DEFINING THE ROLE OF GYNECOLOGICAL PRACTICE IN DIABETIC HEALTH CARE IN SUB-SAHARAN AFRICA: THE CASE OF DR CONGO

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Context and objectives
In order to provide clinicians for particular opportunity to achieve prevention or early detection of diabetes and better control of co-morbidities linked to the illness in women, we aimed to:
- examine menstrual cycles in those with diabetes;
- determine gynecologic pathologies associated with abnormal plasma glucose among unknown diabetic patients.

Methods
Based on these objectives, two studies were carried out:
- the first was a prospective, observational, case control study carried out in a medical centre giving low cost diabetic healthcare, including post menarche, non pregnant and non lactating diabetic women; gynecologic antecedents including menstrual anomalies and fasting plasma glucose for patients and random plasma glucose values for controls were computed to seek for influence of diabetes on anomalies;
- the second was a cross-sectional one including all adult gynecologic non pregnant patients at the university hospital of Kinshasa, DR Congo; data were computed to seek for contribution of general characteristics and gynecologic status on plasma glucose concentration.

Results and conclusions
- Questionable fertility and cycle anomalies more found in diabetic women reflect impact of limited resources healthcare of diabetic women. This represents a image of the extent of burden of diabetes in sub-Saharan Africa. These anomalies in reproductive health need to be considered a window for a good contraception and better control of the illness.
- Ignored hyperglycemia was present in certain gynecological situations years before the development of overt diabetes. Gynecologic practice could be regarded as unique opportunity for early detection of diabetes.