative for Prof. HumaQudusi: Dr. Sajjad Ahmed Siddiqui

Candidate representative for Prof. TayyibaWasim: Dr. Tayyba Sultan

Secretary General SOGP: Dr. Haleema Yasmin

Secretariat Staff: Mrs.RukhsanaZaki & Mr.Shahzad-Ur-Rehman



















# OATH TAKING CEREMONY FOR NEW EX. COMMITTEE (JUNE 2016-JUNE 2019)

Oath taking ceremony for the New Executive Committee of SOGP for the period of June 2016- June, 2019 held on 4th June, 2016 at ARENA CLUB, Karachi.

The elected new Executive committee Members took Oath and Prof. Fareed Zafar delivered a motivational speech to the members and pledged to uphold the esteem of the national society. Junior and senior members of SOGP were also invited to watch the ceremony and to be a source of encouragement for the NEW Executive members. The past president Prof. Tasneem Ashraf & Secretary General Prof. Haleema Yasmin acknowledged the previous e.c members of SOGP, and urged the new ones to fulfill their duties with commitment and sincerity. Prof Razia Korejo Past Vice President encouraged them to carry out their responsibilities to the best of their ability. At the end, the Oath-taking ceremony concluded with a note of thanks by Dr Shahina Zahoor the Past Treasurer.























# Minutes of the First Executive Committee Meeting of the New SOGP Office Bearers 2016 -2019

Conducted By: Prof. AI Fareed Zafar (President SOGP)

Venue: Pearl Continental Karachi Date: 4th June 2016 Time 8:00pm

- The New President SOGP, Prof Fareed Zafar welcomed and thanked everyone for attending this meeting. He invited each of the participants to come forward with their suggestions as to how SOGP can broaden the scope of its activities and improve its performance further
- Prof Fareed Zafar also emphasized that SOGP should work more towards achieving the goal of reducing Maternal and Perinatal Mortality and Morbidity in Pakistan
- Madam Sadigua N. Jafarey advised that the new SOGP Council should concentrate more on actions rather than words and try to fulfill the promises it has made on the day of its Oath-taking
- Dr Shershah Syed said that SOGP should plan more Surgical camps for rural areas and provide services to those who don't have access to health care facilities
- Prof Tasneem Ashraf advised that SOGP Secretariat needs to be expanded and all programs started in her tenure should be completed. She emphasized the importance of creating awareness about breast and cervical cancer screening programs, particularly VIA
- Dr Nusrat Shah suggested that SOGP website should be developed further and include information in local languages to spread awareness among women
- Dr Waseem Lodhi stressed the importance of developing information leaflets in local languages for spreading awareness among public
- Prof Asif Zia suggested SOGP should try to promote development of Šub-Specialties in OB-Gyn eg. Gyn Oncology, Fetal Medicine, Minimal Access Surgery, Infertility and ART etc
- Prof Tasneem Ashraf advised SOGP should send trainees abroad for Sub-Specialty Training on Government **Scholarships**

Prof Rubina Hussain said SOGP must acknowledge and remember the services of its pioneers. She also stressed the importance of collaborating with RCOG, CPSP and

- Dr Yasmin Wajahat appreciated the various SOGP CME's being conducted in different hospitals
- Dr Khairunnisa suggested SOGP should organize training programs and workshops on fistula repair surgery for young doctors
- Prof Ayesha who is an expert in breast surgery volunteered to work with gynecologists in arranging training programs for creating awareness about breast cancer Screening

- Prof Ayesha Siddiqa requested SOGP should hold a National conference in Quetta, Balochistan. She said the MMR of Balochistan is much higher than in other provinces, so we should try to arrange more training programs and workshops in different places in Balochistan
- Prof Ayesha Siddiqa also emphasized the importance of reducing the rate of iatrogenic surgical fistulas by conducting trainings for junior gynecologists
- Prof Tayyaba Wasim stated that FCPS gynecologist is working at DHQ hospitals. She reinforced the importance of Visual Inspection of the cervix with Acetic Acid (VIA) and PPIUCD Projects
- Prof Shamsa Humayun stressed the significance of change in curriculum and development of a common software
- Prof Ghazala Mehmood mentioned the various national projects being done at PIMS Islamabad
- Prof Rahat Qureshi pointed out that Sepsis is a major killer in underdeveloped countries and said that it may also be due to rising rate of resistance against antibiotics
- Prof Tazeen Abbas stressed on collaborative efforts
- Prof Abbas, General surgeon suggested that surgeons and gynecologists should work in collaboration

Prof Asha Mahesh mentioned the importance of Safe motherhood

- Prof Sonia Naqvi said that we should target the youth through the platform of SOGP since it constitutes 47% of our population. We should conduct awareness programmes targeting the youth in schools and colleges and discuss key issues revolving around adolescent sexual and reproductive health
- Dr Annie Samreen stressed on conducting exam related courses
- Prof Amtul Zareen said that no issue of women's health should be approved by the government without passing through SOGP
- Prof Azra Jameel highlighted implementation of comprehensive EMOC and the importance of controlling the rising rate of caesarean section to prevent placenta accreta

# Minutes of the First EC Meeting of New SOGP Office Bearers

- · Brig Memoona Mushtaque said that the SOGP council members should act as Supreme Council. She particularly stressed upon training of midwives. In addition, she said each local chapter should make their own Road Maps. She also suggested that Gynae house jobs should be made mandatory
- · Prof. Rubina Izhar congratulated the entire new team and wished them best of luck
- · Prof. Shabnam Shamim suggested that all of us should work hard
- · Prof. Shehnaz Hussaini stressed on collaborative effort
- · Col. Mubashira said that together we can move mountains "Hum Pahar Hilaaien Gaay"
- · Prof. Khadija Bano suggested gynae house job should be mandatory and for 6 months

Prof. Razia Korejo said that SOGP belongs to all not just JPMC. We should own it and work In collaboration in the end Prof. Fareed Zafar once again thanked everyone for their valuable suggestions and said the New Council will try to achieve all these objectives with the help and support of previous Executive Council as well as all members of the Society.

















# M inutes of the 2nd Executive Com m ittee Meeting held on 4th September 2016 at Karachi.

Minutes of SOGP 2nd Executive Committee Meeting on 4th Sep, 2016, at Karachi Marriott Hotel, Meeting start at 1:30pm to 5:00pm

Meeting was attended by following participants:

Prof Al-Fareed Zafar (President SOGP), Prof Sham sa Hum ayun (Exec Member), Prof Khairunnisa Memon (Exec Member), Prof Am tul Zareen (Exec Member), Prof Haleem a Yasmin (Exec Member), Prof Sadiah Ahsan Pal (VP Sindh) Prof Tanvir Jamal (VP KPK), Dr Nusrat Shah (Secretary General), Prof Sonia Naqvi (Treasurer), Prof Tayyiba Wasim (Joint Secretary), Mrs.Rukhsana Zaki (SOGP Office),

Regrets by: Prof Tasneem Ashraf (Exec Mem ber Baluchistan), Prof Tazeen Abbas (Exec Mem ber Sindh), Prof Ayesha Siddiqa (VP Baluchistan).

