



## Study Of Maternal And Foetal Outcome in Cases Of Obstetric Emergencies Admitted in Icu

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### ABSTRACT

Maternal and Foetal morbidity and mortality in vast number of cases was largely preventable. It is a prospective study of maternal and foetal outcome in 75 cases of obstetric emergencies admitted to ICU in Kurnool medical college & Hospital Kurnool during one year period between april 2012 to march 2013.

### KEYWORDS

Maternal and Foetal outcome, Obstetric Emergencies, ICU.

### Introduction:-

Critically ill patients represent an interesting group with unique characteristics whose management poses a challenge by presence of foetus and an altered Maternal physiology and disease specific to pregnancy. Pregnant women account for a small number of ICU admissions in developed countries (<2%) but they can match up to 10% or more in developing countries. The review of maternal and perinatal mortality and morbidity is a very sensitive index of quality health care delivery system of the country. 60% of 1 billion population of India live in villages and unfortunately the scenario of health care provision to rural sector leaves large deficiencies. 75% of maternal deaths are direct obstetric deaths due to obstetric complications such as hemorrhage, hypertension, sepsis and unsafe abortion.

### Aims & Objective:-

To study the maternal and foetal outcome in cases of obstetric emergencies admitted in ICU for a period of one year.

### Material and Methods:-

Obstetric patients admitted to Intensive care unit of Govt. General Hospital Kurnool during april 2012-march 2013 were taken for study.

### Inclusion Criteria:-

All obstetric cases admitted to ICU during pregnancy and 6 weeks post partum.

### Exclusion Criteria:-

All cases helped 6 weeks post partum with any medical or surgical complications.

### Method:-

This is a prospective and observational study of antepartum and post partum women who were admitted to ICU. In our Institute there are 3 beds for Obstetric patients in AMC unit which has a critical care unit consisting of an anaesthetist, physician, obstetrician and paediatrician. The major equipment included L&T multi parameter, monitors, ECG, NBP heart rate, Oxygen saturation monitors, ventilator, defibrillator, ECG machine. The patient who required intensive care was attested by apache II score.

The apache scoring system has been known for the past two decades to predict adverse outcome based on data available in first 24 hrs.

### Results:-

#### Age Distribution

Age in Years	No. of patients	Percentage	Mean ! SD
20-30 years	73	97.3%	22.91 3.46
>31 years	2	2.7%	

#### Antenatal Case

Antenatal Case	No. of cases	Percentage
Unhooked	53	70.67
Booked	22	29.33
Total	75	100

#### Parity

Gravida	Number	Percentage
1	34	45.3
2	27	36.0
3	9	12.0
4	5	6.7
Total	75	100

#### Period of gestation

	Frequency	Percentage	Mean ! SD
<21 weeks	2	2.7	36.051 4.565
28-37	23	30.7	
737 weeks	50	66.6	
Total	75	100	

Antecedent cases	No. of cases	Percentage
Obstetric cases	58	77.33
Non obstetric cases	17	22.67
Total	75	100

#### Mode of delivery

Mode of delivery	Frequency	Percentage
Vaginal	49	65.3
LSCS	11	14.6
Undelivered	15	20.1
Total	75	100

#### Maternal Outcome

Outcome	Frequency	Percentage
Survivors	37	49.3%
Non Survivors	38	50.7%
Total	75	100%

Foetal Outcome	Frequency	Percentage
Live	39	67.3%
Dead	19	32.7%

Total	58	100%
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		Mean! SD	Min	Max	Chi Squire value	P value
Apache Score	Survivors	12.24!5.01	4	14	6.61	
	Non Survivours	21.26! 6.66	6	39		0.0001
GCS	Survivors	13.19!2.5.4	8	15	2.038	
	Non Survivours	11.89! 2.994	5	15		0.0451

Antecedent cause	Death	Percentage
Hypertensive disorders of pregnancy N=32	17	53.13%
Obstretic hemorlye N=20	8	40%
Sepsis n=6	5	83.33%
Heart failure n=10	4	40
Respiratory Failure n=3	3	100%
Hefatic disorders n=4	1	25%

**Conclusion:-**  
The present study is conducted to study maternal and foetal outcome in cases of obstretic emergencies admitted in ICU.

REFERENCES

1. There were 8109 deliveries and among them 75 patients were admitted to ICU and they were studied over a period of one year. | 2. The mean age of pts admitted was 22.913.46yrs | 3. 70.67% of pts had no antenatal case. | 4. 45.3% of them were primi and 54.7% multi para | 5. Majority of patients were admitted after 37wks of period of gestation as 66.6%. The mean gestational age was 36.0514.565 weeks | 6. There was almost equal distribution among antipatum and post part admissions | 7. 77.33% of admissions were for obstretical cases 22.67% were for non obstretical cases | 8. Among the obstretical disorder hypertensive disorder of pregnancy formed the major diagnosis followed by obstretic hemorrhage and sepsis | 9. The most common intervention was ventilatory support (61.33%) the patients supported with dialysis was in conjention with hemodynamic and ventilator | 10. Among 75 cases 60 pts delivered 15 undelivered 49 cases delivered vagenally 11 c/s | 11. Out of 75 admissions 49.3% survived. The observed mortality in ICU was 50.7% and perinatal motality 32.7% | The mean APACHE 11 score was 12.24 among survivors and 21.26 among the non survivors. | P < 0.0001 Chisquare value=6.6% | The mean duration of ICU stay 1.09! 0.998days.