

Abstract

NMA/AGSM/2022/OBGYN/009 - Prevalence, Trend, and Foeto-Maternal Outcomes of Placenta Praevia at a Tertiary Hospital in Port Harcourt, Nigeria

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Abstract

Background: Placenta praevia is a major cause of antepartum haemorrhage and is associated with high foeto-maternal morbidity and mortality. To determine the prevalence, trend, and foeto-maternal outcomes of placenta praevia and its association with sociodemographic/obstetrics factors.

Methodology: An analytical cross-sectional study of all recorded cases of placenta praevia managed at RSUTH from 1st January 2016 to 31st December 2021. Descriptive and inferential statistics were derived using IBM, Statistical Product and Service Solution (SPSS) version 25.0 Armonk, NY.

Results: There were 14,195 deliveries and 137 cases of placenta praevia; giving the prevalence of 0.97% or 9.7 per 1000 deliveries; with a decreasing pattern. Thirty-nine (28.47%) cases were morbidly adherent. The mean \pm SD age and gestational age of the participants were 32.5 ± 4.9 (95%CI: 31.67, 33.34) years and 36.7 ± 2.6 (95%CI: 36.34, 37.10) weeks. The median blood loss was 600mls range 300-3,200mls and over 90% of the parturient had a blood transfusion. The majority 116 (84.7%) were booked, 65(47.4%) multiparas and 56(40.9%) had tertiary-level education. There was no case of maternal death. Admission into the special care unit for prematurity and low birth rate was the most common foetal complication. The stillbirth rate was 12.4%. There was a statistically significant association between previous caesarean section and severity of placenta praevia based on morbid adherence $X^2=10.59$, $P=0.012$, 95%CI: 0.010, 0.014. Other factors did not attain significance.

Conclusion: The prevalence of placenta praevia in RSUTH is 0.97%, with a declining trend. Early presentation, prompt blood transfusion services, and adequate management will improve foeto-maternal outcomes.

Keywords: Prevalence; Trend; Foeto-Maternal Outcomes; Placenta Praevia.

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