STUDY OF MEAN ARTERIAL PRESSURE, ROLL OVER TEST AND WEIGHT DURING PREGNANCY FOR THE PREDICTION OF PREGNANCY INDUCED HYPERTENSIVE DISORDER

by

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Uptil now prevention of pregnancy induced hypertensive disorder like pre-eclampsia has not been possible. As both maternal and fetal results would be better if management of hypertensive disorder is started at the early stage of the condition, efforts are being made not only to detect them early but also to select of up the probables for intensive antenatal care.

There are some conditions when hypertensive disorder is more likely to develop, such as primigravid a specially young or elderly, mutiple, pregnancy, hydramnios, hydrops foetalis, diabetes mellitus, obesity, previous history of pre-eclampsia and eclampsia. In absence of such predisposing factors some patients may also develop and suffer from such condition. Several investigative procedures, clinical and otherwise are now being practised and advocated for prediction of this condition a few weeks before the actual onset.

In the Chittaranjan Seva Sadan College, Calcutta a study was undertaken on a few clinical methods to corroborate or otherwise, the results of previous workers, regarding prediction of pregnancy induced hypertension.

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Material and Methods

At the first antenatal visit mean arterial pressure was recorded in 100 pregnant women at different periods of gestation. Those whose M.A.P. was 95 mm of Hg and above were followed in their subsequent visits in the antenatal clinic for the detection of development of pre-eclampsia and effect of hypertensive disorder on the mother and the foetus. Roll over test was performed between 28 to 32 weeks of gestation. The test was considered positive if there was an increase in the diastolic blood pressure of 20 mm of Hg or more from the left lateral recumbent position to the supine position. If the diastolic blood pressure change between the two position was less than 20 mm of Hg the test was considered negative.

Weight of 1000 patients was recorded at the first and each antenatal visit.

Observation and Discussion

Out of these 1000 antenatal cases, only 78 patients showed mean systolic pressure of 95 mm of Hg and above. Page (1972) and Dewhurst (1976) considered M.A.P. of 105 mm of Hg as a determinant of hypertensive level. In this study, M.A.P. of 105 mm of Hg and above was observed in 42 cases and the rest 36 cases had bet-

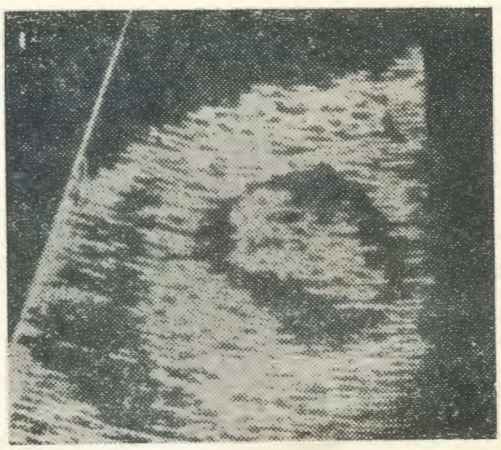

Fig. 1
Ultrasonographic picture showing early ten-week foetus in enlarged view.

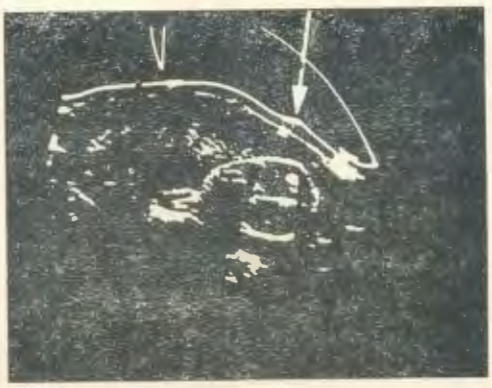

Fig. 2
Ultrasonographic picture showing foetal head.

Fig. 3
Ultrasonographic picture showing ovarian cyst.

Fig. 4
Ultrasonographic picture showing fibroid.

Fig. 1
Photomicrograph of membranes showing ordema epithelial degeneration and leucocytic infiltration.

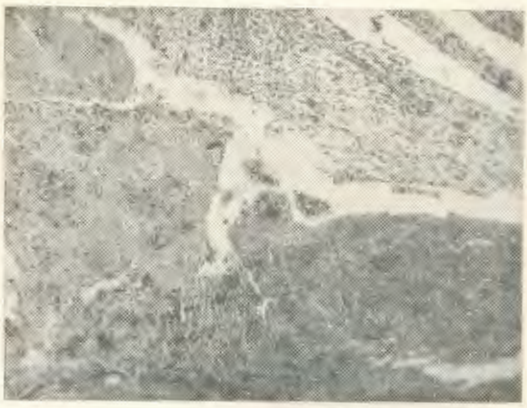

Fig. 2
Photomicrograph of decidua basalis showing necrosis, leucocytic infiltration and haemorrhage.

