



IMPACT OF INTER-PREGNANCY INTERVAL ON MATERNAL & FOETAL OUTCOME AT TERTIARY CARE HOSPITAL IN NORTH WESTERN RAJASTHAN

Gynecology

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ABSTRACT

Background-The Inter Pregnancy Interval has been reported to influence the outcome of the subsequent pregnancy. Both a short IPI (<24 months) and long IPI (>24 months) have been associated with adverse pregnancy outcomes, most of which are seen with short intervals between pregnancies.

Method-300 cases, from department of Gynae. & Obst., PBM Hospital, SPMC, Bikaner were included in this study from 1st oct. 2017 to 30th Sep. 2018. Cases were divided into three groups (1, 2 and 3) according to inter pregnancy interval i.e. <24 months, 24 months and >24 months. Each group consisted of 100 cases. Relevant clinical details were collected with the help of a questionnaire and were further evaluated during and immediately after labour.

Result-It was found that maternal and foetal complications were more in IPI group 1, followed by group 3 and least in group 2.

Conclusion-By acquiring proper inter pregnancy interval we can reduce maternal and foetal complications.

KEYWORDS

inter pregnancy interval, maternal, fetal complication

INTRODUCTION

Inter-pregnancy interval (IPI) is defined as the time lapsed between two consecutive pregnancies¹. Plan of pregnancy decided by couple is influenced by several socio demographic factors including couple age, education status, locality, outcome of previous pregnancies culture and religious belief. For purpose of this study we have used IPI as the period between the last birth and start of the next pregnancy-birth to pregnancy interval as defined by the world health organization (WHO). Both the WHO and United States Agency for International Development (USAID) recommend an optimal IPI of 24 months,

Previous studies in low and high income countries have shown that both short and long IPIs are associated with adverse maternal, perinatal and infant outcomes. Particularly, short IPI is linked with greater risks of perinatal, infant and child mortality, preterm birth, low birth weight and fetal growth restriction. On the other hand, long IPI has been associated with increased risks of labour dystocia and retained placenta.

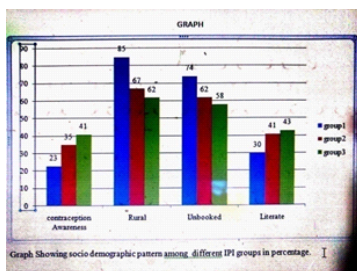


Figure 1: showing socio demographic status in different IPI groups.

TABLE – 1 GENERAL DETAILS

Observation	group.1	group.2	group.3
1.No of cases	100	100	100
2. Un-booked	74	62	58
3. Mean age(yrs)	24.57	26.25	26.65
4.Literate	30	41	43
5.Rural	85	67	62
6.Contraception Awareness	23	35	41
7.Anaemia	67	39	30
8.Preterm Labor	5	4	4
9.APH	6	3	4
10.Hypertensive disorders	6	3	5

11.Dystocia	0	2	3
12.Postpartum psychosis	1	0	0
13.NICU Admission	36	5	6
14.PPH	14	3	4
15.SGA	29	5	5
16.LBW	53	5	13

Table: Showing observations in different IPI groups.

CASE STUDY

Present study was conducted to see the effect of interpregnancy interval and socio demographic factors on maternal and foetal outcomes among three different groups with IPI <24 months, 24 months and >24 months by details collected from the patients and observing them in labour and immediate postpartum.

Details of observation were shown in the table-1.

CONCLUSIONS

Birth spacing is an important aspect of management of women in obstetric practice. We can prevent the adverse maternal and fetal outcome by educating the women in reproductive age groups about acquiring proper inter pregnancy interval so that we can reduce the complications, hospital stay & maternal & fetal complications due to these complications. Awareness regarding the contraceptives measures and their proper use can go a long way. Educating girls and counseling women about the harms due to short IPI and their participation in family planning will remarkably reduce the present social burden.

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