Pica in pregnancy

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INTRODUCTION
Pica is the craving and purposive consumption of substances not culturally defined as food. It was first reported by Hippocrates in 400 BC and has been subsequently reported by investigators on every inhabited continent. The purpose of this study is to determine the association of pica among the pregnant women.

DEFINITION
We define pica as the craving and purposive consumption of substances not culturally defined as food. There are three main types:

- Geophagy (or sometimes geophagia), the consumption of earth, including soil or other earth-rich items such as adobe, clay preparations, pottery, or bean stones (clumps of earth amongst dried beans)
- Amylophagy (or amylophagia), the consumption of raw starches, including corn starch, laundry starch, raw rice, and flour
- Pagophagy (or pagophagia), the consumption of large quantities of ice or freezer frost

METHOD
This cross-sectional study was carried out in bint al huda hospital in thiqar. Ninety six women were selected by stratified sampling method from the population. Demographic information and characteristics of pica during
pregnancy, such as the kind, the onset, frequency and the reasons, and the history of the same condition in previous pregnancies and the family history of this condition were collected via interview and questionnaire. The data were analyzed by chi square test and logistic regression in SPSS.

**RESULTS**
Demographic characteristics of pregnant women revealed. Majority of the women were between the ages of 25 and 35 years (46.8%). The highest percentages of pregnant women (90.6%) was under graduated.

. The highest prevalence of pica (78.1%) observed in the third trimester of pregnancy, while the lowest prevalence (10.4%) was observed in the first trimester of pregnancy but it's not accurate because most of the cases was post delivery.

The Percentage of positive family history among women with pica or without it (12.5%) and the percentage of women with same condition in the previous pregnancies was (24%).

Total percentage of the pica in pregnancy was 32.2%
Common forms of pica practice were soil (15.6%), use more than one items (13.5%), ice (6.25%) and rice (5.2%) (Table 3)
Reasons associated with the pica included prevention of salivation, nausea and vomiting.

<table>
<thead>
<tr>
<th>Non food item</th>
<th>Percentage</th>
<th>Total number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Soil</td>
<td>15.6</td>
<td>15</td>
</tr>
<tr>
<td>Ice</td>
<td>6.25</td>
<td>6</td>
</tr>
<tr>
<td>Rice</td>
<td>5.2</td>
<td>5</td>
</tr>
<tr>
<td>Clay</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Chalk</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Negative</td>
<td>58.33</td>
<td>56</td>
</tr>
<tr>
<td>Use more than one item</td>
<td>13.5</td>
<td>13</td>
</tr>
</tbody>
</table>
Clay and rice = 2
Ice and chalk = 1
Ice and clay = 2
Ice, clay and soil = 1
Ice and soil = 5
Ice, soil and rice = 2

Hb level among women with pica was 76% between 7-10 g/dl, (10.4%) >10 g/dl and (3.1%) was <7 g/dl.

<table>
<thead>
<tr>
<th>No. of cases positive with PICA</th>
<th>HB level</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>24</td>
<td>7-10</td>
<td>77.4</td>
</tr>
<tr>
<td>6</td>
<td>&gt;10</td>
<td>19.3</td>
</tr>
<tr>
<td>1</td>
<td>&lt;7</td>
<td>3.2</td>
</tr>
</tbody>
</table>

**DISCUSSION**

In this study, pica is defined as an ingestion of non-food substances, such as Pagophagia. Pagophagia is a particular expression of the more general phenomenon of pica. The prevalence of pica practice during pregnancy varies in different parts of the world. The prevalence of pica during pregnancy (by considering Pagophagia as a pica) in Latin America has been reported to be 23–44%. For example, it was 44% in Mexico City by Simpson, and 23.2% in Argentina by López. African countries have a higher prevalence of pica during pregnancy. It was reported in 63.7% in Tanzania, 47% in Ghana, and 40.4% in Sudan. The prevalence of pica in Denmark is very low. Mikkelsen and colleagues examined the prevalence of pica in 100 thousand pregnant women. It was
reported only in 14 (0.02 %) women. In Washington DC, the prevalence of pica was 8.1 %

The prevalence of pica during pregnancy at 2000 in Thiqar was 32.1%. Thus, the prevalence of this eating disorder during pregnancy is dropped. The decrease of pregnancy pica maybe due to the growth in education levels, awareness of women concerning iron supplementation and also, more attention to them by their husbands and family as a result of reduced birth rate. Unfortunately the Cesarean delivery increased compared to the past and is growing, so the women fear and anxiety during pregnancy about travail declined.

REFERENCES