- The Meeting started with Tilaw at
- Minutes of 1st Executive Committee Meeting were read by Dr Nusrat Shah and President Fareed Zafar invited all participants to give their feedback about each point
- 1. Collection of Maternal Mortality data
- Prof Fareed emphasized that Maternal Mortality data should be collected from all tertiary hospital of Pakistan.

  A focal person selected from each teaching hospital will submit yearly data from the central record of the hospital to SOGP Secretariat.
- Once we have collected data from the whole country, we can give present it to the Government.
- Prof Ayesha Siddiqa will provide data from Baluchistan, Prof Tanvir Jamal from KPK and Prof Khairunnisa from Sindh
- Prof Razia Korejo is the chair of Maternal Mortality Comm ittee of SOGP
- Proform a used for data collection will be the one which is standard in NCMNH
- 2. Ruralareas cam ps
- Prof Fareed said a junior member from SOGP can be appointed as a focal person to sit in a free clinic set up by NGOs in rural areas so that high risk patients can be referred to tertiary hospitals
- Prof Haleem a Yasm in suggested a mobile van service can be arranged to be provide services to remote areas
- Prof Tanvir Jam alsaid one senior member and one junior member of SOGP can be made responsible for each rural area.
- Prof Am tullah Zareen said a mobile van can be arranged by each SOGP Local Chapter for their rural areas
- Issue of funding was discussed and it was decided that SOGP funds can be used to start from one area either Larkana, Hyderabad or Sukker.
- Dr Nusrat Shah said she had organized a SOGP camp in Tharparkar in July in collaboration with Jhpiego, and this can be replicated in other areas too
- 3. Program s started by outgoing President SOGP, Prof Tasneem Ashraf
- Maternal Mortality Data Collection already discussed earlier
- $\bullet\,$  VIA -Dr.Tayaba W asim  $\,$  will collect data from all hospital within 6 m on ths
- RCOG Mem bership Prof Fareed suggested that SOGP mem bers can take Associate Mem bership of RCOG to make a support group. This will give them access to British journals and will cost them only 55 pound per year for updating their mem bership



# M inutes of the 2nd Executive Com m ittee Meeting held on 4th September 2016 at Karachi.

### 4. SOGP Website

- It was decided that website should be improved but there is no need to include information for general public in local languages
- SMS service in local languages can be started to spread awareness among public
- 5. Sub specialty Development
- Dr Fareed asked all com m ittee m em bers about which sub-specialty training they can offer for training of junior obstetricians and gynecologists.
- Dr Sadiah offered to train in Laparoscopic surgery, colposcopy and IVF
- Dr Tayyiba said she will train in Gyn Oncology Surgery
- Prof Khairunissa said she will train in Infertility
- Prof Sonia also offered to train in Infertility and IVF
- Prof Tanvir Jam alsaid she will train in Operative Laparoscoy
- Prof Am tullah offered to train in Gyn Oncology
- Prof Fareed offered training in Laparoscopic surgery and IVF
- Dr Nusrat said she can conduct Medical Education Courses for faculty mem bers in development of MCQs & OSCE and in communication skills
- Dr Fareed inform ed that two students from Punjab were being sent abroad for postgraduation on Government funding
- 6. Conference in Baluchistan
- Dr Sadiah said situation in Baluchistan is not feasible for organizing a conference
- But it was decided that we should discuss with Dr Ayesha about organizing a conference in Quetta

### 7. PPTICD

- Dr Tayyiba suggested that data of PPIUCD from all centers should be integrated
- Dr Sham sa said we should develop electronic registries for data collection and research
- Dr Nuszat Shah said a research organization Better Health is willing to collaborate for online Registry development
- 8. Infection Control
- Dr Fareed said Sepsis is a major killer and Dr Am tuland
   Dr Tayyiba can form an Infection Control Committee
- 9. Sexual & Reproductive Health
- Dr Sonia said we should conduct awareness programs for school targeting the youth in schools and colleges about adolescent sexual and reproductive health
- 10. Collaboration with Government
- Dr Fareed pointed out that SOGP will prepare a document and presentation for provincial Govts and that all Govt decisions regarding women's health should be taken after consultation with SOGP
- 11. Caesarean section rate
- Dr Fareed advised Dr Nusrat Shah to collect the C-section rate data from all hospitals



# M inutes of the 2nd Executive Com m ittee Meeting held on 4th September 2016 at Karachi.

After discussing the Minutes of previous meeting, discussion was focused on the agenda of present meeting.

- 1. Increasing FIGO m em bership
- Dr Fareed said we must try to increase our votes in FIGO from 2 to 4 votes even though we will have to pay more fees
- SOGP should have its own stall in FIGO Congress
- 2.JSOGP
- Meeting to be arranged with JSOGP team in JSOGP office in Islam abad
- JSOGP can be shifted to main secretariat in Karachi
- JSOGP should be included in SOGP audit.
- 3.SOGP Finances
- All finances generated by SOGP conferences should be in SOGP account and finances should be kept transparent
- SOGP stall should be arranged in International FIGO Congress
- 4. News and Views
- News & views to be in print form
- 5. Local Chapters TORs
- · Local chapters should contribute 50% of profit earned during conferences to SOGP
- All m em bership registration m oney will go to central secretariat
- · Local chapters' accounts should be audited and report of audit should be sent to central office
- A letter to be written to Abbottabad chapter for 50% share
- The President will write a letter to Chairpersons of local chapters to recommend names of new committee members, to discuss event calendar and Oath-taking ceremonies
- 6. Collaborative partners of SOGP
- will contribute 35% of financial profits to SOGP
- 7. SOGP Biennial Conference 2017
- Tentative date for Biennial Conference is after 15 Oct 2017 Venue will be Karachi







# Suggestions received from SOGP Local Chapters

Prof. Razia Korejo

Outgoing Vice President (Sindh)

Dear Colleagues,

The new office bearers of the Society have assumed office and I wish to congratulate them all. The members have reposed their trust in a group of capable and dedicated individuals who, I am sure will carry out the responsibility they have taken on very ably.

The last three years were a busy time. The SOGP organized many events. Notable among them were one international conference in Islamabad and two national conferences in Karachi and Lahore. Various public awareness programs and workshops for safe motherhood were conducted all over the Pakistan. One big achievement of SOGP was that it has been accredited with PMDC for awarding CME credit hours. There was regular publication of newsletter from the Secretariat. Many members were inducted and it is particularly heartening to note that young enthusiastic gynaecologists are eager to contribute to various activities. New chapters of the Society were set up in Nawabshah, Larkana, Hyderabad, Lahore and Islamabad. This was all in an effort to increase the sense of participation among members. I am aware that the new office bearers are keen to further the cause of contributing towards teaching and training of young doctors and play an active role in policy matters to make a difference in the healthcare available to women, especially in pregnancy and childbirth. We all need to join hands with them in this mammoth task. I wish them success. in their efforts.

