

ABSTRACT

OBJECTIVE

To assess the utility of radiological (CT/MRI) imaging by correlating the clinical presentation and neuroimaging and to evaluate maternal morbidity and mortality associated with eclampsia

STUDY DESIGN

It was a prospective study conducted at Govt.Mohankumaramangalam Medical College,Salem with a sample size of 100 patients who had eclampsia.

METHODS

All patients of eclampsia admitted at Government Mohan Kumaramangalam Medical College, Salem who fulfilled the selection criteria were first stabilized with magnesium sulfate as anticonvulsant and antihypertensives according to blood pressure. Detailed history, clinical, laboratory and neuroimaging data, maternal outcome and associated morbidities collected and analyzed.

RESULTS

1. Mean age of study population 23.95,Mean gestational age 35.07 weeks.
2. Antepartum eclampsia 42%, Postpartum eclampsia 58%
3. All women had generalised tonic clonic convulsions.
4. Mean systolic BP 154.54 mmHg, Diastolic BP 94.86 mmHg
5. Proteinuria 2+ found in most of the women

6. 76% had normal fundoscopy findings
7. Most of them had headache, presented in unconscious state.
8. Most common comorbidity is anaemia
9. Most of them delivered vaginally within 12 hours of admission
10. In postpartum eclampsia delivery to seizure interval is 3.59 days.
11. PRES was seen as a major radiological finding
12. Out of 61 patients with radiological abnormality 52 had neurological signs and symptoms.
13. 48% of women recovered without any complications, DIC seen in 12%
14. Maternal death was 5%, Common cause was cortical vein thrombosis.

CONCLUSION

Eclampsia is preventable, still remains a major cause for maternal morbidity and mortality. Neuroimaging may be indicated in all eclampsia patients, specific attention has to be given to atypical cases with onset of eclampsia before 20 weeks of gestation or more than 48 hours after delivery and those resistant to anticonvulsant therapy, where neurological signs and symptoms fails to predict the diagnosis. Women from low socio economic status should be educated about nutrition, pregnancy, information about premonitory symptoms and the need for regular antenatal and postnatal check ups.