

A-15: Past obstetric history and risk of perinatal deaths

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Objective: To assess the risk of perinatal deaths in women who had a bad obstetric history.

This case control study was conducted at the professorial ward of the De Soysa Hospital for Women, Colombo over a one-year period. The past obstetric history of 83 singleton perinatal deaths occurring to multigravidae was compared with that of 139 multigravidae who had live singleton deliveries. Information was

obtained by using a structured questionnaire. Assessment of risk factors was done by calculation of odds ratios (OR) and confidence intervals (CI).

The mothers of cases and controls were similar in respect of age ($p=0.12$), marital status ($p=0.5$), education ($p=0.1$) and employment status ($p=0.8$). The risk of perinatal deaths in subsequent pregnancies was significantly higher in the presence of a history of stillbirth (OR= 56.7, CI =7.9-88.1), first week neonatal death (OR=116, CI =15.6-873.2), late neonatal death (OR=7.31, CI=1.51- 35.3) and premature birth (OR=5.5, CI=2.4-12.7). Those who had previous abortion had a non-significant risk of a subsequent perinatal death than those who did not have a past abortion (OR=1.4,CI=0.78-2.53). The presence of pregnancy induced hypertension (OR=1.59,CI=0.73-3.46), diabetes mellitus (OR=1.68, CI=0.1-27.3), and pre-eclamptic fits (OR=2.62,CI=0.43-55.9) in past pregnancies were associated with a slightly higher risk of subsequent perinatal deaths which was not significant.

Past history of stillbirths, neonatal deaths and premature births are associated with a significantly high risk of subsequent perinatal deaths. Such women should be identified early in pregnancy and should receive careful antenatal care.