### Prof. Rakhshanda Rehm an

Heartiest congratulations to the new leadership of SOGP on assuming office, With this also comes immense responsibility of making a difference in the lives of expecting mothers and newborns in addition to dealing with other reproductive health issues. Although much has been achieved by previous office bearers of SOGP, challenges are still serious, We are behind other low and middle income countries with comparable economies in terms of our indicators pertaining to maternal and newborn health. Much is being done in urban settings but to make a real difference SOGP must reach the grassroot level in collaboration with Government of Pakistan MNCH programs in all Provinces, WHO and USAID. My proposal is to make a plan for the next 3 years with set targets to be achieved and defined timelines. Involve all local chapters and reach areas of actual need e.g family planning needs urgent attention to deal with uncontrolled population growth and therefore poor MNCH outcomes. The devolution of health to the provinces has created challenges as well as opportunities for action and SOGP must try to collaborate with Provincial Governments and offer technical support. By virtue of our membership we can reach far and wide. I extend best wishes and sincere support to the new leadership as well as to all members of SOGP.

### Prof. Roshan Ara Qazi

It's a humble suggestion for Professor Fareed Zafar to make himself available to everyone. All future communications should be from his side or from the Secretary.

The works which were started by Professor Lubna Hasan and then Professor Tasneem Ashraf and her team should be continued. If Dr Fareed and his team is happy I volunteer myself to run the Public awareness program as we have run it in the last tenure. The year calendar by SOGP is awaited. A separate SOGP FB page with regular updates is the need of the day.

All chapters should run their programs in a uniform way suggested by the central office to standardize the OBGY practices in the country. Many more suggestions will come up in future. Hoping a friendly relationship during this tenure for the betterment of the women's health in Pakistan.



# Suggestions received from SOGP Local Chapters

### Prof. Azizunnisa Abbasi

First of all heartiest congratulations to all the new members of SOGP.

All of them are senior and very experienced faculty members of obs/gynae from all over the country. I am sure they will perform much better than us. My suggestion is that we should concentrate more on teaching & training of health personals dealing with gynae patients at primary & secondary health care. Regular seminars /workshops & awareness programs should be arranged from SOGP forum.

### Brig Rtd. Prof. Mam oona Mushtaq

- 1. Local chapter chairpersons get together with new supreme council SOGP
- 2. Maternal mortality and Perinatal deaths data to be shared and remedy of visible causes endorsed
- 3. SUPREME COUNCIL SOGP CENTRAL BODY should collaborat with federal and provincial Govts.
- 4. Local chapters should increase awareness by arranging Seminar for PGS, Undergraduates and public.

### Dr. Fouzia Kashif

I congratulate the whole body specially Prof Fareed Zafar. I think you must involve all chapters along with their bodies so that there should not be a one man show. Wish you all the best

### Prof: Farida W agan (Naw abshah Chapter)

I appreciate the SOGP team for their efforts. We all are with SOGP in this mission to achieve our goals.

Here are some suggestions for the SOGP.

- Promote the preventive and therapeutic services related to women and child health.
- Promote the women's health, their reproductive rights and decrease maternal & perinatal mortality.
- Upgrade SOGP website so that all members can directly interact with each another and share their experiences and ongoing activities especially with those working at far flung areas.
- Publish gynecologist Directory
- Introduce the cancer screening programs in order to decrease cancer related women's deaths
- Start the SOGP based research program.



# REPORT OF 16th BENNIAL INTERNATIONAL CONFERENCE OF SOCIETY OF OBSTETRICIANS AND GYNAECOLOGISTS (SOGP)

The 16th biennial conference of SOGP was held in Lahore at pearl continental hotel from 11th to 13th March 2016. The conference chairman was Prof. Mohammad Tayyab and the organising secretary Prof. Nudrat Sohail. Initially a number of foreign speakers were invited in the conference, but due to the law and order situation they could not travel, and the AOFOG also pulled out for the same reason.

The number of pre-conference workshops conducted was about 40. These workshops were conducted all over Pakistan with great enthusiasm by the teaching faculty and experts. The topics of the workshops were very diverse including not only hands on emergency obstetrical and gynaecological drills and skills but also on topics like IUI, synopsis writing, research methodology, giving effective feedback, palliative care, care for sexual assault victim and patient satisfaction. The total number of registration in the conference was 2300 of which the majority were Family Physicians at a much lower rate and a few medical students too.

The inaugural session was held on 11th March, at 6: 30 pm. The chief guest was Mr. Mujtaba Shuja Ur Rehman, the provincial minister for excise and taxation. The chief guest in his speech showed his concern on the existing insufficient health care facilities for the public but in particular to the lack of health care facilities for the women. He urged the need to provide a good infrastructure for health care within the financial constraints. He appreciated the society for its continuing efforts to upraise the women health. He commended the efforts of the chairman of the conference, Prof Mohammad Tayyab for organising such a mega event. He also acknowledged the efforts of the organising secretary and all the committees to make the conference a success. The president of SOGP, Prof . Tasneem Ashraf in her address presented the achievements by the society during her tenure, specially the CME activities which took place during 2015 in various cities of Pakistan. The chairman of the conference Prof Mohammad Tayyab, in his address elaborated why the theme of the conference was chosen as 'improving women's health, let's join hands". He emphasised the need to collaborate all the efforts to bring all the necessary commitments by all those responsible and involved at political,















governmental and professional level to join hands to look after the health of our women, the women who are our mothers, sisters and daughters in Pakistan. He also welcomed all the delegates and participants of the conference. The SOGP report was presented by the general secretary, Prof. Haleema Yasmeen. The welcome note was delivered by the organising secretary, Prof Nudrat Sohail who thanked all the members of all the committees for their contribution in making the conference a success and also thanked all the team members of Gynae unit 3, Jinnah hospital, headed by Prof Mohammad Tayyab. The vote of thanks was delivered by the treasurer SOGP, Dr. Shahina Ishtiague who thanked the pharmaceuticals for their assistance in the conference. The conference souvenirs were presented to the chief quest, president SOGP, vice presidents SOGP, executive members SOGP, secretary general SOGP, treasurer SOGP, chairman conference and organising secretary conference. The inaugural session also included a segment of 'Sufi dance performance'. The inaugural session ended with dinner for all the participants.

