Leech bite as a potential cause of per vaginal bleeding in children: A case report

Wan Noor Amalyna Wan Fadzil Adlan, Liyana Mastura Md Jalaluddin, Zulaikha Mohd Zahari, Anita Rina Ali
Obstetrics and Gynaecology Department, Hospital Kajang, Selangor, Malaysia

ABSTRACT
Introduction: Per vaginal bleeding in children is a concerning symptom for parents with a range of aetiologies, and leech bite is a potential cause, following contact with or swimming in contaminated water. Case Description: We present two cases of vaginal bleeding in toddlers presenting to a hospital in Selangor, Malaysia, and their subsequent management. In both cases, the children had given a significant history of swimming in the river prior to onset of vaginal bleed. In the first case, examination under anaesthesia with vaginoscopy was done and compression was done to the area of bleeding with tranexamic acid and diluted adrenaline solution. In the second case, the examination was done in the emergency department by using normal saline to flush through the hymenal opening. Discussion: Sanguinivorous leeches represent the minority of leeches and can cause bleeding for up to 7 days, sometimes resulting in anaemia or massive bleeding. Leech bite is more common in tropical areas, and may involve human orifices, resulting in an array of bleeding issues. Caution should be practised during removal of the leech to avoid heavy bleeding, and the possible methods are discussed. Comparison is made between the cases presented and other cases found in the literature in terms of management and complications. A careful history should be elicited to exclude leech bites as a potential cause of bleeding. Leech bite causes a range of morbidities and should be managed accordingly to avoid further complications.

Prognostic factors for Intrauterine Insemination (IUI) outcomes: Hospital Sultanah Nur Zahirah (HSNZ) experience

Jie Wen Chong, Nasuha Binti Yaacob
Department Obstetrics and Gynaecology, Hospital Sultanah Nur Zahirah, Kuala Terengganu, Malaysia

ABSTRACT
Objective: To determine the prognostic factors for IUI pregnancy outcome and identify the failure cause of IUI. Method: A retrospective descriptive study had conducted at UPR HSNZ from Jan 2022 to Dec 2022. We retrieved data from the IUI data sheet from the UPR unit. This study evaluated the association of paternal factors (paternal age and total motile sperm count), maternal factors (age, race, BMI, duration of infertility, causes of infertility) and the effect of ovarian stimulation regimens, ovulation trigger medication, number of dominant follicles, timing from ovulation to IUI, the total number of IUI cycles to pregnancy rate. Result: There was a total of 113 IUI in the year 2022. The overall pregnancy rate was 4.4%. The percentage of IUI patients over 35 in the population was 33.5%. The mean of maternal age vs paternal age was 33.75 vs 36.75. Among the predictive factor we evaluated, no other criteria significantly influence the clinical pregnancy rate of the IUI cycle. Linear regression revealed BMI as determining successful IUI factor with OR 1.29, CI (1.01-1.65), p=0.042. However, this result is contradicted by other studies. Conclusion: Only BMI was a significant prognostic factor influencing pregnancy rate among all the aspects. However, we noticed many patients did not fulfill the criteria to proceed with IUI during this study. Clinicians should pay more attention to patient selection to increase the success rate of IUI.