PREGNANCY OUTCOME IN PREGNANCY FOLLOWING RECURRENT ABORTION

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SUMMARY

In the prospective clinical study, the perinatal outcome in 40 subjects with history of recurrent abortions was compared to the same number of matched controls. Ten pregnancies (25%) in the study group ended in abortions. Recurrence rate for abortions was higher after previous 4 abortions (75%). The reproductive success rate progressively decreased with increasing number of previous abortion, being 90.5% after two, 66% after 3 and 25% after 4 or more. Incidence of preterm labour (40%) and low birth weight babies (43.7%) was higher in the study group.

INTRODUCTION

The prevalence of recurrent abortion has been variously reported in literature from 0.3% (Roth: 1963) to 1% (Malpas 1938, stray Pederson 1979). The aetiological factors involved in recurrent abortions cannot be explained in more than 50% of the cases.

Pregnancy after history of recurrent abortions has been associated with increased risk for preterm delivery, placenta previa and intrauterine growth re-

Dept. of Obst. & Gyn. P. G. I. M. E., Chandigarh. Accepted for Publication in March '95. tardation (IUGR). Studies of recurrent abortions show great variations in probability of successful reproductive outcome in the next pregnancy: Malpas (1938) and Eastmen (1946) suggested that chances of live birth has about 30% and Harger et al 1983: Stray Pedersen 1984: reported the successful outcome in 50-70%.

This study was undertaken to study the perinatal outcome in patients with history of recurrent abortions.

MATERIAL AND METHODS Eighty pregnant patients were recruited

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from antenatal clinic of the department of Obstetrics and Gynaecology, Nehru Hospital, Chandigarh. The study group comparised of 40 women, who had two or more spontaneous abortions of unknown aetiology and the control group comprised of 40 women were matched for age and parity with no history of abortion. Documentation of antenatal complications, period of gestation at delivery, mode of delivery, birth weight, apgar score and any neonatal complications was done in both the groups.. the data was analysed by using the Chisquare test.

RESULTS

Demographic Profile

Majority of the patients in both the groups were between 21-30 years of age. In the study group, 18 patients (45%) had history of first trimester abortions 10(25%) had second trimester abortions and 12 (30%) had both first and second trimester abortions.

Thirty seven patients (92.5%) were primary aborters and 3 (7.5) were secondary aborters. Abnormal glucose tolerence test was observed in 5 patients and twin gestations in 2 patients of the study group. Incidence of hypertensive disorders of pregnancy was higher in study group (30%) than the control group (17.5%).

Pregnancy outcome

Ten pregnancies (25%) in the study group ended in abortions, compared to none in the control group. In patients with previous history of 3 or more abortions, recurrence rate of abortion was high (33.3%) after three and (75%) after four. Incidence of preterm labour was higher in the study group (40%). Preterm labour was spontaneous in 7 patients (25.33) and in rest, elective termination of pregnancy was done. Spontaneous preterm labour was observed in higher number of patients with previous 3 or more abortions (25%) compared to previous 2 abortions (9.5%).

Cesarean section incidence was higher in study group (56.25%) compared to the control group (13.5%). Mean birth weight was similar in both the groups (Study 2.51+0.46 control 2.85+0.3). There was no difference in the apgar score of the new borns in both the groups. More babies of the study group required admission to neonatal intensive care unit due to prematurity.

DISCUSSION

In idiopathic recurrent abortions, Stray Pederson & Stray Pederson (1984) reported successful pregnancy outcome in majority of the patients (70-80%) with proper antenatal care in form of reassurance and psychological support.

The number of previous miscarriages is the major determinant of the reproductive prognosis. Parazzini et al (1988) reported a decrease in the reproductive

Table I

Pregnancy Outcome

	Study n=40	Control n=40	
Abortions	10	-	p<0.01
Preterm labour	12	4	
Postdatism	1	11	p<0.05

PREGNANCY OUTCOME IN PREGNANCY FOLLOWING

	No. of abortions	No. of Patients	Abortions	Preterm labour
I	2			
I	2 .	21	2 (9.5%)	2 (9.5%)
	3	15	5 (33.3%)	4 (26.6)
	4	4	3 (75%)	1 (25%)
II	Type of abortions			
	First trimester	18	2 (11.1%)	3 (16.6%)
	Second trimester	10	2 (20%)	2 (20%)
	First & Second trimester	12	6 (50%)	2 (16.6%)

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	.	n	16	II
-		10		

Previous abortions and adverse pregnancy outcome

Ta	ıbl	e	III

Mode of Delivery			
Delivery	Study n=30	Control n=30	
SVD	10 (33.3%)	23 (57.5%)	
Forceps	1	10 (25%)	
Ventouse	2 -		
Cesarean Section	17 (56.6%)	7 (17.5%)	p < 0.01

success rate with the increasing number of previous abortions, the rate was 80% after two, 60% after three and 46% after four or more. In the present study reproductive success rate was 90.5% after two, 66% after three and 25% after four or more. In the present study, the recurrence rate of abortion was found to be 25% which is consistent with studies by Harger et all 1983 and Thito et al 1979. Stray Pederson & Stray Pederson and Thito et al 1984. reported the recurrence rate of 14%. Previous mid trimester abortions was associated with increased incidence of subsequent absortions (37.3%) compared to first trimester absortions, where incidence of repeat abortior was found to be 11.1%.

Incidence of preterm labour reported in the present series is similar to tha reported by Pickering Forbes (1985)

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Neonatal Outcome				
	Study n=32	Control Group n=40		
Mean Birth Weight	2.511 + 1.4-3.4 kg	2.455 + 2.3-3.kg		
LBW	14 (43.7%)	5 (12.5%) p < 0.01		
SGA	* 6	4		

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Reginald et al (1987). In a study by Thom et al (1992) the relative risk of IUGR and preterm birth was found to be 1.2% and 1.5%.

Harger et al (1983): Reginald et al (1987) reported incidence of low birth weight babies (LBW) as 22.63% and 27% respectively. In the present study much higher incidence of LBW (43.7%) was found, 57.14% of low birth weight babies were preterm. Pickering and Forbes (1985) did not find an increased prevalence of IUGR babies in their study.

There was no still birth or neonatal death in both the groups. In the present series it was observed that pregnancies after recurrent abortions are associated with increased risk of abortions, prematurity, low birth weight babies and operative deliveries.

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176

Table IV