The three days conference included two plenary sessions. The first plenary session was held on the first day and was named as Prof Hajira Hanif memorial session. It was done so by the chairman of the conference Prof Mohammad Tayyab to honour the great legendary Prof Hajira Hanif who left for her heavenly abode just few weeks before the conference. The session included state of the art lectures along with citation for the great teacher. The guest of honor for the session was Prof Shumaila Hanif, daughter of Prof Hajira Hanif. The session was heavily attended specially by the great legend's students. The second plenary session was held on the second day of the conference and was dedicated to Prof Khalida Adeeb Akhtar, a great gynaecologist who contributed immensely to the specialty, this session also consisted of state of the art lectures and a citation for Prof Khalida Adeeb. The session was heavily attended. The guest of honour were her daughter, Dr. Saba Akhtar, and her sister in law, pediatrician from Rawalpindi, Prof. Samiya Naeemullah. One of the salient features of the scientific program was the allocation of special slots to SAFOG, ASPIRE, PUGA associations. Another session was audit of maternal mortality in Pakistan, in which representation was taken from all the provinces of Pakistan to present data on maternal mortality and it was followed by open house discussion for comments and suggestions on this topic. Dr. Nighat Shah conducted the session. The former federal minister Begum













Shahnaz Wazeer Ali presided this session. A separate session was also given to SOGP to highlight the CME and patient welfare activities which had been conducted by the various chapters.

The papers presented in the conference pertained to different themes in obstetrics, gynaecology and medical education including diverse topics and updates. The speakers were eminent experts as well as young professionals from all over Pakistan. All three days of the conference were energetically attended by senior as well as young gynecologists reflecting the eagerness to keep abreast with the fast expanding medical knowledge and information. The gala dinner was arranged on the second day at the Royal P alm. The dinner included finest of Lahore and continental cuisine. The main attraction of the gala dinner was the entertainment by the globally famous rock star Atif Aslam, who generated a lot of energy in the audience with his songs. The popular female singer Shazia Manzoor also presented a number of her famous songs.

The last day of the conference included paper presentations as well as the executive committee meeting and the council meeting .The council meeting openly invited comments and proposals from all the SOGP members. The proposal was given for formation of Lahore chapter of SOGP.

The closing session was conducted soon after the SOGP council meeting in which the chairman of the conference acknowledged and thanked the participants of the conference and also presented shields to the pharmaceuticals who contributed in sponsoring the delegates and participants of the conference.

The 16th biennial conference of SOGP created some records in the history of SOGP by registering the largest number of participants in the conference, conducting the biggest number of preconference workshops and presenting the largest number of paper presentations.













# SOGPNEWS & VEWS































## Past President SOGP's report Prof Tasneem Ashraf (June 2013 - June 2016)

Achievements, Polices and Programs of SOGP for 2013-2016

During the tenure (June 2013- June 2016) we started several new programs, developed and implemented many new policies. During the term we tried to focus on uplifting the status of our organization, as well as on major Women Health issues and updating the knowledge of our members.

A glimpse of new programs and policies is as under.

Promotion of SOGP Membership,

- Through our local chapters' activities,
- · Conferences, workshops, and SMS alerts





(16th Biennial Conference at PC Lahore March 2016.)

- · We have given incentives for MBBS and minor diploma holder doctors practising OBGYN to become a member on discounted rate.
- · We are also seeking the membership of our overseas Pakistani colleagues and for that we have given Ad on our web site

Focusing on Women Health Issues

The major challenges in front of us were:

- · High maternal Mortality,
- · Inadequate safe motherhood services,
- · High population growth rate with ineffective family planning services.
- · Women 's death from preventable cancers such as Cervical and Breast cancers.
- In order to address the high MMR, we have generated a software with a Gmail account in order to count every maternal death, assess the exact magnitude of maternal mortality and to identify the high risk areas for maternal deaths and to plan strategy accordingly to eliminate preventable maternal mortality at health facilities and in the community.
- · Anaemia, Hypertension and Hyperglycaemia during pregnancy are major risk factors for maternal death. We advocated for effective and vigilant antenatal care, screening and management of these problems with simple measures.
- We arranged Public awareness programs and conducted various Workshops for safe motherhood practices in all the four provinces. These includes:
- · Importance of antenatal care,
- · AMTSL, Use of Misoprostol for prevention and treatment of PPH,
- · Post abortion care and Use of MVA.
- · We have made protocol charts and guidelines to tackle all 5 major causes of maternal death.

- · In order to fill the gaps in family planning services we are endorsing the practices of PPFP and PPIUCD. We have trained our gynecologists and postgraduates at local chapters.
- · Conducted various Public Awareness Programs and introduced SOGP activity calendar.
- We are advising all our members to include Cervical and Breast cancer screening in their clinical practices. We advocate Self breast examination and Visual inspection of cervix one minute after application of acetic acid (VIA) for screening of these cancers.
- SOGP guideline committee has made various guidelines these are available on website and soon will be published in a booklet form.
- We have started SMS services to update our members about any recent advances and upcoming events. We are also available on face book with name SOGP events and SOGP secretariat and on WhatsApp and share the updates with our members.
- · Revival of old local chapters and addition of new chapter, Lahore.



 $\label{thm:continuous} \textbf{President SOGP Prof Tasneem Ashraf administering oath to the members of Lahore Chapter.}$ 



Oath taking ceremony of Islamabad Chapter of SOGP

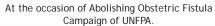


Oath taking ceremony of Hyderabad Chapter of SOGP

- · SOGP has been accredited with PMDC for awarding CME credit Hours.
- During these years there was regular publication of News & views newsletter and JSOGP. Journal is being indexed
  with PMDC and HEC and placed in Y category. Newsletter and journal are available on our website, free for our
  members.









PUGA conference at Ramada Islamabad



Women summit at Dubai

- · In order to keep our clinical practices at par with the developed world we are promoting RCOG Associate membership and signed an MOU with Royal College. The exciting thing about this is that SOGP members will get discount of 70% and will have to pay only 55 ponds / yr.
- I would like to highlight that during the past three years one Annual and Two biennial conferences were organised by SOGP. These have not only imparted knowledge to our members but also forge a stronger bond of fraternity.



Open Ligasure Surgery Workshop at BMC hospital Quetta

- · More than 200 preconference and post conference Workshops were conducted to give hands on training to our members. In the above picture you can see Open Ligasure Surgery workshop at Bolan Medical College Complex Quetta.
- Nowadays there is a trend for minimal invasive surgery and many of our young colleagues are enthusiastic to learn it so we have organised workshops on colposcopy, hysteroscopy and Laparoscopy.
- · At the same time, we are planning to establish Laparoscopic training centers at various cities of Pakistan to fulfill our needs.
- · We have not only organised activities at National level, SOGP remained very active at international forum and arranged SOGP and SAFOG sessions at AOFOG and FIGO conferences at Agra, Sri Lanka, Bangkok, Kuching and Vancouver.
- SOGP activities are regularly published in AOFOG and SAFOG newsletters.
- In AOFOG and FIGO assemblies our members actively contested for various Executive Board Posts.
- · We are bringing certain changes in the SOGP membership No . to make it more authentic and accessible on website.

