

## 2<sup>nd</sup> International Conference on **Endocrinology**

October 20-22, 2014 DoubleTree by Hilton Hotel Chicago-North Shore, USA

### **Additional treatment with natural progesterone prolongs gestation in women with preterm labour**

**Ylva Vladic Stjernholm**  
Karolinska University Hospital, Sweden

Prophylactic treatment with synthetic 17-hydroxyprogesterone caproate (17OHPHC) or natural progesterone (P) prevents preterm birth (PTB) in women with a previous PTB and in asymptomatic women with a short cervical length (CL) at midpregnancy. Since only 10% of spontaneous PTB occur in women with a previous PTB and less than 2% of asymptomatic women have a CL <25 mm at midpregnancy, the criteria for initiating prophylactic treatment remains uncertain. Only a few studies have investigated the effect of therapeutic P treatment after the onset of preterm labour (PTL). The aim of this study was to investigate whether additional P treatment could prolong the latency to delivery in women after the onset of PTL. Women with a singleton pregnancy, PTL between 24 - 34 weeks, intact fetal membranes and a CL <25 mm were randomized to additional treatment with daily doses of P in vaginal gel (n=19) or a placebo gel (n=18) after intravenous tocolysis. Forty four women with identical inclusion criteria treated with intravenous tocolysis served as controls. The latency to delivery was increased by 7 weeks in the P group and by 6 weeks in the placebo group. The latency to delivery in the control group was 4 days ( $p<0.00001$  vs. P and placebo). In conclusion, additional treatment with P significantly increased the latency to delivery in women with extreme and early PTL as compared to intravenous tocolysis alone. A treatment with a placebo gel increased latency in a manner comparable to P.

#### **Biography**

Ylva Vladic Stjernholm is a senior consultant in obstetrics and gynecology at the Department of Women's and Children's Health, Karolinska University Hospital, Stockholm, Sweden. After being in charge of the delivery unit for several years she is now responsible for the postnatal unit. She is associate professor in obstetrics and gynecology at the Karolinska Institute. Her research projects focus on gynecological endocrinology and clinical implications in the obstetric field, progesterone treatment for the prevention of preterm birth, induction of delivery and labour dystocia.

[ylva.vladic-stjernholm@karolinska.se](mailto:ylva.vladic-stjernholm@karolinska.se)