

ABSTRACT

TITLE: Maternal and Perinatal Outcome in Cases of Preterm Premature Rupture of Membrane (PPROM) - a Prospective Study

INTRODUCTION: Preterm premature rupture of membranes is a fair complication of pregnancy. The aetiology is obscure, leading to significant maternal and neonatal mortality and morbidity. It complicates 2-3% of pregnancies leading to 30-40% of preterm births.

OBJECTIVES: To study the risk factors causing preterm premature rupture of membranes. To study the outcome of labour in preterm premature rupture of membranes. To find out the maternal and perinatal morbidity and mortality trends in preterm premature rupture of membranes.

MATERIALS AND METHODS: It is a hospital based prospective study of 200 patients with preterm premature rupture of membranes in between 28-37 weeks of gestation admitted in our tertiary care centre.

RESULTS: In this study, the commonest risk factor was breech presentation. 67% patients delivered vaginally and 33% underwent lower segment caesarean section. Out of 67%, 36% went into spontaneous labour and 31% needed induction or augmentation. The main indication for LSCS was fetal distress. There was no maternal mortality and the common maternal morbidity was wound infection. The

commonest neonatal complication was respiratory distress syndrome and there were 13 neonatal deaths.

CONCLUSION: pPROM is a common complication that leads to various maternal and neonatal complications. Adequate antenatal care and avoidance of risk factors can prevent preterm births. Use of accurate antibiotics and corticosteroids can reduce the maternal complications and preterm complications respectively. An understanding of gestational age dependant neonatal mortality and morbidity is important in determining the potential benefits of conservative management of preterm PROM at any gestation.

KEY WORDS: pPROM, maternal complications, Perinatal complications