

ABSTRACT

BACKGROUND AND OBJECTIVE

Bleeding per vaginum in the first trimester occur in 15% to 25% of all pregnancies with 50% of pregnancy loss. It may vary in presentation from simple implantation bleeding up to life threatening complications like ectopic pregnancy and molar pregnancy.

To emphasize the importance of early diagnosis and prompt treatment in the improvement of maternal and perinatal outcome.

To emphasize the importance of antenatal registration and admission needed for better timely obstetric care.

To find out the percentage of pregnant women with first trimester bleeding per vaginum which end up in first trimester miscarriage, second trimester miscarriage, preterm labour, and full term labour.

To asses the value of current obstetric practice in managing first trimester bleeding per vaginum.

MATERIALS AND METHODS

Main source of data for study are Antenatal mothers from Coimbatore Medical College hospital, Coimbatore. Total of 150 cases were selected for prospective study from Coimbatore Medical College hospital, Coimbatore.

RESULT:-

In 150 cases there were 21 first trimester miscarriage, 6 second trimester miscarriage and 123 pregnancies proceeded to the period of viability. Preterm birth 21, term 102. Out of all 27 underwent cesarean section , rest delivered vaginally. There were total of 6 perinatal mortality because of birth asphyxia and MAS.

Apgar of the babies were dependent on various factors like prematurity, birth asphyxia, MAS.

Thus the study showed that 14% ended up in first trimester miscarriage, 4% ended up in second trimester miscarriage, 14% ended up in preterm labour, 68% ended up in full term labour with pregnancy with first trimester bleeding per vaginum.

CONCLUSION

Early diagnosis by USG, bed rest, use of progesterone, regular antenatal checkup will help in continuing the pregnancy till term with good fetal outcome.