ABSTRACT

INTRODUCTION

Oligohydramnios is defined as amniotic fluid volume less than expected for gestational age. As defined by USG as an amniotic fluid index 5 cm or less or Singe deepest pocket (SDP) of amniotic fluid value less than 2 cm is oligohydramnios.

AIMS OF THE STUDY

To determine Obstetric outcome in term low risk pregnancy with AFI less than or equal to 5.

To assess whether antepartum oligohydramnios is associated with adverse perinatal outcome.

MATERIALS AND METHODS

Present study was conducted at Chengalpattu Medical College in Department of Obstetrics and Gynaecology over period from 2015 to 2016. 200 patients in third trimester attending our hospital with evidence of Oligohydramnios were selected after satisfying inclusion and exclusion criteria and studied prospectively.

After collecting a detailed history, complete examination was done. All required investigations performed with respect to patients condition. Oligohydramnios is confirmed by measuring Amniotic Fluid Index by USG. Routine management in form of rest, oral and intravenous hydration, left lateral position and control of etiological factor was done if present. Fetal surveillance was done by means of modified Biophysical profile and USG. Decision of delivery by induction or elective or emergency LSCS was done as indicated Some patients who were already in labour were allowed to go in spontaneous labour. Cases were than thoroughly studied to observe maternal and perinatal outcome.

OBSERVATION AND RESULTS

Increased occurrence of non reactive CTG, increased incidence of meconium, and increase in caesarean section rate are observed in my study group.

CONCLUSION

To conclude, an AFI measurement of less than 5 cm detected after 37 completed weeks of gestation with a low risk pregnancy is found to be an indicator of adverse pregnancy outcome with higher cesarean section rate. Hence AFI assessment serves as an important tool and remains as an effective screening test in predicting fetal distress in labour that requires cesarean section.

KEY WORDS: oligohydramnios, cardiotocography, caesarean section, fetal distress, Amniotic fluid index