

## From the editor's desk

Welcome to our first issue of 2015. This issue of JOGECA is unique in that, we will be incorporating the joint Kenya Obstetrical and Gynaecological Society (KOGS) and African Federation on Obstetrics and Gynaecology (AFOG) 2015 conference proceedings into it instead of having a separate supplementary issue. This will provide us with abstracts from a wide range of topics which should be exciting to read and we hope will generate interest in both the academic and research fields. The issue will still have very interesting original articles and case reports for the classic journal lovers.

In this issue, Rukiya *et al* (1) reminds us of an important yet easily forgotten cause of maternal morbidity i.e. post partum anaemia. A good haemoglobin (Hb) level is the hallmark of maternal wellbeing. However, we tend to generally treat all women with low Hb with haematinics without fully investigating the cause of anaemia. This may lead us to miss out on important causes that could lead to severe morbidity. As correctly stated in this paper, prenatal Hb is a key determinant of post partum anaemia, hence the need to ensure that the maternal haemoglobin levels are well maintained during pregnancy. Reduction in post partum anaemia not only leads to a feeling of wellbeing but also ensures quicker recovery and earlier return to productive work beside the psychological benefits.

In another interesting article Chowdry *et al* (2) explores the sustainability of Cervical Cancer Screening & Preventative Therapy (CCS&PT) programs. This paper provides very important lessons for those intending to roll out similar one-stop interventional programs in the region since they tend to be more complex than originally anticipated, and requires adaptation and continual strengthening of systems as was the case in the CCS&PT program.

We have an interesting case report by Muchiri *et al* (3) on small cell carcinoma of the cervix. While we

may all pass cervical tumours as being either squamous cell or less commonly adenocarcinomas, it is important to bear in mind the rare types, which unfortunately may be more aggressive.

Mutiso and Sequeria present a very informative case series of symptomatic hydronephrosis and the dilemma faced in its management. They highlight key features in the diagnostic workup for hydronephrosis, which should mainly be managed conservatively without resorting to invasive procedures.

I invite you to read these articles with a sense to critique and I will be glad to publish any letters that may emerge from this issue. I wish you all an enjoyable reading

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Editor-in- Chief

### References

1. Determinants of post-partum anaemia – a cross sectional study. Rukiya AM, Gachuno O and Machoki JM. *JOGECA*. 2015; **27** (1): 1-5.
2. Integrating cervical cancer screening and preventive therapy into reproductive health networks: Notes for the field Chowdhury R, Nuccio O, Njuma M, Meglioli A, White H, Makula J and Hashim CV. *JOGECA*. 2015; **27** (1): 6-10.
3. Neuroendocrine tumor of the cervix: A case report and review of literature. Muchiri D, Ojwang SB and Kibor KK. *JOGECA*. 2015; **27** (1): 11-13.
4. Symptomatic hydronephrosis in pregnancy: a case series and literature review. Is bigger always better? Mutiso SK and Sequeira E. *JOGECA*. 2015; **27** (1): 14-18.