



INTRODUCTION

Severe anaemia is a major cause of death in pregnant women in sub-Saharan Africa. Anaemia's mortality risk is exacerbated in conflict areas where medical facilities may be scarce or overburdened. Also, babies born to anaemic mothers in war zones are at a higher risk of being born prematurely, having low birth weight, facing neonatal mortality and future low cognitive abilities.

A two-year war in Sudan has devastated the country and pushed some pregnant women to the brink of safety are major public health concerns in Africa. famine and constant displacement. Women may present to hospitals with significant symptoms or bleeding requiring transfusion (BT), which could be a lifesaving intervention.

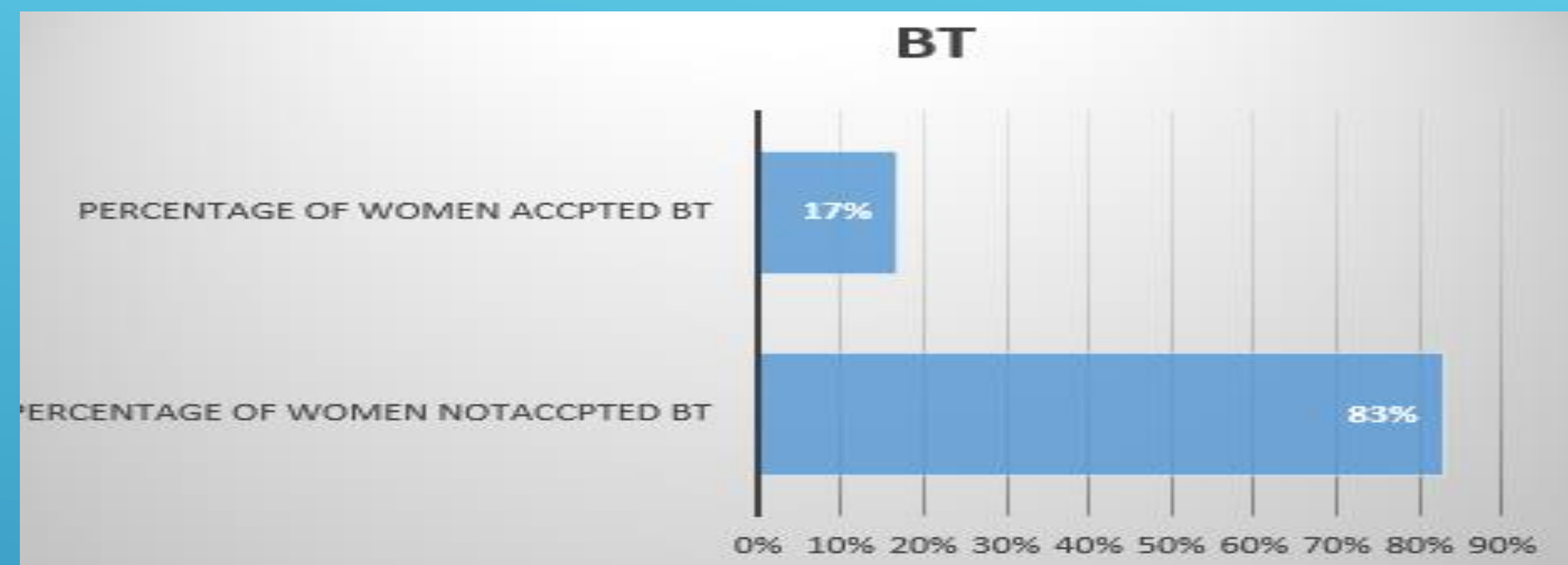
BT in war zones is challenging due to limited access to hospitals and irregular prenatal care. Also, its provision and

Objectives

To ascertain the feasibility of BT and its acceptability by severely anaemic and displaced women in a big teaching Hospital in the Northern Region of Sudan during the war.

Methodology

A prospective cohort study. Eligibility criteria; pregnant women attending Antenatal Clinics at Karima Hospital from 1/12/2023 to 31/1/2024. We carried sub group analysis for women who were deemed in need of blood



Results

The total number of women screened was 410, and 100 gave their consent with 71 (71%) diagnosed to be anaemic, 69 patients in the second and third trimesters of pregnancy (98.2%) and 2 (2.8%) in the first trimester. Forty patients attended follow-up (56.3%) and were compliant, while, 31 (43.7%) were lost to follow-up or not compliant with treatment. Six patients (8.5%) needed BT, only one consented to it.

Conclusion:

The high incidence of anaemia and loss to follow-up are alarming.