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Acceptability of Newborn Screening for Sickle Cell Disease among Post-Partum Mothers in Abakaliki, South East Nigeria

Acceptabilité du Dépistage de la Drépanocytose chez les Mères en Post-Partum à Abakaliki, au Sud-Est du Nigeria

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ABSTRACT

BACKGROUND: Newborn screening (NBS) for sickle cell disease (SCD) has been shown to reduce early childhood morbidity and mortality associated with sickle cell disease (SCD) but the programme is yet to gain universal coverage in Nigeria. The study assessed the awareness and acceptability of NBS for sickle cell disease for newly delivered mothers.

MATERIALS AND METHODS: This was a cross-sectional study conducted to assess 780 mothers admitted into the postnatal ward 0-48 hours after delivery at Alex Ekwueme Federal University Teaching Hospital, Abakaliki, Nigeria. Pre-validated questionnaires were employed for data collection and statistical analysis was performed using the United States' Center for Disease Prevention and Control (CDC) Epi Info 7.1.4 software.

RESULTS: Only 172 (22%) and 96 (12.2%) of the mothers were aware of NBS and comprehensive care for babies with SCD respectively. The acceptance of NBS was high, 718 (92%) among the mothers. The reasons for acceptance of NBS were to know how to take care of the baby 416 (57.9%), know the genotype status 180 (25.1%) while the motivating factors for NBS were knowledge of benefits 455 (58%) and the cost is free 205 (26.1%). The majority of the mothers 561 (71.6%) agree that SCD can be ameliorated by NBS while 80 (24.6%) do not know if it can.

CONCLUSION: There was low awareness of NBS and comprehensive care for babies with SCD among mothers with newborns, however acceptability for NBS was high. There is a considerable need to bridge the communication gap between health workers and parents to increase their awareness. **WAJM 2023; 40(3): 298–304.**

Keywords: Acceptability, Awareness, Mother, Newborn screening, Sickle cell disease.

RÉSUMÉ

CONTEXTE: Il a été démontré que le dépistage néonatal de la drépanocytose réduisait la morbidité et la mortalité infantiles associées à cette maladie, mais le programme n'a pas encore atteint une couverture universelle au Nigeria. L'étude a évalué la connaissance et l'acceptabilité du NBS pour la drépanocytose chez les mères qui viennent d'accoucher.

MATÉRIEL ET MÉTHODES: Il s'agit d'une étude transversale menée auprès de 780 mères admises dans le service postnatal 0-48 heures après l'accouchement à l'hôpital universitaire fédéral Alex Ekwueme, à Abakaliki, au Nigeria. Des questionnaires pré-validés ont été utilisés pour la collecte des données et l'analyse statistique a été réalisée à l'aide du logiciel Epi Info 7.1.4 des Centres américains de prévention et de contrôle des maladies (CDC).

RÉSULTATS: Seules 172 (22%) et 96 (12,2%) des mères connaissaient le NBS et les soins complets pour les bébés atteints de SCD, respectivement. Le taux d'acceptation du NBS était élevé, 718 (92%) parmi les mères. La raison de l'acceptation du NBS était de savoir comment s'occuper du bébé 416 (57,9%) et de connaître le statut du génotype 180 (25,1%) tandis que le facteur de motivation pour le NBS était la connaissance des avantages 455 (58%) et le coût est gratuit 205 (26,1%). La plupart des mères 561 (71,6%) sont d'accord pour dire que le NBS peut améliorer le SCD, tandis que 80 (24,6%) ne savent pas si c'est le cas.

CONCLUSION: Les mères de nouveau-nés sont peu sensibilisées au NBS et aux soins complets pour les bébés atteints de SCD, mais l'acceptabilité du NBS est élevée. Il est nécessaire de rétablir la communication entre les professionnels de la santé et les parents afin de les sensibiliser davantage. **WAJM 2023; 40(3): 298–304.**

Mots clés: Dépistage Néonatal, Drépanocytose, Acceptabilité, Sensibilisation, Mère.

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Abbreviations: CDC, Centers for Disease Prevention and Control; HBSS, Haemoglobin SS; HPLC, High Performance Liquid Chromatography; MDG, Millennium Development Goal; NBS, Newborn Screening; SCA, Sickle Cell Anemia; SCD, Sickle Cell Disease.