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30	ARTIPEX	OR	IGINAL RESEARCH PAPER	Obstetrics & Gynaecology				
Indian		PRE	NIFICANCE OF MATERNAL AGE AT FIRST GNANCY AND ITS ADVERSE MATERNAL, INATAL OUTCOME	KEY WORDS:				
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TRACT	INTRODUCTION: 10 to 14 years is early teenage pregnancy and 15 to 19 years is late teenage pregnancy. Ris early puberty, early marriage, illiteracy, social factors, lack of knowledge about contraception, addictions, early activity, ignorance and poverty. Complications: anemia, preterm birth, low birth weight, fetal death. Advanced age: age >35 yrs at time of delivery. CONCLUSION: individualization of antenatal surveillance based on age							

necessary to improve the outcome.

INTRODUCTION

One of the most awaited and cherished moments in women's life is childbirth. It is an emotional and physical achievement for a woman.

1. Teenage pregnancy: 10 to 14 years is early teenage pregnancy and 15 to 19 years is late teenage pregnancy. In this, neonatal and maternal outcome is impacted by biological immaturity, unwanted pregnancies, improper perinatal care, poor maternal nutrition, stress which increases maternal and fetal mortality and morbidity.

Risk factors: early puberty, early marriage, illiteracy, social factors, lack of knowledge about contraception, addictions, early sexual activity, ignorance and poverty.

Complications: anemia, preterm birth, low birth weight, fetal death.

2. Advanced maternal age: age >35 yrs at time of delivery. Factors responsible: late marriages, small families, increased life expectancy, more effective contraception, education, career, improved infertility treatment.

Complications: Postpartum hemorrhage, increased incidence of cesarean section, increased risk of hypertension, diabetes melitus, misscarriage, ectopic.

AIMS AND OBJECTIVES

Aim: to assess effects of maternal age on obstetric and neonatal outcomes.

Objective:

- To assess maternal outcome: preeclampsia, eclampsia, anemia, postpartum hemorrhage, Gestational hypertension, Gestational Diabetes Melitus, oligohydramnios, polyhydramnios, mode of delivery.
- To assess neonatal outcome: birth weight, APGAR, maturity.

MATERIAL AND METHODS

Type of study : hospital based prospective observational study.

Place of study : Katuri medical college and hospital department of obstetrics and gynecology.

Duration: (Jan 21 to june 2022) 18 months.

RESULTS

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The majority of study individuals belong to 20 to 34 of age in our study (72 %) , 19% belong to teenagers, 9% belong to elderly age group.

In our study teenage mothers delivered vaginally by 47.3% and by LSCS 52.6%. In elderly mothers vaginal and cesarean deliveries were 33.3% and 66.6%.

In our study oligohydramnios in teenage and elderly aged mothers were 15.8% and 22.2%. No cases of polyhydramnios were observed in both extreme ages.

AGE GROUP										
		17 to 19	9 yrs	20 to 30 yrs		≥35 yrs				
		Frequency	%	Frequency	%	Frequency	%			
GDMAGE		18	94.7%	66	92.2%	6	66.6%			
GDM-A2		0	0.0%	4	5.5%	2	22.2%			
GDM-A1		1	5.3%	2	2.7%	1	11.6%			
hypothyroid	present	2	10.5%	13	18%	3	33.3%			
	absent	17	89.5%	59	82%	6	66.%			
anemia	Present	1	5%	2	2.8%	1	12%			
	absent	18	95%	70	97.2%	9	88%			

AGE GROUP										
		17 to 19) yrs	20 to 30 yrs		≥35 yrs				
		Frequency	%	Frequency	%	Frequency	%			
Amniotic	normal	16	84.2%	62	88%	7	77.7%			
fluid	oligo	3	15.8%	7	9.7%	2	22.2%			
	poly	0	0.0%	3	4.16%	0	0.0%			
PROM	absent	16	84.2%	60	83.3%	7	77.7%			
	present	3	15.8%	12	16.6%	7	22.2%			
Mode of	vaginal	9	4.3%	37	51.3%	3	33.3%			
delivery	LSCS	10	52.6%	35	48.6%	6	66.6%			
PPH	present	2	10.5%	9	12.5%	1	11.2%			
	absent	17	89.5%	63	87.5%	8	88.8%			

		AGE GROUP							
		17 to 19 yrs		20 to 30 yrs	≥35 yrs				
	mean	Standard deviation	mean	Standard deviation	mean	Standard deviation			
APGAR @ 1 min	6.6	0.9	6.7	0.8	6.4	1.0			
APGAR @ 5 min	8.4	0.9	8.6	0.7	8.3	0.9			

AGE GROUP								
		17 to 19 yrs		20 to 30 yrs		≥35 yrs		
		Frequency	%	Frequency	%	Frequency	%	
Baby	IUD	0	0%	0	0%	1	4.6%	
Outcome	IUGR	1	5.2%	5	6.9%	2	22.2%	
	Preterm	3	15.7%	4	5.5%	1	11.1%	
	Term	15	78.9%	63	87.5%	8	66.6%	
Baby	<2.5 kg	12	63.1%	21	29.1%	2	22.1%	
Weight	>2.5kg	7	36.8%	51	70.8%	7	77.7%	
NICU	Admitted	7	36%	15	20.8%	3	33.3%	
Admission	Not admitted	12	63%	57	79.1%	6	66.6%	

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REFERENCE

- 1. Talukdar R. Study of Obstetric Outcome in Primiparous Women in Different Age Groups in our Population. International Journal of Science and Research (IJSR).2016;5(11):930-4. Yasmin G, Kumar A, Parihar B.Teenage Pregnancy-Its L Rashmi. "Maternal and fetal outcome in teenage pregnancies," International Journal of Current Research. 2016;8(12):43694-7
- 2.
- 3.
- 4.
- International journal of Current Research. 2016;8(12):43694-7 Rita D, Naik K, Desai RM, Tungal S. Study of the fetomaternal outcome of teenage pregnancy at tertiary care hospital. Int J Reprod Contracept Obstet Gynecol. 2017;6:2841-5. Rajput N, Paldiya D, Verma YS. Effects of advanced maternal age on pregnancy outcome. Int J Reprod Contracept Obstet Gynecol. 2018;7:3941-5. Kahveci, B.; Melekoglu, R.; Evruke, I.C.; Cetin, C. The effect of advanced maternal age on perinatal outcomes in nulliparous singleton pregnancies. BMC Decempent Childbirth 2019;19:242 5. 6. BMC Pregnancy Childbirth. 2018;18:343.