Regarding the use of the cerebro-placental ratio in the latent phase of labour to predict adverse outcomes in a resource-limited setting

1. Is the following statement true or false?

A Cochrane Review found that the symphysis fundal height measurement used in antenatal care was insufficient for detecting intrauterine growth restriction (IUGR).

2. Is the following statement true or false?

Late-onset IUGR may have a normal intrauterine artery Doppler waveform and a decreased middle cerebral artery pulsatility index, therefore producing an abnormal cerebro-placental perfusion ratio that may alert the clinician.

Regarding placental pathology in the public and private sectors in South Africa (SA)

3. Which of the following statements are true?

- a. In SA, the private sector healthcare system serves 16% of the population, while the public sector serves 84%.
- b. In SA, there are national guidelines for the pathological examination of the placenta.
- c. Maternal vascular malperfusion is a pathological description classically associated with pre-eclampsia and other hypertensive disorders of pregnancy.
- d. Hypertensive disorders of pregnancy account for 45% of perinatal mortality in SA.
- e. In a survey in Gauteng Province, in the year 2017 2018, the caesarean section rates in the private and public sector were 79.6% and 29.4%, respectively.

Regarding echocardiograph estimation of stroke volume in pregnancy

4. Which of the following statements is false?

- a. During pregnancy, aortocaval compression decreases cardiac output by up to 30 40%.
- b. During pregnancy, plasma volume increases from ${\sim}2~600~\text{mL}$ to 3~800~mL.
- c. During pregnancy, cardiac output increases from 3 L/min to 3.5 L/min.
- d. Cardiac output in pregnancy reaches its maximum at about 24 30 weeks' gestation and then remains at that level.
- e. Manual uterine displacement is as effective a manoeuvre at increasing cardiac output in pregnancy as lateral tilt of 15°.

Regarding antiretroviral (ARV) medication adherence in HIV-positive pregnant women in Nigeria

5. Which of the following statements are true?

- a. According to 2017 data, 35% of children who are congenitally affected with HIV are in sub-Saharan Africa.
- b. Previous studies have shown adherence rates to ARVs in pregnancy in Nigeria of $\sim 80\%$.
- c. In this study, $\sim\!40\%$ of patients had not discussed their HIV status with their partner.
- d. In this study, only 25% of HIV-positive patients had experienced stigmatisation because of their status.
- e. In this study, the education level of women and their occupation were not related to the adherence or not to ARV medication in pregnancy.

Regarding ingestion of herbal medication during pregnancy

6. Which of the following statements is true?

- a. In this study, 34% of 292 women interviewed from KwaZulu-Natal Province in SA had ingested herbal medication during pregnancy.
- b. It is estimated that 80% of the world's population uses herbal medication in healthcare management.
- c. There is no evidence to suggest that Chinese herbal medication may be associated with congenital fetal malformation.
- d. There is no evidence to suggest that lead poisoning is associated with Ayurvedic medication in pregnancy.
- e. In the study here, meconium presence, suctioning and admission to the neonatal nursery were all associated with herbal medication use.

Regarding Beckwith-Wiedemann syndrome (BWS) associated with congenital cytomegalovirus (CMV) in an HIV-exposed neonate

7. Which of the following statements are true?

- a. CMV is a common RNA virus that belongs to the herpes family.
- b. Congenital CMV in neonates may be associated with inflammatory bowel disease, volvulus, diarrhoea, gastroenteritis, necrotising enterocolitis, perforation and strictures of the bowel.
- c. Maternal co-infection with HIV and CMV does not increase the vertical transmission of CMV.
- d. The cause of BWS is complex and involves genes that control growth located on chromosome 17.
- e. BWS is associated with developing embryonal tumours in childhood.

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