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Probiotics for the prevention of preterm labour

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Preterm birth causes 60% to 80% of neonatal deaths. Survivors can experience life-long complications. Thirty to fifty per cent of preterm labours are associated with maternal infection. Probiotics are defined as live micro-organisms which in adequate amount confer a health benefit on the host. They have been shown to displace and kill pathogens and modulate the immune response, thus potentially interfering with the inflammatory cascade that leads to preterm labour and delivery. During pregnancy, local treatment which restores normal vaginal flora and acidity without systemic effects is preferred over other treatments to prevent preterm labour. The objective is to evaluate the effectiveness and the safety of probiotics for preventing preterm labour and birth. We assessed seven trials for inclusion in the review and included three trials. Effects on very preterm birth (risk ratio (RR) 0.65; 95% confidence interval (CI) 0.03 to 15.88) and preterm birth (less than 37 weeks) (RR 3.95; 95% CI 0.36 to 42.91) showed very wide CIs and no effect of statistical significance (one trial; 238 women). Effects on neonatal death or severe morbidity were not estimable. The impact of probiotics on vaginal infection was based on only 88 women in two trials. There was an 81% reduction in the risk of genital infection with the use of probiotics (RR 0.19; 95% CI 0.08 to 0.48). Although the use of probiotics appears to treat vaginal infections in pregnancy, there are currently insufficient data from trials to demonstrate any impact on preterm birth and its complications.

Biography

Mohammad Othman has completed his PhD from University of Liverpool. He is Assistant Professor of Obstetrics and Gynecology in University of Al-Baha Medical College. He has published three books and more than 25 papers in reputed journals and has been serving as an editor and referee of more than 32 medical publications and databases.

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