



STUDY OF LIVER FUNCTION TESTS IN PRE-ECLAMPSIA

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ABSTRACT To study the incidence of altered LFTs in pregnant women with diastolic BP > 100mmHg
Early detection of partial or complete HELLP syndrome using LFT parameters.
To study maternal and fetal outcome in pre eclamptic patients in relation to LFTs.

KEYWORDS : eclampsia, acute renal failure,HELLP,DIC, meconium aspiration syndrome

Introduction:

In severe pre-eclampsia there are alterations in the hepatic function and integrity.

Materials and methods:

This is a prospective study of 100 pregnant women with 28-40 weeks of gestation with diastolic BP > 100mmHg.

Investigations:

LFTs : AST,ALT,ALP
Total and direct bilirubin,LDH
RFT: blood urea and s.creatinine.

Treatment and follow up:

Patients are treated with tab.alpha methyl dopa 250mg tab nifedipine 10mg bd depending diastolic blood pressure.MgSO4 started prophylactically 5gms IM if there is severe pre-eclampsia and using Pritchard regimen if there is imminent eclampsia.

Termination of pregnancy either vaginally or by caesarean section done depending on gestational age, presentation and position of the fetus, severity and control of BP, fetal condition, complications in the mother.

Patients were followed until discharge and LFTs were done 2 weeks after delivery.

Results:

Most of the patients were in the age group 21-25 years,primi gravid were 77% and multi 23%.

Severe pre-eclampsia was seen in younger age group,<25 years.in primi pre-eclampsia patients 41.55% had raised LFTs

Maximum cases (48%) with normal LFTs had mild proteinuria.

Raised LFTs 75% had severe pre-eclampsia,83% had decreased platelet count,41.6% had renal complications,70% needed all the three drugs and 22% had vaginal delivery and 77.78% had caesarean section.

55% needed all the 3 drugs,10% needed one drug, 16%needed two drugs.

Out of the total cases 55% delivered vaginally and 45% cases delivered by caesarean section.

89% of the total cases were alive, 5% were IUD and 6% had neonatal mortality.

Out come of babies was 91% alive with normal LFT and 77.7% were alive in group with raised LFT,8.3% IUD,13.8% neonatal deaths.

15% of cases had complications.

Altered renal function tests were seen in 4 cases,abruption seen in 4 cases and pulmonary edema in 5 cases.

ALT	55%
AST	36%
ALP	29%
Sr.bilirubin	20%
LDH	17%

In overall study raised LFTs were seen in 36% cases in pre-eclampsia, among these raise of ALT is more.

Conclusion:

Majority of causes of altered liver function tests during third trimester were pre-eclampsia

Maternal and fetal outcome depends on gestational age at presentation early recognition of disease and tertiary care support.