

This edition of the Annals of Ibadan Postgraduate Medicine comprises six original papers covering a range of disciplines and would thus appeal to a multi-disciplinary readership. Four of the six papers focus on various non-communicable conditions, emphasizing the increasing importance of these conditions to disease morbidity and mortality in developing countries. One paper covers a contemporary issue in HIV prevention and one straddles the communicable and non-communicable disease divide and reports the association between a non-communicable condition – intimate partner violence and occurrence of a communicable disease - Sexually Transmitted Infection among married women.

Kotila *et al.* in their paper titled, ‘Addiction or pseudoaddiction in sickle cell disease patients: Time to decide – A case series’, describe a series of patients with Sickle Cell Disease (SCD); five of whom were diagnosed with addiction and five with pseudo-addiction. They highlight the fact that pseudoaddiction and addiction are understudied problems among patients with SCD and recommend that opioid use in pain control among these patients needs to be regulated.

Sigbeku and colleagues present findings from a study on, “Experience of intimate partner violence as a predictor of sexually transmitted infections among married women in Nigeria”. Data for the study were drawn from the 2008 Nigeria Demographic and Health Survey (NDHS). They find that as many as thirty percent of the respondents had experienced violence from their intimate partners and about seven percent reported having symptoms of a Sexually Transmitted Infection (STI) within 12 months preceding the survey. A history of Intimate Partner Violence (IPV) was found to be a significant predictor of STI symptoms. The authors recommend that screening for IPV should be an integral part of STI treatment.

Ogbole *et al.* in their paper on, “Time of presentation of stroke patients for CT Imaging in a Nigerian Tertiary Hospital”, underscore the increasing importance of non-communicable conditions as a contributor to the disease burden in Nigeria. They emphasize the place of an early CT in improving the outcome for stroke patients. Unfortunately, many patients do not present to hospital early and do not avail of this service. Their study revealed that up to two thirds of patients had a CT more than 12 hours after onset of symptoms and none had a CT within the recommended three hours of onset of symptoms. They recommend an increase in awareness of the role of an early CT in management of patients with a suspected stroke in order to improve management and outcomes of these patients.

Eyelade *et al.* found that preoperative anaemia, high parity and severe blood loss during surgery were significant factors predisposing to blood transfusion during caesarean delivery among the cohort of pregnant women in their study. Their findings have implications for obstetric practice especially in low resource settings where availability of blood and blood products for transfusion remain a challenge.

Ibrahim *et al.* present patient and service-provider related barriers to provision of an effective diabetic retinopathy service in Ibadan, Nigeria. These barriers include lack of awareness of diabetes as a cause of blindness, high cost of treatment of diabetes and retinopathy, long waiting times and negative staff attitudes. They proffer the following – improving patient awareness, reduction in treatment costs and improvement in staff attitudes and scheduling of appointments for patients as solutions to overcoming these barriers in order to improve the quality of life of patients with these conditions.

Balogun and Owoaje present their findings on acceptability of Prevention of Mother-to-Child Transmission (PMTCT) of HIV Services among pregnant women in a secondary health facility in Ibadan, Nigeria. The authors found that acceptability of the various components of PMTCT varied. While mothers had a positive attitude towards comprehensive antenatal care and safer delivery services, HIV counselling and testing, use of antiretroviral drugs and counselling and support; the majority of the women were not in favour of the non-breastfeeding option for infants of mothers with HIV. The authors advocate for intensified health education which will among other things improve awareness of the current PMTCT guidelines that includes the option of exclusive breastfeeding for six months for infants of mothers who are HIV positive with the baby or mother continuing to use ARV.

This edition certainly has something for every contemporary scholar and in addition, should elicit a series of research questions and hypotheses in the minds of prolific researchers as they further their quest to characterize and report the link between nature, nurture and disease/health-related states.

I congratulate the members of the Editorial Board, the Editorial Consultants, Reviewers and all authors for their commitment towards the success of this edition.

Dr. Adesola O. Olumide

Institute of Child Health, College of Medicine,
University of Ibadan, Ibadan