

## Editorial

This issue of *Nigerian Journal of Health Sciences* highlights publications that cut across public health and clinical research in different specialities in health sciences. The editorial board is also glad to introduce teaching point; a medical education section poses clinical questions, data, pictures or histology interpretation and proffers solutions. It is particularly relevant to undergraduate or post-graduate trainees in health sciences and could be useful for medical practitioners seeking additional knowledge.

Hypertension (HTN) remains a very common disease with attendant cardiovascular sequelae including mortality. In this issue, Ehwarime TA *et al.* assessed the knowledge, prevalence and practices relating to HTN among 246 rural dwellers in the Oka community in Ikpoba Okha Local Government Area, Edo State, and found that 94.6% of respondents have heard of HTN, though the prevalence of HTN among them was 47.7%. However, the level of knowledge about HTN is very low, as 91.5% of the respondents have poor knowledge. Practices increasing the risk for HTN include adding raw salt to food on the table, consumption of fatty foods, sedentary lifestyle (not performing the exercise) and sniffing of tobacco. They also found that female sex, increasing age, marital status and occupation are significantly associated with practices relating to HTN.

The process of birth is often assumed to be normal despite the pain and stress involved except when there are complications. Consequently, the health-related quality of life (HRQoL) of mothers following normal delivery is often ignored, hence the paucity of literature on the subject. Eleke and Agu-Okereke assessed the HRQoL 12 weeks after normal vaginal deliveries in 79 mothers in selected hospitals in Enugu using adapted SF-36 questionnaire.

They found that the mean (standard deviation [SD]) HRQoL score was 58.14 (15.47), even though participants rated their physical functioning and role limitation due to emotional problem at score range of between 0 and 49. They concluded that HRQoL was suboptimal (moderate) in this group of post-partum mothers though physical functioning and role limitation due to emotional problem were poor.

Nigerian correctional service is undergoing some reforms which should impact on the health of the inmates. Aluko *et al.* assessed the living and sanitary conditions and hygiene practices of 400 inmates in a maximum-security prison in Nigeria and found that majority were males (98.3%), with the main water source being hand-dug wells, while all-male conveniences were dirty. Even though there was overcrowding with many inmates living in dormitories, about 58% had positive attitudes towards hygienic practices and the sanitary

knowledge was a significant predictor of attitude towards hygiene practices. The major illnesses were malaria, ringworm and diarrhoea. They concluded that the good knowledge and positive attitudes of inmates contrast poor sanitary conditions, possibly due to poor sanitation and hygiene infrastructure and overcrowding.

Cost considerations significantly influence prescription of medicines as exorbitant cost poses two major challenges, impoverishment of the patients and poor adherence with consequent therapeutic failure. Edefo JW *et al.* conducted a community-based cross-sectional survey among patients being managed for schizophrenia. They found that schizophrenics receiving olanzapine, risperidone, haloperidol, trifluoperazine or chlorpromazine medication are being further impoverished by 11.1%, 7.4%, 3.7%, 3.7% and 1.9%, respectively, and are at the risk of catastrophic expenses by 70%, 64%, 28%, 28% and 34%, respectively. The number of days the least paid government worker would have to work to get their drugs were estimated to be 1.8 day, 1.35 day, 0.15 day, 0.15 day and 0.21 day for these drugs. They concluded that olanzapine and risperidone are far less affordable than chlorpromazine, haloperidol and trifluoperazine, hence should not be prescribed to poor patients to ensure good adherence.

Caesarean delivery often results in considerable morbidity including delay in oral feeding, prolongation of hospital stay, post-operative ileus (POI) and pain amongst others. Adelekan OE *et al.* conducted a randomised controlled study to compare the effect of timing on initiation of feeding following caesarean delivery on the incidence of POI, time of discontinuation of intravenous fluids (IVFs), length of hospital stay and patient's satisfaction. A total of 118 women undergoing elective or emergency primary caesarean section under regional anaesthesia were randomised into early and late feeding groups. They found that the incidence of mild POI was 3.4% for both early and late groups. However, the discontinuation of IVF and mean length of hospital stay were shorter and level of satisfaction with the timing of onset of oral feeding better in the early feeding group. They concluded that early post-operative feeding is safe, well-tolerated with no adverse surgical outcomes in women following primary caesarean section.

Obesity is a global challenge today and all measures at ensuring optimal body anthropometry are welcomed. Mbada CE *et al.* investigated the effect of a structured short message service (SMS)-based educational intervention on physical activity participation and weight loss (measured in terms of weight, body mass index (BMI), waist circumference (WC), hip circumference and waist-hip-ratio) amongst 50 female undergraduates with BMI of 25 kg/m<sup>2</sup> and above. The

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participants were randomly allocated into either the intervention group or control group and physical activity assessed using a pedometer. They found that there was a significant increase in weight, BMI and WC at week 4 and week 8 in the control group. They concluded that structured SMS on physical activity and nutritional advice can help to achieve weight reduction and improve physical activity participation among female university students.

The teaching point in this issue focuses on the interpretation of clinical information and renal histopathology with a view to arriving at a definitive diagnosis that may guide therapeutic intervention.

The editorial board of *Nigerian Journal of Health Sciences* is poised to ensure regular publications and introduce other new features that would cut across different specialities in health sciences with anticipated improvement in our acceptability, visibility and readership. Please join us on this interesting, stimulating and educative menu.

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