International Session

日產婦誌51卷臨時増刊

IS-85

S-660

COMPLICATIONS OF HOME DELIVERY IN ADMISSIONS AT THE MATERNITY HOSPITAL, KATHMANDU.

S. Sharma/S. M. Padhye Dept. of Ob/Gyn, Maternity Hospital, Thapathali, Kathmandu, Nepal

Maternal complications claim 508,100 lives a year. Majority of deaths occur in developing countries. Maternal Mortality Ratio in Nepal, where 90% of births occur at home, is 515 per 100,000 live births. Patients attending Maternity Hospital with complications following home delivery are analysed.

Objective: 1. To assess the proportion and characteristics of women with complications following home delivery.

2. To analyse the type and extent of morbidity and mortality in these women and their fetuses.

Methodology: Retrospective analysis of case notes between antit 1995 to october 1995 (First 6 months of the Nepalese new year).

Results: There were a total of 193 admissions with home delivery complications. This formed 2.62% of Hospital Deliveries during this period. 21.2% mothers were teen aged and 92% were below 35years of age.33.1% were primigravidae. 80.2% of women had Haemog'obin less than 10 gram per dl. 10 patients suffered from medical problems. 79.7% had retained placentae. Genital tract injury, post partum haemorrhage and puerperal pyrexia

post partum haemorrhage and puerperal pyrexia were common complications. There were 2 maternal deaths due to haemorrhagic shock. There were 17 perinatal deaths and 13 neonatal morbidities.

Conclusion: Dangerous and life theatening complications can occur following home deliveries. Measures to make home deliveries safe by promoting trained attendants during delivery and provision of essential obstetric care in the local hospitals are urgently needed

Limitation: Comparision of complications of home and hospital deliveries is not possible from this study because the cases come from a population whose size is unknown.

IS-86

Is the neonatal outcome in caesarean breech better?

Rana A *, Gurung G*, Thapa B*, Dhakal K*, Verma S* Dept of Gyn.Obs. TU Teaching Hospital Kathmandu Nepal

OBJECTIVE: To see neonatal outcome in caesarean and

vaginal breech delivery.

STUDY DESIGN: 5 Years retrospective study [1st Jan 1993-Jan 1998] Discharge case file.

MAIN OUTCOME MEASURE: - Apgar at birth

- CPR/IPPV

- Neonate at discharge.

RESULTS: During 5 years of study period Jan 1st 1993 1998, there were 248 breech in 17,853 delivery. Incidence of breech is 1.389%, 148(54.43%) were delivered vaginally and 113 (45.56%) had C. Section.

There were total 30 perinatal death in vaginal birth of which IUD (14) CMF (congenital malformation (8) 3 NND due to prematurity and 5 preventable term death (fetal weight 2.75 - 3.3 kg) - of which 3 had head entrapment.

18 newborn babies had 1 minute apgar <3 in vaginal birth Compared to 5 in the caesarian birth (2 baby in elective caesarian delivery). 5 babies in vaginal delivery had severe birth asphyxia 4 needing IPPV.

In neonatal morbidity, 3 vaginal birth had longer neonatal stay, one was preterm 1.25 kg, other term IUGR 2.2 who developed neonatal seizures and Ja undice.

Third baby of 3.8 kg with short neck developed septicemia due to PROM. In C. Section only one baby (3.2 kg) had neonatal Jaundice. None of the breech baby sustained fatal birth injury.

CONCLUSION: Caesarean breech had better perinatal outcome compared to vaginal born, taking consideration of IUD, Prematurity and also congenital malformation.