



Sri Lanka Medical Association

128th Anniversary International Medical Congress

*“Connect, Communicate, Collaborate for
Improved Health and Healthcare”*

Inauguration on 5th July 2015

Cinnamon Grand, Colombo

Main Congress from 6th – 8th July 2015

Galadari Hotel, Colombo

Conclusion: Outcome-based approach provides an effective way of developing a intergrated multisectoral nutrition promotion.

PP116

Goniometer assessment on knee osteoarthritis among patients seeking ayurveda medicine in Jaffna district

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Introduction & objectives: Worldwide, Knee Osteoarthritis (KOA) is the most common rheumatic disease and one of the five leading causes of disability among elderly men and women. Disability and functional limitations are based on physical changes experienced due to the disease progress of KOA. The goal of the present study is to identify the relationship between range of movement (ROM) and KOA subjects in Jaffna District.

Method: Based on American College of Rheumatology classification, 837 KOA subjects were screened and 250 KOA subjects of both genders, aged ≥ 40 years were randomly selected at Out Patients Department of Ayurvedic Hospitals in Jaffna District from January 2013 to January 2014. The ROMs as flexion and extension on supine and prone position were recorded in degrees, using a goniometer. Data were analyzed by SPSS version 16. This study received ethical approval from Faculty of Medicine, University of Jaffna, and registered at SLCTR (No: SLCTR/ 2012/ 009).

Results: There were 177(70.8%) female and 73 (29.2%) male with a mean age of 57.02 (SD \pm 8.78) years. In this study subjects, 147 (58.8%) had unilateral KOA and 103 (41.2%) had bilateral KOA. One way ANOVA showed that the mean of the knee flexion 121.09 (SD \pm 12.62) on supine position, flexion 104.37 (SD \pm 12.74) on prone position, extension 18.27 (SD \pm 4.07) on supine position, and extension 14.19 (SD \pm 2.65) on prone position. There was

no significant relation between ROMs and gender ($P > 0.05$) of KOA subjects.

Conclusion: The findings of the present study revealed that the ROMs were not correlated with gender of KOA subjects.

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Can body mass index at booking visit and weight gain during mid-trimester predict Gestational Diabetes Mellitus?

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Introduction and objectives: Pre-pregnancy obesity is associated with gestational diabetes mellitus (GDM). But the Body Mass Index (BMI) at booking visit and mid-trimester weight gain can predict GDM hasn't been investigated. The aim was to determine whether body mass index (BMI) at 9-12 weeks of booking visit and weight gain in mid-trimester can predict glycemic abnormalities in glucose tolerance test (GTT).

Method: In this prospective study, 452 women underwent 75-gram GTT at 24-28 weeks of gestation. BMI at booking visit (9-12 weeks of gestation) and weight gain in mid-trimester were recorded. Excessive gestational weight gain (GWG) was determined using the Institute of Medicine (IOM) guidelines. Student's t-test and multivariate logistic regression were used to find associations.

Results: Mean age and BMI were 31.3 years (SD 6.3) and 22.0 kg/m² (SD 4.6). 38.9 % had excessive GWG in mid-trimester with no statistically significant difference across BMI categories. Excessive GWG was associated with higher risk of GDM. The odds of OGTT results above GDM threshold were 31% higher in the excessive GWG group [adjusted OR 1.3 (95% CI 1.1-1.5)]. The odds of GDM were 22 % higher among women with booking visit BMI ≥ 25 kg/m² [OR 1.2 (95% CI 1.1-1.4)].