**Objective:** Anthropometric study of Halba Tribes in Gariyaband, District of Chhattisgarh state.

Method: The present study was carried out on 100 Halba Tribes of Gariyaband Block Chattishgarh region. The following data taken in to consideration, body weight, stature, height tragus, head length, head breath, head circumference, Physiognomic superior facial length, nasal breadth, nasal height, nasal depth, ear length, ear breadth external ocular breadth inter ocular breadth, bigonial breadth, bizygomatic breadth.

Result and Conclusion: The Anthropometric measurements found that Halba Tribes are short to below medium in height having a mean value of stature as 161.312 cm. They have got mesocephalic head (49%) but the percentage of Dolichocephalic element (41%) is also quite high. They are characterised by Mesorhinae (56%) nose. Halbas in general have broader faces as evident by their upper facial indices.

## 73. Anatomical variations in the pattern of the right hepatic veins draining the posterior segment of the right lobe of the liver

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**Background:** The drainage pattern in the right posterior lobe of liver varies considerably. The knowledge of this variation is very important while performing various surgeries on the right posterior lobe.

Aim: A study was conducted to see variations in pattern of drainage of posterior segment of the right lobe of liver. The aim was to see the variations of right hepatic vein and small accessory hepatic veins draining the posterior segment, the presence of which led to modifications in drainage of posterior segment.

Material & methods: Sixty formalin-fixed adult human liver specimens were dissected manually.

Results: According to the pattern of drainage of tributaries of right hepatic vein, the right hepatic vein was classified into type I, type II, type III and type IV. According to presence of inferior right hepatic vein, three types of drainage of posterior lobe were seen: Type I, (76.36%) right hepatic vein was large, draining wide area of posterior segment with a small inferior right hepatic vein. In Type II, (19.92%) both right hepatic and inferior right hepatic veins were medium sized draining the posteroinferior segment of the right lobe. In Type III, (32%) accessory veins, the middle right hepatic veins drained the posterosuperior (VII) and posteroinferior (VI) segment. In one specimen, there were numerous middle right hepatic veins draining the right posterior segment.

Conclusions: For safe resection of the liver, the complex anatomy of the distribution of the tributaries of the right hepatic vein and the accessory veins have to be studied prior to any surgery done on liver.

## 74. The association of small for gestation age babies, preterm births and foeto-placental weight ratio in preeclampsia in Sikkimese population

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Background: Preterm birth accounts for more than 75% of perinatal mortality and more than half long-term morbidities. Despite of being the leading cause of newborn deaths it was not considered as a public health hazard until May 2012, when WHO and partners published a report, "Born too soon", the latest contribution to the UN Secretary General's Global Strategy for Women's and Children's Health, aiming to save 16 million lives by 2015. Preterm birth is associated with respiratory, gastrointestinal and neurodevelopmental anomalies in children and small for gestation babies. Preeclampsia is a placental-based complication and a leading cause for iatrogenic or spontaneous preterm delivery.

Method: A prospective case control study of 150 pregnant women to record the association between premature deliveries, small for gestation age babies and the morphometric alterations of the placenta in preeclampsia in an indigenous Sikkimese population for advancement of solutions to minimize the deleterious effects. Amongst these, 50 pregnancies with preeclampsia comprised the "Cohort group" while 100 pregnant women without any complications comprised the "Control".

Results: The proportion of preterm deliveries (*p*-value 0.001), low birth weight (*p*-value 0.0093) and small for gestation age (*p*-value 0.0046) babies is significantly higher in pre-eclamptic patients. The placental weight (*p*-value 0.012), volume and foeto-placental weight ratio was significantly lower in preeclampsia. The foeto-placental weight ratio was 5.5 in preeclampsia and 5.8 in normotensive patients.

**Conclusion:** Preeclampsia is associated with a significantly higher proportion of small for gestation age and low birth weight babies and smaller placentae.

## 75. Gestation specific reference values of amniotic fluid index in second and third trimester by real time ultrasonography in Chhattisgarh women

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**Objective:** To obtain gestational reference range for the Amniotic Fluid Index among Chhattisgarh women.

Method: An analysis of AFI and Gestational age estimations was undertaken in 200 Chhattisgarh women with normal singleton pregnancy between 20 to 36 weeks of gestation. Women with fetal anomalies, PIH, Diabetes mellitus, and other maternal complications were excluded from the study. The study was conducted in Department of Anatomy in close association with the Department of Radiodiagnosis, Pt.J.N.M. Medical