

VOLUME 41, NUMBER 8
August 2024

ISSN 0189 - 160X

WAJMJ

WEST AFRICAN JOURNAL OF MEDICINE

ORIGINALITY AND EXCELLENCE IN MEDICINE AND SURGERY



OFFICIAL PUBLICATION OF
THE WEST AFRICAN COLLEGE OF PHYSICIANS *AND*
WEST AFRICAN COLLEGE OF SURGEONS



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FROM THE EDITOR-IN-CHIEF

From Prevention to Early Diagnosis: Tackling Acute Kidney Injury in Children, and Other Critical Health Challenges

With great enthusiasm, we bring you another edition of the journal in furtherance of the mission of showcasing the exceptional work of medical researchers, practitioners, and thought leaders from West Africa and beyond. We continue to provide a platform for evidence-based research and insightful contributions aimed at advancing medical knowledge, informing clinical practice, and inspiring strategies that improve healthcare outcomes across the region and beyond.

The articles featured in this edition span various topics and address critical health challenges across diverse fields, offering meaningful contributions to the ever-expanding body of knowledge. These studies reflect the rigorous efforts of the authors and the spirit of collaboration within the medical community toward improving healthcare delivery and patient outcomes. In their study, Odoh et al. demonstrated the superiority of a monthly sulphadoxine-pyrimethamine regimen over the standard two-dose schedule in reducing malaria-related maternal and neonatal complications. Emmanuel and colleagues emphasized the continued relevance of liver biopsies for detailed histological assessments despite the increasing availability of FibroScan facilities.

In a study from Southwestern Nigeria, Odunlami et al. reported an evolving pattern of rheumatic diseases, with a rise in inflammatory conditions like

systemic lupus erythematosus and rheumatoid arthritis in the study area. The findings contrast with the previously reported predominance of degenerative diseases in earlier studies from the region.^{1, 2} Oyedeko and co-workers reported that bacterial vaginosis remains a significant health concern among pregnant women and key risk factors identified include low education levels, frequent coitus, douching, obesity, and HIV infection. The pivotal role played by level of education suggests the need for relevant health educational interventions especially during antenatal care, including novel measures such as mHealth interventions that have been to be potentially impactful.³

I would like to further highlight the work by Okafor et al which underscored the potential of neutrophil gelatinase-associated lipocalin (NGAL) as an early biomarker for acute kidney injury in children with severe malaria. Acute kidney injury (AKI) is a critical health issue among children, especially in low-resource regions like ours, where access to renal replacement therapy is limited and healthcare expenses are predominantly out-of-pocket. Severe malaria exacerbates this burden, increasing the risk of chronic kidney disease (CKD), especially when care is delayed. Neutrophil Gelatinase-Associated Lipocalin (NGAL) is an emerging biomarker for early AKI detection. NGAL is a small protein expressed in various tissues, including

the kidney, and is rapidly released into the bloodstream and urine in response to kidney injury. Unlike serum creatinine, which reflects functional impairment and may take days to rise, NGAL levels increase within hours of injury, offering a more timely indication of kidney stress or damage.³ NGAL not only enables early detection but also provides insights into the severity of injury and risks of progression. This is especially valuable for paediatric populations with severe infections like malaria, where timely intervention can prevent irreversible kidney damage.^{4,5}

Research continues to explore NGAL's role in clinical practice, aiming to refine its application in routine diagnostics and therapeutic decision-making. This was the focus of the study conducted by Okafor and colleagues in tertiary centres in Enugu, Nigeria. The findings reveal that NGAL predicts AKI earlier and more effectively than traditional serum creatinine measurements, underscoring its potential role in improving patient outcomes through timely interventions. The study also sheds light on the relationship between parasite density, NGAL, and renal impairment, with implications for developing targeted management protocols. Despite limitations such as a small sample size, the research advocates for the integration of NGAL testing into clinical practice, aiming to reduce the progression of AKI and associated mortality in children with severe malaria. This study underscores the urgent need for

enhanced preventive measures, early detection strategies, and accessible interventions to mitigate the dual burden of malaria and kidney injury in vulnerable paediatric populations.

We appreciate the authors for their contributions. We also remain grateful to our reviewers and other stakeholder for their continued support and service. As we continue our mission to promote medical knowledge and innovation, the journal remains committed to providing a vibrant platform for researchers, clinicians, and thought leaders to share their findings with the global medical community. However, we have observed a decline in article submissions in recent months, and we believe it is crucial to reaffirm the value of publishing your work in this esteemed journal. We encourage submissions from all fields of medicine, including original research, clinical studies, systematic reviews, and case reports. Submissions from early-career researchers are also welcome, as the journal provides a supportive environment to showcase emerging talent. Publishing with the **West African Journal of Medicine** ensures broad dissemination among regional and international audiences.

We urge authors to seize this opportunity to amplify their voices and share their contributions to healthcare. Together, let us strengthen the journal's role as a beacon of scientific excellence. We eagerly await your submissions and look forward to showcasing your work in upcoming editions.

Professor G. E. Erhabor

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