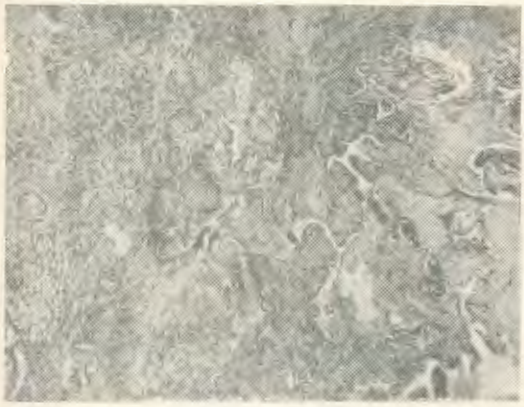

Fig. 3
Photomicrograph of decidua basalis showing haemorrhage, and leucocytic infiltration.

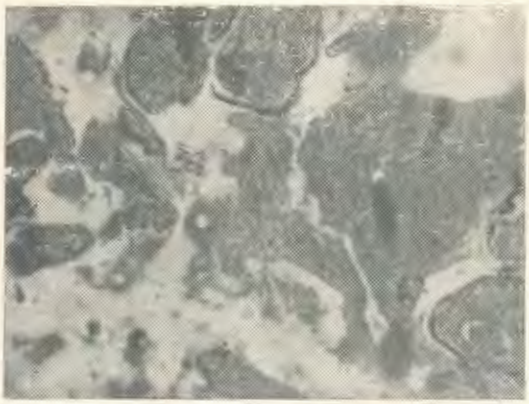

Fig. 4
Photomicrograph of decidua basalis showing coagulative necrosis.

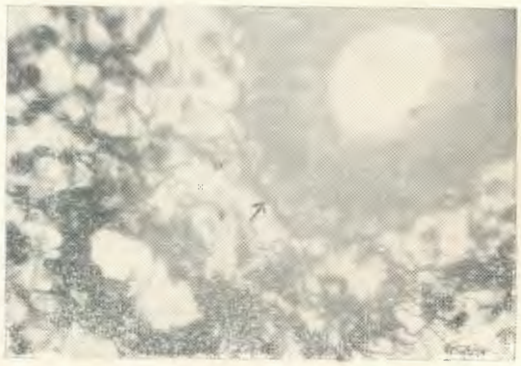

Fig. 1
(Reticulin staining x 400)
Proliferative phase (9th-11th day). An increase in the number and thickness of fibres is seen. Basement membrane of glands is prominent.

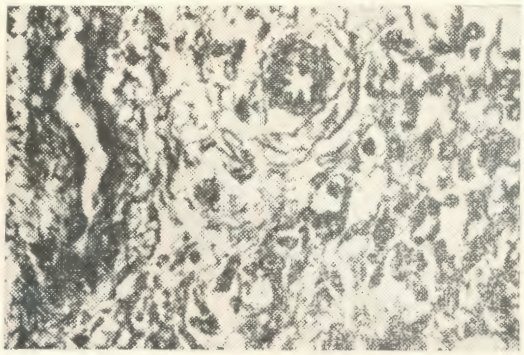

Fig. 2
(Reticulin staining x 400)
Perivascular nets have become more prominent than periglandular nets (25th day).

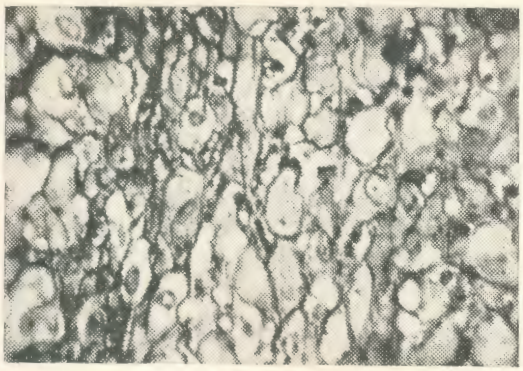

Fig. 3
Decidua of early pregnancy (Reticulin staining x 400). Coarse reticulin fibres completely encircle individual decidual cells forming a "Mosiac-like" Pattern.

