Filled with joy and enthusiasm, we present the maiden issue of an international peer reviewed journal titled 'Journal of Basic and Clinical Reproductive Sciences'. The journal published by one of the world's largest open access publishers - Medknow (part of Wolters Kluwer Health), aims mainly to publish findings on the prevention and management of illness, and on the promotion of health in developed and developing countries as it concerns the reproductive system. It also aims to promote problem based learning by encouraging easy transition from bench findings to bedside management, and vice versa. This maiden issue is global on contributors, reviewers and indeed contents.

In this issue we present, an original article on Histopathologic Analysis of Female Genital Tuberculosis (FGTB) in a Tertiary Hospital of India. The authors, Mondal et al., demonstrated that FGTB, which is usually, secondary to primary tuberculosis infection accounts for ≥3% of patients with infertility. However the exact incidence of FGTB cannot be determined with certainty as some cases are asymptomatic and only incidentally detected during the investigation of infertility. Furthermore, the study reported endometrium as the commonest site contrary to the fallopian tube in many previous studies. Arunima et al., also from India investigated the relationship of gender and lipid profile with cardiac parasympathetic reactivity. Lower heart rate variability has been proven to be associated with a greater risk for developing hypertension among normotensive men, and hypertension is one of the primary risk factor of coronary heart disease. In the study, cardiac parasympathetic reactivity to stress were done by performing the deep breathing test, Valsalva maneuver (VM) and lying-standing test to explore the relationship of gender and lipid profile with cardiac parasympathetic reactivity. Lipids play a vital role in modulation of autonomic functions, and authors agree that reproductive, hormonal factors in premenopausal women may cause variance in heart rate variability and impact the status of lipid profile. Thus, their findings suggest that sex hormone levels may alter the autonomic nervous system response and lipid metabolism.

This issue also presents a 10-year Review of Abdominal Pregnancy in Usmanu Dan-Fodiyo University Teaching Hospital, Sokoto Nigeria by Nnadi et al. They reported eight (8) cases of abdominal pregnancies giving prevalence of 3.1/10,000 deliveries and accounting for 2.8% of the ectopic pregnancies. All the patients were not booked for antenatal care, 7 (88%) were grand multipara, and the same number were diagnosed accurately by an ultrasound scan. Report shows seven perinatal deaths, one live birth and one maternal death which occurred in the patient whose placenta was left in-situ. Authors suggest that the presence of persistent lower abdominal pain, vaginal bleeding, and prolonged pregnancy should raise the suspicion of abdominal pregnancy, and surgical treatment should include removal of the placenta, where feasible.

In developing nations, Anemia in pregnancy is common, and morbidity is increased in the presence of sickle cell disease. With few studies in Nigeria comprehensively evaluating the iron status of these women, Ogbimi and Ehigiegba evaluated Iron Store of Pregnant Women with Hemoglobin SS and SC in Benin City, Nigeria. The study demonstrated higher serum iron levels in Hb SS/SC pregnant women than in the controls and concluded that, in situations that may require iron supplementation, it may be appropriate to determine the iron status to determine the amount that should be given. In the management of sickle cell anemia in pregnancy, preconception care and effective prenatal care by a multidisciplinary team, and delivery in a hospital accustomed to management of sickle cell disease and its complications was highly recommended by Omole-Ohonsi et al. Authors investigated the pregnancy outcome among booked pregnant women with homozygous sickle cell disease (HbSS), who had preconception care, and an equal number of booked pregnant who did not receive preconception care (controls), at Aminu Kano Teaching Hospital, Kano over a seven year period. Though there was no statistically significant difference in the incidence of complications between the two groups, complications occurred with less frequency among the study group who had preconception care.
Another study from Aminu Kano Teaching Hospital Kano, Gaya et al., reviewed the presentation and histopathological types of cervical cancer cases over a sixteen-year period. Six hundred and sixty gynecological cancers were seen during the study period, with cancer of the cervix accounting for 58.5% cases. Among these cases with cancer of the cervix, most (71.1%) were grand multiparous and 89.7% presented with advanced disease, and Squamous cell carcinoma (SCC) accounted for 86.3% of the cancers. In the same Nigerian teaching hospital at Kano, Yakasai et al. investigated Sero-prevalence of Hepatitis B Virus Infection and its risk factors among pregnant women attending antenatal clinic. Results document no statistically significant difference in the prevalence of HBsAg in pregnant and nonpregnant women, but the presence of HBeAg was statistically significant among both pregnant and nonpregnant women who tested positive for HBsAg. The authors identified blood transfusion, ear piercing, history of an affected sibling with HBV infection, tattooing, and abortion as risk factors associated with HBV infection.

