

Original Research Article

Study of Maternal and Fetal Outcome in elderly Primigravida.

Dr. Nishat Fatima¹, (MS, Ex SR), Dr. Kirti Singh² (MS, Ex SR) & Dr. Zoya Kausar³ (MS, SR)

Dept. OBG, GMC, Bhopal, M.P.^{1&3}
Dept. OBG, GMC, Shahdol, M.P.²

Corresponding Author: Dr. Zoya Kausar

Abstract The elderly primigravida is defined as a women who goes into pregnancy for the first time at the age of 35yrs or more.

Increasing importance of education and postponement of marriage and childbearing in order to pursue carrier options has led to increase in the population of elderly primigravida .This along with advancement in Assisted reproductive technology has lead to increase in more and more women conceiving for the first time after the age of 35 yrs.

Nevertheless the increased fetomaternal complication and consideration as a high risk leading to early intervention among this age group is of concern.

Objective: The objective of the study was to find out incidence and to determine fetomaternal outcome in elderly primigravida.

Materials and methods: This was a cross sectional study conducted in the Department of obstetrics and gynaecology,MGMMC,Indore from march 2019 to march 2020 for a period of 1 year.

Elderly primigravida admitted at term were studied for fetomaternal outcome.

Results: Of the total 18050 deliveries,306 were elderly primigravida .

Maternal complications seen were oligohydramnios5.8%, Gestational hypertension 2.8%,Breech presentation 5.3%,PROM 3.8%,Placenta previa 2.8%,Gestational diabetes 1.2% and Twin pregnancy 2.2%.

Caesarean section rate was 62.4%..Out of which 26.8% were done for cephalopelvic disproportion. 6.6% babies were low birthweight.

Conclusion: Although fetomaternal complications are increased in elderly primigravida is increased but with adequate antenatal care, early recognition of complications and timely intervention optimum outcome can be expected

Keywords: Elderly primigravida, complications, fetomaternal outcome.

1. INTRODUCTION:

The term 'elderly primigravida was first used in 1958 by the International Council of Obstetricians and Gynecologists to refer to women aged over 35 years who were embarking upon their first pregnancy (Tuck *et al* 1988). Such a rigid cut off point has been criticised by Kane (1967) who demonstrated that risk increases (and outcomes worsen) from a maternal age of 25 years onwards. A review of the literature, however, indicates that a wider range of definition is used. Some authors are interested in primiparous women aged over 30 (Vessey *et al* 1986; Barkan & Bracken 1987), whilst others have only followed up those women aged over 40 (Berryman & Windridge 1991a, 1991b). For this reasonThe term 'elderly primigravida was first used in 1958 by the International Council of Obstetricians and Gynecologists to refer to women aged over 35 years who were embarking upon their first pregnancy (Tuck *et al* 1988). Such a rigid cut off point has been criticised by Kane (1967) who demonstrated that risk increases (and outcomes worsen) from a maternal age of 25 years onwards. A review of the literature, however, indicates that a wider range of definition is used. Some authors are interested in primiparous women aged over 30 (Vessey *et al* 1986; Barkan & Bracken 1987), whilst others have only followed up those women aged over 40 (Berryman & Windridge 1991a, 1991b).

2. MATERIALS AND METHOD:

A cross-sectional study was carried out over a priod of 1 year from March 2019 to March 2020 in the Department of obstetrics and gynaecology at MGMMC, Indore. All Elderlyprimigravida at term being admitted fore delivery during this period were included in the study.

Various maternal and fetal complications were studied .

3. RESULTS

Table No.1: DISTRIBUTION OF CASES AS PER THE AGE

AGE IN YEARS	NO. OF CASES	PERCENTAGE
35	98	32
36-40	114	37.2
>40	94	30.7
TOTAL	306	100

Table No.2: DISTRIBUTION OF CASES BASED ON EDUCATION LEVEL

EDUCATIONAL LEVEL	NO. OF CASES	%
ILLITERATE	16	5.2
<10 TH CLASS	64	20.9
11-12 TH CLASS	54	17.6
GRADUATE AND ABOVE	172	56.2
TOTAL	306	100

Table No.3: DISTRIBUTION OF CASES BASED ON MATERNAL COMPLICATIONS

COMPLICATIONS	No. of cases	%
Oligohydramnios	17	8.9
Gestational hypertension	8	4.2
Gestational diabetes	4	2.1
PROM	11	5.7
Placenta previa	9	4.7
Breech presentation	16	8.4
Twin pregnancy	7	3.6

Table No.4: DISTRIBUTION OF CASES ON THE BASIS OF MODE OF DELIVERY

OUTCOME	NO. OF CASES	%
Vaginal delivery	116	37.9
Caesarean section	190	62.09

Table No.5: DISTRIBUTION OF CASES AS PER INDICATION FOR CAESAREAN SECTION

INDICATION	No. of cases	%
Fetal distress	24	12.6
Cephalopelvic disproportion	51	26.8
Placenta previa	22	11.5
Abruption	16	8.4
Failed induction	30	15.7
Fetal malpresentation	18	9.4
OTHERS	29	15.2

Table No.6: DISTRIBUTION OF CASES BASED ON WEIGHT OF THE BABY AT BIRTH

WEIGHT IN KG	NO OF CASES	PERCENTAGE
<2.5 KG	35	11.4
2.5 -4KG	266	86.9
>4KG	5	1.6
TOTAL	360	100

Table No.7: DISTRIBUTION OF CASES AS PER APGAR SCORE

APGAR SCORE	NO. OF CASES	%
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7	21	6.8
8	40	13
9	245	80
TOTAL	306	100

4. DISCUSSION:

The study indicated that elderly primigravida at term coming for delivery constituted 1.6% of the total patients admitted for delivery.

Of the total elderly primi admitted 37% belong to the age group of 35 to 40yrs.

As per the level of education 57.2% were graduate and above.

According to the antenatal complications, most common were oligohydramnios(8.9%) followed by Breech presentation(8.2%)

62% of the patients delivered by caesarean section and cephalopelvic disproportion was the most common indication for caesarean.

About 86.9% of the babies born to these patients were of fetal weight between 2.5 to 4 kg.

Almost 80% of these babies had APGAR score of 9.

5. CONCLUSION:

The elderly primi constitute a high risk pregnancy group with high rates of maternal complications and also higher caesarean section rates. These complications are also the result of medical complications associated with advanced age. However the overall fetal outcome was found to be favourable.

6. REFERENCES:

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