### Planned for

- Raising funds for SOGP
- Expansion of SOGP secretariat (central office)
  - Addition in secretariat staff of
  - Research Specialist 0
  - Part time Legal Advisor O
  - Part time Auditor
- SOGP Research Program
- SOGP Linked Laparoscopic centers.
- Continuation of cervical and Breast Cancer Screening Program.

**Prof Tasneem Ashraf** 

President SOGP 2013-2016



# Activities of Quetta Chapter

Its honour for SOGP QTA chapter that 2nd National course for postgraduate was organized by Prof. Aisha Siddiqa at gynae unit 3 SPH quetta from 29 april to 8 may 2016,

There were 50 participants, professors from from all over country came to Quetta. It was appreciated by all postgraduates , this course not only helped to enlighten the post graduates knowledge but will also decrease the MMR in balochistan

Prof. Aisha Siddiqa Vice President (Balochistan)





# Revivaland OATH Taking Cerem ony on 21st May 2016 at Regional Centre, CPSP, Hyderabad

The event of revival of SOGP Hyderabad Chapter and OATH taking ceremony organized successfully at Regional Centre CPSP Hyderabad on 21st May 2016 at 12:30 noon.

President SOGP Pakistan, Prof. Tasneem Ashraf arrived at 10:30am

Prof. Razia Korejo, Mrs. Rukhsana Zaki and Mr. Shahzad-Ur-Rehman arrived at 12:15 noon.

Following Office Bearers participated in the ceremony and has taken the SOGP OATH administered by president SOGP at 1:00pm

Prof. Roshan Ara Qazi Chairperson Hyderabad Chapter Prof. Shaista Farooq **Executive Member** Prof. Razia Mustafa Abbasi Co-chairperson Prof. Pushpa Srichand **Executive Member** Secretary Prof. Raheel Sikandar Prof. Firdous Mumtaz **Executive Member** Finance Secretary Prof. Khairunissa Memon Executive Member Dr. Nusrat Nisar

Dr. Saira Dars Representative News & Views

Prof. Aftab A. Munir - Patron was out of country Prof. Amna Memon could not attend for some reason

The day was started at 8:30 am with seminar on management of Heavy Menstrual Bleeding. Updated talks were delivered by Prof. Roshan Ara Qaz, Prof. Sajida Yousfani, Prof. Raheel Sikandar and Dr. Nusrat Nisar followed by a very lively interaction.

About 125 Doctors, including new and old members of SOGP, Postgraduate trainees and general practioners of Hyderabad city have attended & participated.

SOGP registration desk remained busy in making new life members. About 75 new life members registered by the chairperson efforts. Their details as well as amount handed over to SOGP secretariat at the end of session. The program was ended up pleasantly at 2:30pm followed by the meeting of the new executive committee. Following points discussed

- To encourage more and more doctors to get registered with SOGP
- 2. To work through yearly calendar
- 3. CME's, workshops and public awareness programs to be organized according to year calendar
- 4. All executive members have to choose their areas of interest and should report to the Chair in next meeting to be held after arrival of Prof. Aftab A. Munir around 6th or 7th June 2016.

To open bank account and planning for fund generations

The meeting ended up at 3:15pm with vote of thanks by Chairperson, few pics are attached with captions.







### SERIAL NATIONAL PUBLIC AW ARENESS PROGRAM 2016

Public awareness committee remained active throughout the tenure. From January 2016 to May 2016 two Public Awareness Programs Organized on genital tract cancers & breast cancer screening and antenatal care. As usual participants interacted very well and shown keen interest in learning the self breast examination.







# Activities of Larkhana Chapter

- 1. MOTHER S DAY was celebrated, with distribution of gifts and flowers among the mothers admitted in the hospital. A colourful activity was arranged in auditorium where mother's role was appreciated by poems, songs and speeches. Later on, a meeting with ladies jail inmates was organized. Jail inmates felt happy to share their feelings with doctors. Gifts, flowers and food items were distributed after cutting cake. Professor Shahida spoke on mother's importance in building character of children.
- 2. MATERNAL DEATH AUDIT was conducted in the month of May 2016. It was attended by medical and paramedical staff, Cardiologist, Anaesthetist and Dean Surgical and Allied. Data presented and discussion concluded that haemorrhage was top most cause of maternal death.
- 3. HELPING BABY BREATHE (HBB), an evidence-based training program which was conducted by Mchip in Larkana to teach whole staff from Consultants to Midwives about neonatal resuscitation and the concept of The Golden Minute. Within one minute of birth, a baby should be breathing well or should be ventilated with a bag and mask.
- 4. INTERNATIONAL WOMEN'S DAY was celebrated both at Shaikh Zayed Women Hospital and with Inmates of DarulAman where inmates presented skits, sang song and lunch was arranged by SOGP Larkana chapter
- 5. SOGP CONFERENCE at LAHORE and PRECONFERENCE WORKSOP ON MANUAL VACUUM ASPIRATION: 20 residents from all 3 units of Shaikh Zayed Women's Hospital Larkana along with their Heads, WMOs, and Consultants attended SOGP conference at Lahore.

A Hands-On Workshop was organized by SOGP Larkana chapter on MVA as a preconference activity for residents and LHWs and midwives. Professor Shahida Magsi presented details of MVA procedure.

6. WORLD CANCER DAY: SOGP Larkana chapter from the platform of Shaheed Mohtarma Benazir Bhutto Medical University Larkana held an Awareness Walk and educational seminar for students, GPs and public to help fight against cancer to save millions of preventable deaths every year. Experts from various fields shared their expertise to adopt preventive strategies against cancer













# Activities during 15th Biennial Conferance at Lahore

Around 100 participants attended the workshops. The participants represented consultant gynecologists, postgraduate trainees and GPs. The feedback was outstanding. Especially the general practitioners admired SOGP for involving them in such activities as these workshops proved to be useful refresher for them. The postgraduate trainees also appreciated this effort and found the workshops very beneficial.

From my unit Dr. Bushra Aziz, Dr. Sarwat Ahsan, Dr. Rizwana Naz and Dr. Kanwal Nosheen presented the research papers. The details of topics presented are as follows.