In appreciation of the implications of poorly repaired episiotomy, which include perineal pain, inability to cope with breast feeding, urinary retention, defecation problems and wound infections/breakdown, Nzeribe and colleagues at Federal Medical Centre Owerri, Nigeria explored Intern’s experiences with episiotomy and its repair. Their findings suggest that a formal demonstration at the medical school of training is not a regular event in the medical schools, as only 62.9% of the interns accepted receiving it. Though 80% of these interns’ felt they were happy with the repairs of episiotomy, authors suggest the inclusion of a formal demonstration on this procedure during clinical training.

From Enugu, comes one of the first in Nigeria studies that utilized clot-based assay (coagulometric) to assess Protein C activity. Nwagha et al., report a prospective study aimed at establishing the mean levels of PCA ratio (measure of protein C resistance) among pregnant women since maternal mortality rate of the country is on the increase despite efforts to reduce the trend. Authors’ report significant difference between the mean PCA ratio of the female non pregnant controls and pregnant women in 3rd trimester of pregnancy. Extrapolating this bench finding to possible effects on the bedside, it is plausible to suggest that thromboembolic disorders may be a common cause of the increasing maternal deaths despite a downward trend in deaths due to post partum haemorrhage (PPH).1-3 They stated that as a result of appropriate intervention, deaths from PPH seems to be abating, without appreciable reduction in overall maternal mortality, in Nigeria. So what is the real culprit in this scenario? Is it thromboembolic disorders or socio economic factors? Multicenter, community based, longitudinal studies may resolve this issue.

Finally, this maiden issue also presents two case reports from India. Bangal et al. reported a rare case of Peritonitis following spontaneous rupture of pyometra in a 65 year old woman. The patient with this precise life-threatening complication had uneventful post-operative period following emergency exploratory laparotomy and total abdominal hysterectomy with bilateral salpingo oophorectomy. In the second case report, Andola et al. presented a review of 3 cases of Fine Needle Aspiration Cytology (FNAC) diagnosis of scar endometriosis. Authors with embedded literature review agree that Scar endometriosis is a relatively rare entity and usually associated with cesarean section scar. In the present study, all three cases were diagnosed on the basis of clinical findings, and cytological features, confirmed by histopathology and treated with broad, local excision. Authors concluded that FNAC is prudent, fast and accurate method in making the diagnosis of scar endometriosis, and this helps to design better surgical technique.

Finally, in this issue, while Okeke et al., reviewed a Vulvovaginal atrophy-related sexual dysfunction in postmenopausal women, Sachan et al., examined the age at menarche and menstrual problems among school-going adolescent girls of a North Indian District.

On behalf of the editorial team, we want to thank all authors and reviewers who have in many ways shared our responsibility to advance research and publication in developing countries. We encourage the submission of articles free of charge to Journal of Basic and Clinical Reproductive Sciences.

Thank you!

Uchenna Ifeanyi Nwagha, Bond Ugochukwu Anyaehie
Department of Physiology/Obstetrics and Gynecology and 'Department of Physiology, College of Medicine University of Nigeria, Nigeria.
E-mail: uchenna.nwagha@unn.edu.ng

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