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Clinical study of maternal and perinatal outcome In pregnancies complicated by hellp syndrome

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Objective: To evaluate the maternal and perinatal outcome in pregnancies complicated by HELLP Syndrome.

Methods: Retrospective analysis of 18 patients diagnosed of HELLP syndrome in our centre between May 2011 and April 2012.

Results: Of the 565 deliveries, there were 81 cases of PIH (incidence 14.33%). HELLP was diagnosed by laboratory criteria of hemolysis (peripheral smear), elevated liver enzymes (AST and ALT >/= 70IU/L and LDH >/= 600 IU/L) and low platelet count (<1, 50, 000/ uL). Incidence of HELLP syndrome among PIH was 22.22% which is higher as the statistics are from a tertiary care centre. According to Mississippi classification, there were 4 patients in Class I (22%), 5 in Class II (28%) and 9 in Class III (50%). Complications include abruptio placenta (5), Acute renal failure (5), DIC (4), Pulmonary edema (1), Retinal detachment (1), Eclampsia (2), Pleural effusion/ Ascites (4), Intracranial bleed (1). 83.3% of the patients had preterm delivery. 5 patients went into spontaneous labour, 8 patients were induced. Cesarean section was performed in 7 cases. There were 6 intrauterine deaths (33.3%) and 3 neonatal deaths (16.6%).

Conclusion: The presence of HELLP Syndrome accentuates the risk for adverse maternal – perinatal outcome. HELLP syndrome involves multiple organs and the factors responsible for adverse outcome include preterm induction leading to prolonged induction delivery interval and increased incidence of transfusion of blood and blood products and operative interference. Class I had maximum maternal morbidity and maximum incidence of transfusions.

Biography

Manasa Reddy having completed her M.B.B.S from Osmania university and is doing her post graduation from Mamata Medical College, Khammam. She has presented papers at the state conference and national conferences

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