

MATERNAL & FETAL OUTCOMES OF GESTATIONAL HYPERTENSION & PRE ECLAMPSIA 2004

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ABSTRACT

Introduction & Rationate:

Hypertension is one of the most common complications of pregnancy which make its 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 words 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 & Gynaecology 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 has 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 140-160 mm Hg 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 were pre term. Caesarean sections (54.6%) outnumbered vaginal delivery. Of the babies born to pre eclamptic mothers 29% had APGAR< 9 at1; 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.