8- Comparison between Vaginal Delivery and Caesarean Section in Preeclampsia at Tertiary Care Hospital in Egypt

Abstract: Introduction: Preeclampsia is a Pregnancy Induced Hypertension (PIH) of unknown etiology. PIH causes intra uterine growth retardation (IUGR), pre-mature delivery, intra uterine fetal death, (IUFD), abruption placentae. It also causes increase morbidity and mortality among pregnant women. The cause for (PET) is unknown, there appear to be certain risk factors associated with the condition. The factors that have been postulated to influence the risk of (PET) among the mothers include diabetes, obesity, multiple gestation, primiparity, age, personal or family history of (PET), and chronic hypertension

Methods: Retrospective study at Aswan University Hospital from January 1/2013 to December 31/2013. Pateint diagnosed by (systolic blood pressure 160 or more and/or diastolic blood pressure 110 or more in two occasion four hours apart in semi setting position plus 24hrs protein collection in urine 5 gram or more).

Results: 152 were delivered by caesarean section (CS) with incidence (64.95%) and 82 patients terminated by vaginal delivery (VD) with incidence 35.04% PET was more common in the age group 21-30 years 99 cases with incidence (42.3%) and less common in the age group >37 years 23 cases with incidence (9.82%)prematurity 35 cases in CS delivery with incidence (23.02%) versus 16 cases in VD with incidence (19.51%) accidental haemorrhage cases 2 in CS with incidence (1.31%) versus 2 cases in VD with incidence(2.43 %), acute renal failure 2 cases in VD with incidence (2.43 %).

Conclusion: PET increases the incidence of CS rate to prevent maternal complications of PET and ET.CS if done promptly leads to more favourable outcome than conservative obstetric management with vaginal delivery in sever PET especially in PG after 28 weeks. Termination of pregnancy by CS reduces maternal morbidity improves maternal outcome by reducing complications.

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