Study of Multiload Cu-250 with CuT-200 and Lippes Loop—Raut et al, pp. 414-418

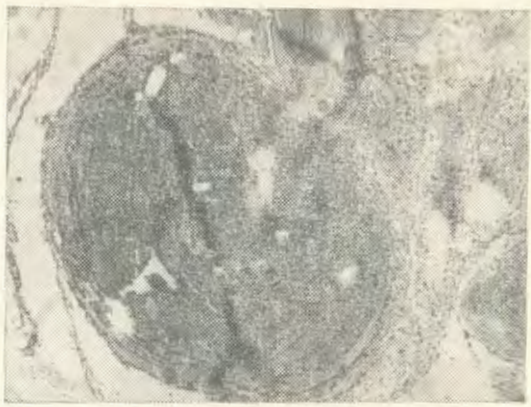

Fig. 5
Photomicrograph of decidua basalis showing early red thrombus formation in its blood vessels.

Fig. 1
Showing gross appearance of the tumour.

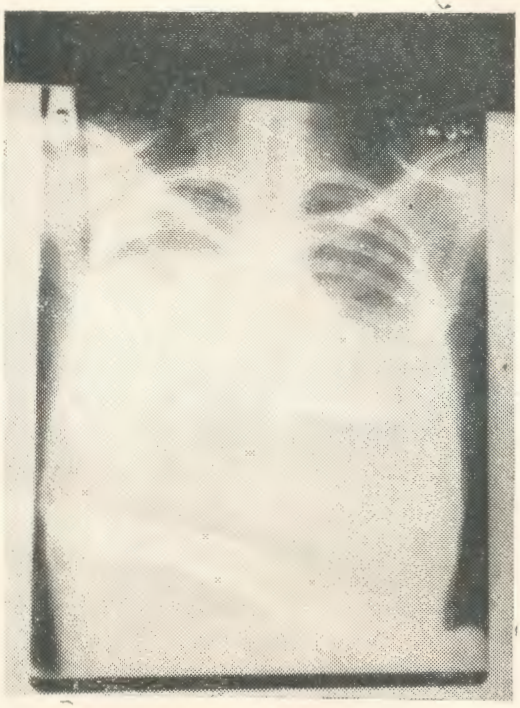

Fig. 2
X-ray chest showing bilateral hydrothorax.

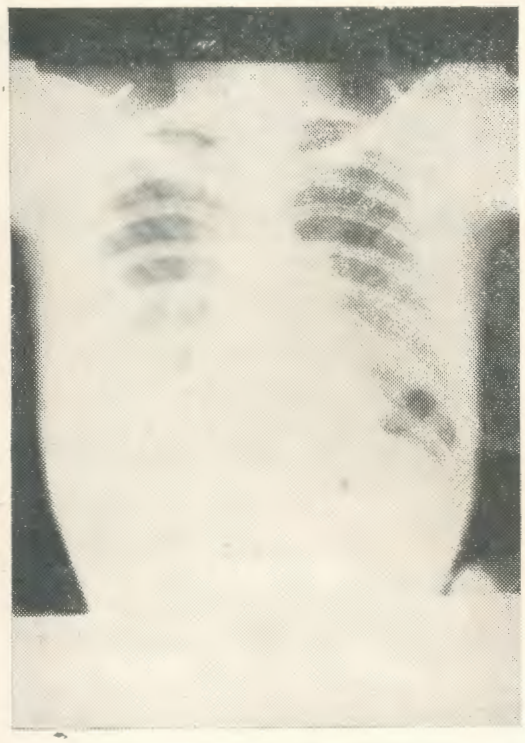

Fig. 3
X-ray chest on 10th day of operation.

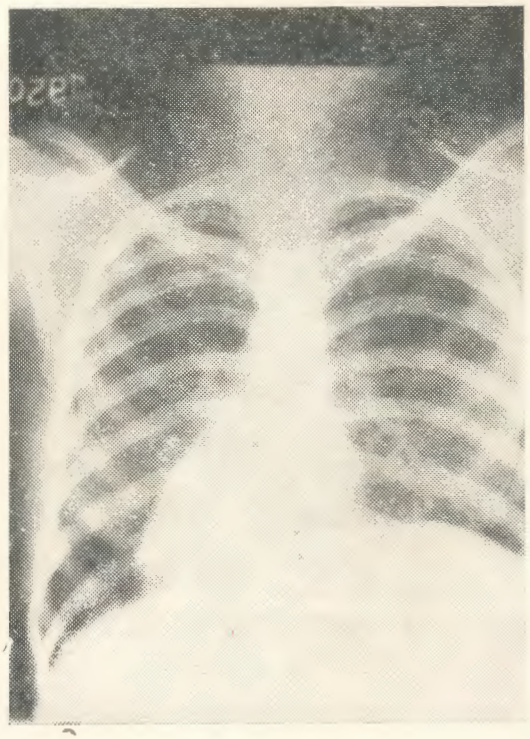

Fig. 4
X-ray chest on 17th day of operation.