

was used to assess methotrexate adverse effects and treatment adherence. Data were analyzed using SPSS 20th version.

Results: The sample population was predominantly female (90.5%) from the 200 sample population treated with methotrexate studied for occurrence of liver toxicity and bone marrow suppression. Occurrence of liver toxicity was observed in 12 patients (6%) and occurrence of bone marrow suppression was 2% (n=4). 45.5% reported not taking methotrexate exactly as prescribed. From the non-adhering patients, 33% were taking methotrexate most of the time, 12% taking methotrexate some of the time. Almost half (54.5%; n=109) perfectly adhered to the methotrexate treatment. Reasons for non-adherence included forgetting to take it (80.2%), because of the side effects (32.96%), concern about long term safety (7.6%) and not needed when feeling well (7.6%). There was no association of methotrexate adherence with socio demographic variables.

Conclusions: Occurrence of liver toxicity is the common side effect of methotrexate in this sample. Nearly half of the sample reported poor methotrexate adherence because they forget to take it, concern about long term safety and because of side effects.

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Dietary calcium intake among a selected population of pregnant mothers: a preliminary study

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Objectives: WHO recommends 1.5-2g of total calcium intake per day for pregnant mothers and 1.2g of that from the diet. We planned this study to assess calcium intake through diet among a selected population of pregnant mothers who are attending antenatal clinics in state sector.

Methods: Samples were recruited from early part of a study to assess vitamin D deficiency among pregnant, breast feeding mothers and offspring. Information on diet was collected using an interviewer administrated questionnaire from mothers attending to Colombo South Teaching Hospital. Calcium levels of foods were calculated using available data in food composition charts. Weekly intake of calcium was assessed and average consumption per day was calculated. Serum corrected calcium was analyzed using an auto analyzer.

Results: 26 pregnant mothers were interviewed. Mean age was 28 ± 4 years. Average amount of calcium in their diet was approximately 0.6-0.8 g/day. Main source of calcium was milk and small fish. However, consumption of other food items rich in calcium like cheese, yoghurt, curd, butter, egg and margarine were not frequent. They received 0.3g of oral calcium lactate per day from antenatal clinics. Thus, total daily intake was not more than 0.9-1.2g. However, their average corrected serum calcium was 9.18 ± 0.36 mg/dL within the normal range.

Conclusions: Dietary calcium intake was not sufficient in this population though serum calcium level was normal. Bone resorption could normalize serum calcium at the expense of osteopenia. We would recommend a study on a larger sample to assess the calcium intake and to compare with bone mineral composition.

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Prevalence of known risk factors related to chronic non communicable diseases among school teachers in Matara District

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Objectives: This study was conducted to assess the level of risk for Non Communicable Diseases (NCDs) among school teachers in Matara District.