



INTRODUCTION

Non communicable diseases (NCD) are the leading cause of death and disability worldwide. It is the modern health challenge and the associated physical, social and economic implications are significant. It remains highly prevalent in Malaysia despite being potentially preventable.

The impact on Obstetrics remains unstudied although the implications are significant. The long term fetal implications are a major concern.

The objective of this study is to highlight the significance of NCDs in Malaysia and to evaluate its Obstetric implications. This is a vital step to create awareness of the gravity of NCD's; as Obstetricians now play a greater role in ensuring a future generation of healthy individuals. Prevention remains the principle goal.

METHODS

This is a retrospective cohort study. The study period was from 1st January 2011 till 31st December 2012 and 87,513 pregnant mothers with non-communicable diseases were studied.

Specific variables were extracted from the National Obstetric Registry of Malaysia (NOR) from all the participating hospitals in Malaysia, which totalled to 260,959 patients.

RESULTS

NCDs are highly prevalent in Malaysia with an incidence of 33.5% in pregnancy

NCD	Obstetric Complications				
	Yes	No	OD	P value	
	N (%)	N $(\%)$	(95% CI)		
	1) Anaesthetic complications & maternal collapse				
Yes	13 (56.5)	87,500 (33.5)	2.58 (1.13-5.88)	0.024	
No	10 (43.5)	173,436 (66.5)	1.00 (ref)		
	2) Caesarean section				
Yes	27,826 (44.1)	58,169 (30.1)	1.74 (1.71-1.77)	< 0.001	
No	35,332 (55.9)	135,107 (69.9)	1.00 (ref)		
	3) Primary PPH				
Yes	614 (44.0)	86,899 (33.5)	1.42 (1.28-1.58)	< 0.001	
No	780 (56.0)	172,666 (66.5)	1.00 (ref)		

Table 1: Non Communicable Diseases and Obstetric complications OD: Odds Ratio CI: Confidence Interval ; P value is based on simple logistics regression

Non Communicable Diseases in Malaysia: The Impact in Obstetrics

Ganeshan Muniswaran¹, Robert P Japaraj¹, M Krishan¹, H Suharjono², SA Soelar³, SD Karalasingam³, R Jeganathan⁴ 1- Hospital Raja Permaisuri Bainun, Ipoh, Malaysia 2-Sarawak General Hospital, Kuching, Sarawak, Malaysia 3- Clinical Research Centre, Kuala Lumpur, Malaysia 4- Hospital Sultanah Aminah, Johor Bahru, Johor, Malaysia

Nor mothers.

The maternal and fetal implications are extremely significant.

Prevention of non-communicable diseases should be the main aim. This may only be possible with a more holistic approach and a comprehensive national health policy. This global strategy will not be successful without political interest and declaration.

WHO. Global action plan for prevention and control of NCDs 2013-2020.



NCD	Fetal Complications				
	Yes	No	OD	P value	
	N $(\%)$	N $(\%)$	(95% CI)		
	1) Fetal macrosomia				
Yes	2,497 (71.4)	85,016 (33.0)	4.78 (4.43-5.15)	< 0.001	
No	998 (28.6)	172,448 (67.0)	1.00 (ref)		
	2) Shoulder dystocia				
Yes	247 (53.7)	87,226 (33.5)	2.16 (1.79-2.60)	<0.001	
No	213 (46.3)	173,233 (66.5)	1.00 (ref)		
	3) Prematurity				
Yes	9,675 (32.7)	77,838 (33.6)	0.92 (0.90-0.95)	< 0.001	
No	19,933 (67.3)	153,513 (66.4)	1.00 (ref)		
	OD: Odds Ratio CI: Co	nfidence Interval ; P value	ses and fetal complication to based on simple logistic	s regression	
The im	plications are signif	icant despite being	corrected for age an	nd ethnicity	
CLUSIC	ONS				
ommunic	cable diseases are hi	white prevalent in Ma	alaysia, which affects	1 in 3 pregi	

REFERENCES

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Disease Control Division, Ministry of Health Malaysia 2010. National Strategic plan for Non Communicable Disease.