- 1. Boric acid for treatment of vaginal candidiasis- Dr. Bushra Aziz
- 2. Fetomaternal complications in grandmultiparous women presenting in Gynae and obs department SGRH- Dr. Sarwat Ahsan
- 3. Active management of third stage of labour, conventional versus international federation of Gynae and obs guidelines in a resource poor setting- Dr. Rizwana Naz
- 4. Significance of meconium stained liqor to Fetomaternal outcome- Dr Kanwal Nosheen

	Topic /W orkshops/course	Venue:	Date	Num ber of participants
1	SPSS	Sir Ganga Ram Hospital Lahore/ FJMU	20th Jan 2016	13
2	Emergency Obstetric Skills	Sir Ganga Ram Hospital Lahore/ FJMU	20th Feb 2016	33
3	Cervical cancer screening	Sir Ganga Ram Hospital Lahore/ FJMU	26th Feb 2016	35
4	Scientific writing	Sir Ganga Ram Hospital Lahore/ FJMU	8th Mar 2016	19













## Activities of Lahore Chapter May June 2016

WORKSHOP ON VISUAL INSPECTION WITH ACETIC ACID (VIA) & COLPOSCOPY HANDS ON EXPERIENCE Workshop on VIA & hands on colposcopy for cervical cancer screening was arranged by Prof. Tayyiba W asim at Gyane unit III SIMS/ Services Hospital Lahore on 06-06-2016 in collaboration with SOGP. The workshop aimed at spreading awareness regarding cervical cancer with special emphasis on adopting VIA as screening method as pap smear is a failure in Pakistan. 30 participants including PGRs, SRs, APs from public & private sector hospitals attended the workshop. Dr. Noreen Zafar and Prof. Tayyiba Wasim were facilitators. Introduction to cervical cancer screening using visual inspection with acetic acid application was taught. Colposcopy findings regarding CIN I, II, III were shown to participants. Hands on application with acetic acid with Colposcopic examination were done.



BASIC OPERATIVE GYNAECOLOGICAL LAPAROSCOPIC WORKSHOP WITH HANDS ON TRAINING Workshop on basic operative laparoscopic skills was conducted in the Department of Gyane unit III SIMS/ Services Hospital Lahore on 26-05-2016 under kind supervision of Prof. Dr. Tayyiba Wasim in collaboration with SOGP. Total number of participants was 15 from different hospitals. Workshop was started at 8:00am with emphasis on operative laparoscopy in welcome address by Prof. Tayyiba Wasim. Lectures were presented by Prof. Sohail Khursheed Lodhi, Prof. Zohra Khanum, and Prof. Yousaf Latif. Introduction to endoscopy and anatomy, safety of gyanecological endoscopic surgery TIPS & Tricks, electro surgery were taught to candidates. Prof. Dr. Saqib Siddiq was guest of honor. Principal SIMS was chief guest. He presented shields to facilitators. After tea break hands on training was done from 11:30 to 3:00pm supervised by the facilitators. Hand on session included Hands eye coordination, rubber band, precision cutting, Traction - counter traction & clinical distribution techniques. The session continued till 3:00 pm and session was closed with thanks by Dr. Tayyiba Wasim to all facilitators and participants.



## PAK-CHINA MED CONG on 8-10th Jan, 2016 at Hotel Marriott Karachi.

PMA and SOGP organized the first ever PAK-CHINA MED-CONG from 08th to 10th January 2016. This joint congress of Pakistan Medical Association and the Chinese Medical Association (CMA) was planned to commemorate the historic event of Pak-China Economic Corridor as an initiative for joint Pak-China Medical Corridor. The Conference featured health experts from China and SAARC countries to deliver state-of-the-art lectures on a variety of medical and scientific topics of common interest.













SOGP was collaborating partner for International conference of LUMHS held at Jam shoro Hyderabad. A special panel discussion about preterm labour and its prevention was held 25-27 Dec, 2015















# SRM Conference 14 Feb, 2016

SOGP was a collaborating partner for the 7th fertility conference 2016 of SIRM. SOGP participated in different preconference workshops & conducted a panel discussion on gestational diabetes and its management guidelines.













# CME in Arena Club Karachion 17-3-2016 CME on Women's Health Care

Optimizing women's health before and between pregnancies is an ongoing process that requires access to and full participation of all segments of the health care system. The activities of this CME through different stations enhanced the knowledge of the participants.















# Maternal Mortality Meeting 2016 14-05-2016 Najam uddin Auditorium JPMC Karachi

The tradition of discussing causes of maternal mortality in different hospitals at the occasion of international mother's day was kept this year as well.All major hospitals of the town presented the data. Chairperson Prof. Haleema Hashmi and Co-Chair Dr. Rahat Qureshi concluded the meeting.



# SOGP arranged CME in different Cities in Pakistan in collaboration with Sanofi Events from Jan -May, 2016

These CMEs involved GPs of different towns and discussed the concept of spasmodic abdominal pain with help of case studies.

- Reported prevalence of abdominal cramping and pain is in the range of 10-46% among general population across different age groups.
- The prevalence is higher in women than in men
- There are more than 53 million diagnosed patients of abdominal pain in Pakistan

Regarding Acute Pelvic Pain in the emergency assessment of women of reproductive age it is important to exclude:

- Ectopic pregnancy
- Acute PID
- Ovarian cyst
- Endometriosis and you may be left with a diagnosis of Primary Dysmenorrhoea and musculo-skeletal Pain of pelvic floor

# Sem inar on Cancer Screening 30th Jan 2016 at Najm uddin Auditorium, JPMC, Karachi

Cervical Cancer is a silent killer, and is preventable! It is the second common cancer amongst Pakistani women ages b/w 15-45 yrs). It is estimated that 20 women every day die due to this disease. (Source: WHO, United Nations, the World Bank, IARC Globocan). It is mostly diagnosed at a late stage in Pakistan.

To address this issue of rising mortality of women in Pakistan, The SOGP in collaboration with AMAN organized an awareness seminar about causes and preventive strategies of Cervical Cancer. January is the Cervical Cancer awareness month worldwide.

The objective was to enhance the already launched platform of Teal Ribbon Alliance in Pakistan, thereby increasing awareness for Cervical Cancer and establish the need for prevention and screening.













### UPDATES OF FIGO INITIATIVE 2016

Objective1: To provide post-abortion care using MVA and medical abortion (MA) to at least 50% of women with incomplete abortion (by December 2015) in 7 Rural Health Centres (RHCs) or Taluka hospitals (primary and secondary health facilities) in 3 provinces of Pakistan, and increase this to 90% by June, 2017

Objective 2: Provide a FP method to at least 60% of women admitted for post-abortion care in the selected 7 RHCs/taluka hospitals, and ensure that at least half (30% of total) of these are provided a long-acting reversible method (LARC)

Objective 3: To compile a report of the impact of workshops held in 2014 (with 2013 emergency funds) on MVA and MA use, and postabortion FP counselling in the four public sector hospitals, and whether or not targets set were met. 2016 meeting for FIGO was held in Mumbai India and was attended by Dr. Shahida Zaidi and she presented the country plan of action in place of Prof. Haleema Yasmin. (Focal person for FIGO Initiative)

### UPCOMING INTERNATIONAL CONFERENCES

NEXT FIGO WORLD CONGRESS 2018 IS RIO DE JANEIRO IN BRAZIL.

