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TITLE

LETTING NATURE TAKE ITS COURSE IN PPROM20: MATERNAL AND EVENT PROFILES WITH EXPECTANT MANAGEMENT.

AUTHOR/S

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ABSTRACT

Context:

Pre-viable premature rupture of membranes before a gestational age of 20 weeks (PPROM20) is an uncommon but challenging clinical entity in our setting, where expectant care is the norm.

Objective

To identify the outcomes of PPROM20 in this cohort of women, calculate the duration of the latency period, and to ascertain the proportion of those who experience significant illness and/or required intervention for delivery.

Methods:

This was a retrospective audit of singleton pregnancies with PPROM20 between January 2012 and June 2016. Inclusion criteria: presentation within 12 hours, early ultrasound dating, visualization of amniorrhexis and/or a positive ROM test and, an ultrasound-demonstrated oligohydramnios after the event. SPSS program was used for data analysis.

Interventions: Indicated uterine evacuation.

Outcome measures:

(A) latent period between PPROM and indicated or spontaneous expulsion/delivery (b)gestational age at time of spontaneous or induced delivery (c) indications for induced delivery (d) major maternal illness around the time of fetal expulsion/delivery.

Results:

Eighteen (18) mother-baby pairs fulfilled our criteria. The mean gestational age at membrane rupture was and pregnancy conclusion were 17.54 weeks and 22.22 weeks respectively. The mean latent period was 4.68 weeks. Spontaneous expulsion occurred within 7 days of presentation, in 7/18 subjects. Of the 4 women who had 'interruption', 3 had persistent pyrexia despite antibiotics, and the other had antepartum hemorrhage at 27 weeks. Only 4 babies were born after 28 weeks. A third of the women had retained placenta, one of them requiring red blood cell transfusion.

Conclusion: Most of PPROM20 pregnancies did not get to 28 weeks, fewer still, reached the age of presumed fetal viability. Larger studies are warranted, to better reflect the true outcome of PPROM20.

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