

A STUDY ON MATERNAL & FETAL OUTCOMES OF GESTATIONAL HYPERTENSION & PRE-ECLAMPSIA 2004

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Abstract

Introduction & Rationale:

Hypertension is one of the most common complications of pregnancy which make it's effect by acute or chronic utero-placental insufficiency. If hypertension is associated with proteinuria or edema the term pre-eclampsia is used. If not treated in time it can affect quality of life of both the baby & the mother.

Objective: To find out maternal & fetal outcomes due to gestational hypertension & pre-eclampsia.

Methodology: It's a hospital based descriptive study in post natal wards of SAT Hospital, in all patients who had gestational hypertension or pre-eclampsia except those who are in pay-wards & had associated gestational diabetes mellitus. Study was in 80 cases during October to December of 2007. Data was collected from case sheets after obtaining informed consent from patients & getting sanction from HOD Obstetrics & Gynecology with study variable as selected maternal & fetal outcomes & results were obtained in proportion.

Results: Among the reviewed 80 cases of hypertension in pregnancy 58.75% were having gestational hypertension & rest with pre-eclampsia. Of that 56.25% were primigravidas with highest frequency in 25-29 year age group. 17.14% of multiparas had a history of gestational hypertension in previous pregnancies. Family history of hypertension was present in 22.5% of the families.

Majority (41.25%) had the onset of hypertension between 29-36 weeks with 81.25% having systolic blood pressure in the range of 140-160mmHg and 92.5% having diastolic BP in the range of 90-110 mmHg. Elevated liver enzymes were found in 46.25%. Serum Uric Acid was elevated in 15%. Decreased Platelet count was present in 3.75% of the cases.

69.7% of the babies born to mothers with pre-eclampsia & 48.9% of those to mothers with gestational hypertension was pre-term Caesarean sections (54.6%) outnumbered vaginal delivery. Of the babies born to pre-eclamptic mothers 29% had APGAR<9 at 1', 61% had low birth weight (<2.5Kg), 35.5% had intrauterine growth retardation and 9.67% underwent intrauterine death compared to 20%, 52%, 22%, 4% of babies born to mothers with gestational hypertension respectively. 6.1% of cases with pre-eclampsia had abruption placenta, 9% progressed to eclampsia, 6% had post partum hemorrhage and 3% progressed to HELLP syndrome Compared to 2%, 6.4%, 2% & 0% of babies born to mothers with gestational hypertension.

BP was controlled in 51.25% of patients immediate post partum.