The Annual to be held from 20 to 22 October 2016 in Dubai, U.A.E. continues to be the premier Oncology event in the Middle East. Continuing with it's congress theme "Promoting Excellence in Oncology", it will cover current leading topics on multi-disciplinary cancer treatments including breast, lung, stomach, head & neck, blood and other key areas.

The congress will also feature presentations on the study of the spread and control of cancer, early diagnosis, reducing cancer risk and cancer treatment.

For registration and abstract enquiries, call us on +97143116300.



11th International Conference of South Asian Federation of Obstetrics & Gynecology, from March 17th -19th, 2017 at Hotel Pearl Continental Lahore. The theme of the conference is "Meeting the challenges in women's health, old problems & new remedies" The SAFOG conference will be held in collaboration with SOGP.

Dates to Remember

Last Date of submission of abstracts and posters 04-01-2017

Precongress Workshops 14-3-2017 to 16-03-2017
Last Date of Registration Registration will not close

 Inauguration
 17-03-2017

 Banquet
 10-03-2017

 Valedictory
 19-03-2017

### UPDATES OF FIGO INITIATIVE 2016



# The 9th International Symposium on Diabetes, Hypertension, Metabolic Syndrome and Pregnancy

Maternal Medicine meets Fetal Medicine



# FETAL MEDICINE BARCELONA MARCH 8-12, 2017 • BARCELONA, SPAIN

7th Congress of the Asia Pacific Initiative on Reproduction (ASPIRE 2017) to be held in Kuala Lumpur, Malaysia from 30 March - 2 April 2017.

For further information please refer to our website:http://aspire2017.com/

Pattama Thuanchaisri, ASPIRE 2017 Secretariat, Tel: +66 2748 7881 Ext.114, Fax: +66 2748 7880, Email:pthuanchaisri@kenes.com

25th Asian & Oceanic Congress of Obstetrics and Gynaecology (AOCOG)

15 - 18 June 2017 Hong Kong Convention and Exhibition Centre

### DIPLOMA IN GYNECOLOGICAL ENDOSCOPY TRAINING

(Laparoscopy & Hysteroscopy), MIS 1: December 15-17, 2016, Location: Khalif Ahmad Al Habtor Medical Simulation Center, Sheikh Mohammad Bin Rashid University, Dubai DHCC, U.A.E., MIS 2: March 06-08-2017

### A SYMPOSIUM ON NEW DEVELOPMENTS

Technology, Controversies in Reproductive Medicine and Alternative Protocols For IVF October 13-14, 2016 | New York, NY USA

contact@ARTWorldCongress.com

# Raw alpindi Islam abad Chapter activities

Seminar on Maternal Mortality was arranged by SOGP Local chapter Rawalpindi-Islamabad on 26th May Grand Ambassador Hotel Islamabad.

Total Participants were 25 including serving and retired, private and government areas, from Rwp Islamabad, jehlum and chakwal.

Prof Abida Farooq was chief guest.

Data of maternal mortality was shared of year 2015 from all hospitals.

Madam Ghazala Mehmood Patron discussed prevention.

Brig Rtd Professor Mamoona Mushtaq Chairperson local chapter Rwp Islamabad SOGP discussed what and how SOGP can play a role in reducing maternal mortality in Pakistan.

Also mother's day organized by local chapter Rwp Islamabad SOGP at PIMS on 10th may 2016. All doctors brought their mothers. Brig Mamoona Mushtaq gave a talk on screening of breast cancer Prof Batool Mazhar discussed screening of ca cervix.



# National Conference Pakistan Urogynaecologist Association

National Conference was held in Islamabad in collaboration with, Pakistan institute of Medical Sciences (PIMS), NWFP, Pakistan Fistula Project, SOGP and UNWFP on 28, 29 & 30 April 2016 in Ramada Hotel.

The conferences was attended by more than three hundred doctors, including Professors, Obstetricians and Gynecologist, urogynaecologists, postgraduates. The scientific program started with preconf. Workshops on POP-Q made easy & hystero-sacro-colpopexy for pelvic organ prolapse on 28th April. Inaugural ceremony was held on 29th April. Federal Minister for women health and Vice chancellor SZABMU, PIMS Prof. Javed Akram were chief guests, Sara Afzal Tarar extended her support & help to PUGA & SOGP for women health issues at Govt. Ievel. She announced grant for PIMS and addition of new ward for fistula patients, supported by the Federal Govt. The sessions were chaired, co-chaired, lectures delivered by senior Professors and team of PUGA joined from all over country! Madam Pushpa Sirichand, Prof. Tasneem Ashraf, Prof. Farrukh Zaman, Prof. Arshad Chohan, Prof. Saquib Siddique, Madam Ghazala, Prof. Syeda Batool, Prof. Rizwana Chaudhari, Madam Haleema Hashmi, Prof. Nasira Tasneem, Prof. Fareesa, Prof. Mimona, Dr. Shaheen Zafar, Dr. Shahnaz Hussaini, Dr. Sonia Naqvi, Dr. Sajjad, Prof. Dr. Muhammad Ali, Dr. Nazli Hameed, Dr. Shagufta Tahir, Rukhsana Zaki etc. There were 8 scientific sessions, two plenary talks.

Prof Nasira Tasneem being host and Cheif organizer of Conference invited local doctors, senior Professor and faculty from SOGP to announce a local chapter. Oath taking ceremony was conducted by SOGP president vice-president and members. The program ended on 30th April after lunch Vote of thanks presented by Organizer to Pharmaceutical and Patrons, Prof. Batool, organizing team, PUGA members and participants.













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## Clinical Practice Guideline

## The Management of Uterine Leiomyomas

- 1. Women with asymptomatic fibroids should be reassured that there is no evidence to substantiate major concern about malignancy and that hysterectomy is not indicated. (III-D)
- 2. Treatment of women with uterine leiomyomas must be individualized based on symptomatology, size and location of fibroids, age, need and desire of the patient to preserve fertility or the uterus, the availability of therapy, and the experience of the therapist. (III-B)
- 3. In women who do not wish to preserve fertility and/or their uterus and who have been counselled regarding the alternatives and risks, hysterectomy by the least invasive approach possible may be offered as the definitive treatment for symptomatic uterine fibroids and is associated with a high level of satisfaction. (II-2A)
- 4. Hysteroscopic myomectomy should be considered first line conservative surgical therapy for the Evidence management of symptomatic intracavitary fibroids. (II-3A)
- 5. Surgical planning for myomectomy should be based on mapping the location, size, and number of fibroids with the help of appropriate imaging. (III-A)
- 6. When morcellation is necessary to remove the specimen, the patient should be informed about possible risks and complications, including the fact that in rare cases fibroid(s) may contain unexpected malignancy and that laparoscopic power morcellation may spread the cancer, potentially worsening their prognosis. (III-B)
- 7. Anemia should be corrected prior to proceeding with elective surgery . (II-2A) Selective progesterone receptor modulators and gonadotropin-releasing hormone analogues are effective at correcting anemia and should be considered preoperatively in anemic patients. (I-A)
- 8. Use of vasopressin, bupivacaine and epinephrine, misoprostol, peri-cervical tourniquet, or gelatin-thrombin matrix reduce blood loss at myomectomy and should be considered. (I-A)
- 9. Uterine artery occlusion by embolization or surgical methods may be offered to selected women with symptomatic uterine fibroids who wish to preserve their uterus. Women choosing uterine artery occlusion for the treatment of fibroids should be counselled regarding possible risks, including the likelihood that fecundity and pregnancy may be impacted. (II-3A)

