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TO DETERMINE MATERNAL AND FETAL OUTCOME IN PREGNANCIES COMPLICATED BY EARLY VAGINAL BLEEDING LESS THAN 20 WEEKS OF GESTATION

Obstetrics & Gynaecology

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ABSTRACT

Background Bleeding in the first 20 weeks of pregnancy is a common complication and have increased risks of adverse outcome, particularly placental abruption, low birth weight, preterm delivery and spontaneous abortion. **Aims And Objective** To determine maternal and fetal outcome in pregnancies complicated by early vaginal bleeding less than 20 weeks of gestation. **Material And Methods** The pregnant patients with Amenorrhea of less than 20 weeks and Bleeding per vaginum were included in this study.After detailed history the patients were subjected to examination , baseline investigations and USG were done.Those patients who continued with pregnancy were followed up regularly in antenatal clinics.The maternal and fetal outcome were studied. **Results** In this study majority of patients' i.e. 38.3% were in the age group of 27-30 years. In 61.7% gave history of bleeding between 10 to 15 weeks of gestation.The majority i.e. 51.7% of patients had mild bleeding , while as 15% had severe bleeding.In our study 88.9% of Patients who had severe bleeding aborted.More than one third of patients i.e. 38.9% had a Subchorionic hematoma. Incidence of PPROM was 11.4%.In our study 73.3% cases continued their pregnancy and 26.6% had non-viable outcome i;e Abortion.Full term healthy newborn 43.2 %. **Conclusion** Early Vaginal bleeding less than 20 weeks of gestation" can be a predicting factor in terms of fetomaternal outcome and it is necessary to increase the knowledge of pregnant women in this regard for closer care.

KEYWORDS

Early Vaginal Bleeding, Maternal Outcome, Fetal Outcome

INTRODUCTION

Pregnancy related early complications usually occur in the trimester prior to fetal viability and late complications primarily occur in third trimester[1].Bleeding in the first 20 weeks of pregnancy is a common complication affecting about one in five pregnant women and have increased risks of adverse outcome, particularly placental abruption, low birth weight and preterm delivery[2].About 20-32% of pregnancies report some bleeds during its 20 weeks of pregnancy[3]. It has been estimated that in 1-20% of patients continue their pregnancy despite bleeding but nearly 50% pregnancies complicated by heavy bleeding undergo spontaneous abortion[4].

AIMS AND OBJECTIVES

To determine maternal,fetal and perinatal outcome in pregnancies complicated by early vaginal bleeding less than 20 weeks of gestation.

MATERIAL AND METHODS

Inclusion Criteria

Patient who met the following criteria were included;

1. Amenorrhea of less than 20 weeks.
2. Positive pregnancy test.
3. Bleeding per vaginum.

This was prospective observational study,conducted over a period of 12 months and 60 patients were enrolled.All patients who fulfilled the inclusion criteria were included in this study.The patients were asked detailed history. After history the patients were subjected to examination which included general physical examination and obstetric examination.

After history and examination baseline investigations were done.USGs were performed to look for intra uterine pregnancy,extra uterine pregnancy (ectopic pregnancy), gestational age, cardiac activity, to identify sub chorionic hematoma, localize placenta.Those patients who continued with pregnancy were followed up regularly in antenatal clinics and managed accordingly.

The Maternal outcome (only for those patients in which pregnancy continued beyond 28 weeks, taking from 28 weeks as a period of viability) and fetal outcome were studied.

Statistic Analysis

The recorded data was complied and entered in a spreadsheet (Microsoft Excel) and then exported to data editor of SPSS Version 20.0 (SPSS Inc. Continuous variables were expressed as Mean ± SD and categorical variables summarized as frequencies and percentages.

RESULTS

In the present study majority of patients' i.e. 38.3% were in the age group of 27-30 years. Mean age in the study patients was 26.3±4.5 years.Most of the patients i.e. 56.7% were Primigravida .In 61.7% gave history of bleeding between 10 to 15 weeks of gestation while as minimum number of patients i.e. 16.6% had bleeding in more than 15 weeks of gestation.Regarding amount of bleeding majority i.e. 51.7% of patients had mild bleeding 33.3% had moderate bleeding while as 15% had severe bleeding.In our study 88.9% of Patients who had severe bleeding aborted, while as only 9.7% who were in category of mild bleeding aborted as outcome.More than one third of patients i.e. 38.9% had a Subchorionic hematoma. 29.5% were anemic and Incidence of PPROM was 11.4%.In our study 54.6% delivered by C-section, where as 44.5% delivered vaginally.In our study about four fifth of patients i.e.73.3% cases continued their pregnancy and 26.6% had non-viable outcome i;e Abortion.Full term healthy newborn 43.2 %.

DISCUSSION

Bleeding in early pregnancy refers to obstetrical hemorrhage before 20 completed weeks of gestational age.[5] Vaginal bleeding occurs in 12%–40% of confirmed pregnancies during the first 20 weeks of gestation as reported by many authors.[5] Of these 50% end in spontaneous abortions.[6] Various authors have reported a significant association between early bleeding in pregnancy and poor or sub-optimal pregnancy outcomes[6-7].Contrarily, the rate of pregnancy loss in this study was 26.7% which was not similar to above-quoted values but was similar to what was reported by study conducted by Barik S et al (2016).[8]

In the present study mean age of the patients was 26.8+/-4.05 yrs (SD

4) years.In our study most of the patients i.e. 61.7% had bleeding between 10 to 15 weeks of gestation. 51.7% had mild bleeding in our study, and 15 % had severe bleeding which was consistent with Prathap Talwat et al (2015)[9]. Subchorionic hematoma was present in 38.3% in our study group, which is consistent with Xiang et al (2014) 39.5%.[10]

In our study abortion occurred in 26.7% (n=16) of patients. This observation was in accordance with the study conducted by barik S et al 2016 in 28.72%[8]. 9.7% (n=3) patients aborted who were in category of mild bleeding, 25% (n=5) aborted in our study who fall in category of moderate bleeding and 88.9% (N=8) abortions were in those patients who had severe bleeding. Study done by Rai P et al (2017) in which majority of patients (70%) presented with spotting (mild bleeding), only 8 (11.4%) had abortion, which was in accordance with our study.[11]

Caesarian delivery occurred in 54.6% (n=24) while as vaginal delivery occurred in 45.5% (n=20).The result obtained from our study was consistent with study by Maryam Sadat Hosseini et al (2009) 49.7,51.3% vaginal and caesarian delivery[12].

In the present study 22.8 % had preterm delivery, the observation were in accordance with the study by G Mustafa et al (2009) 21.2%[13].Low birth weight was present in 27.3% (n=12) of patients. Similar result were found by Rajeshwary Pillay et al at25%[14].In our study there was no perinatal death (n=0).

In our study 73.3% cases continued there pregnancy and 26.6% had non- viable outcome i.e.Abortion.Full term healthy newborn 54.5%.

CONCLUSION

Considering the results of present study "Early Vaginal Bleeding less than 20 weeks of gestation" can be a predicting factor in terms of fetomaternal outcome and it is necessary to increase the knowledge of pregnant women in this regard for closer care.This risk factor should be taken into consideration when deciding upon antenatal surveillance and management of these pregnancies.These pregnancies demand aggressive management which include frequent prenatal and antenatal care.

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