Source: SOGC Clinical Practice Guideline. J Obstet Gynaecol Can 2015;37(2):157-178



## Clinical Practice Guideline

## Management of Spontaneous Labour at Term in Healthy Women

## Sum m ary Statem ents

- 1. The duration of the first stage of labour increases with maternal age and body mass index. (II-2)
- 2. In low-risk nulliparous women in the active phase of labour (i.e. equal to or greater than 4 cm dilatation), progress of cervical dilatation greater than or equal to 0.5 cm/hour is considered normal. (II-2)
- 3. Each labour unit should have a guideline for opioid use during labourthat includes the method of action, average and maximum doses, route of administration, possible maternal and fetal side effects, precautions, and opioid antagonists and resuscitative measures for each drug. (III)
- 4. Epidural analgesia provides the most effective pain relief for women in labour. The timing of initiation of labour epidural is dependent on the woman's choice once the diagnosis of labour has been established.(I)

### Recom m endations

- 1. Health care providers should delay term labour admission to the birthing unit until active labour (i.e., equal to or greater than 4 cm dilatation) is established. (II-2A)
- 2. Documentation and communication of labour progress are important aspects of labour management. Labour and delivery units should establish local policy regarding labour documentation, including partogram use and its application in labour management. (III-A)
- 3. Women should be informed of the benefits of upright positioning in labour and encouraged and assisted to assume whatever positions they find most comfortable. (I-B)
- 4. Women who are at low risk of requiring general anesthesia should have the choice to eat or drink as desired or tolerated in labour. (I-A)
- 5. Continuous labour support is recommended for all women in activel abour. Each labour unit should aim to provide the opportunity for each woman to receive continuous 1-to-1 labour support. (I-A)
- 6. Amniotomy and oxytocin, in addition to other measures, should beconsidered once a diagnosis of dystocia has been made in either the first or second stage of labour. (I-B)
- 7. Women and health care providers should have information about coping strategies for early labour and mechanisms for accessing support from caregivers. (III-A)
- 8. When appropriate, health care providers should support women in their choice of analgesic options in labour. These may include pharmacological and non-pharmacological measures. (III-A)
- 9. Each woman should be provided with evidence-based information about labour analgesia options prior to the onset of labour and offered ample opportunity to discuss the risks and benefits of each option available at her planned site of delivery. (III-A)
- 10. The use of meperidine as labour analgesia should be avoided due to its long-acting active metabolites and negative effects on neonatal behaviours. (II-2B)
- 11. Low-dose epidural, when available, is preferred over high-doseepidural for labour analgesia and in promoting mobility in labour. (I-A)



### Clinical Practice Guideline

- 12. Women who receive an epidural should be encouraged to maintain mobility and flexibility in positions of comfort throughout labour. (I-B)
- 13. Once an epidural has been established, the infusion should becontinued until completion of the third stage of labour. (I-A)
- 14. Pushing, as a component of second stage progress, may commence when the cervix is fully dilated, the presenting part is confirmed to be engaged, and the woman feels an urge to push. (III-A)
- 15. Delayed pushing is preferred when the woman has no urge to push, particularly if the presenting part is above station be preferred and an anon-occiput anterior position, assuming the fetus does not display abnormal monitoring and the pregnant woman's status is satisfactory. (I-A)
- 16. Delay of pushing according to parity and the presence or absence of an epidural should follow the time limits described in the text unless there are extenuating circumstances. (II-2B)
- 17. The method of pushing, spontaneous or directed with Valsalvamanoeuvre, should be chosen using the woman's own preference. Directed pushing may assist with the final expulsion of the head. (II-2B)
- 18. Avoid the use of routine episiotomy in spontaneous vaginal births. (I-A)
- 19. Prophylactic oxytocics should be given after the delivery of the baby. (I-A)
- 20. In term and preterm infants who do not require neonatal resuscitation, delayed umbilical cord clamping for 60 seconds is recommended irrespective of the mode of delivery. (I-B)
- 21. Dystocia should not be diagnosed prior to the onset of the active phase of the first stage of labour or before the cervix is at least 4 cm dilated. (II-2D)
- 22. Oxytocin augmentation should be titrated to avoid tachysystoleor excessive uterine activity and to produce a uterine contraction pattern of 4 to 5 contractions in 10 minutes (200 Montevideo units). A minimum of 4 to 6 hours of adequate uterine activity may be required to achieve the desired response. (I-A) It is recommended that every obstetrical unit have an identified and accessible protocol that includes a starting dose, increment interval, and maximum dose. Consistent use of 1 standard approach to oxytocin administration in any 1 obstetrical unit should be considered. (III-A)
- 23. Operative delivery less than 2 hours after commencing pushing is not recommended, provided maternal status and fetal surveillance are normal. (III-D)
- 24. When the second stage exceeds the recommended time limits, consideration should be given to expediting delivery. Extending these time limits may be appropriate in the presence of continued descent of the head, satisfactory maternal and fetal status, and imminent vaginal birth. (II-2B)
- 25. High-dose oxytocin regimens have been shown to decrease labour duration compared with low-dose regimens. The lowest dose needed to produce normal progress is recommended to reduce the risk of tachysystole or excessive uterine activity and to create a uterine contraction pattern of 3 to 5 contractions or 200 or more Montevideo units every 10 minutes. (I-A)

Source: SOGC Clinical Practice Guideline. J Obstet Can 2016;38(9):843e865

Coverage

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Pelvic Inflammatory Disease (PID) is one of the most frequent and important infections that occur among nonpregnant women of reproductive age and remains a major public health problem<sup>(1)</sup>

The main causative pathogens for PID are Chlamydia trachomatis & Neisseria gonorrhoeae

Doxycycline: An increased efficacy in the treatment of Genital Chlamydia Infection vs azithromycing 1g<sup>(2)</sup>

Doxycycline (Vibramycin)

- 3% Increased efficacy for the treatment of urogenital chlamydia in women
- 7% Increased efficacy for the treatment of symptomatic urethral infection in men





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Full Prescribing Information is available on request







# **Trichomoniasis** tablets as single dose of therapy

Prevention of post-operative infections tablets 12 hours before surgery

