

A Brief Note on Placenta

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DESCRIPTION

The placenta is a major organ that develops during pregnancy. It is connected to the uterine wall, generally at the top or side. The placenta is connected to baby through the umbilical cord. The placenta filters the mother's blood, delivering oxygen, glucose, and other nutrients to the baby through the umbilical cord. The placenta also filters out potentially dangerous compounds and waste materials from baby's blood. The placenta generates a variety of pregnancy-related hormones, including lactogen, estrogen, and progesterone. To protect the newborn from infections, it keeps the mother's blood separate from the baby's blood. The placenta frequently develops low in the womb but passes to the side or up as the womb expands. At 18-week ultrasound, the location of the placenta will be evaluated. At term, the placenta resembles a disc of bumpy tissue densely packed with blood vessels, giving it a dark red appearance. Blood vessels constitute the majority of mature placental tissue.

The placenta is normally discharged from body within 5 to 30 minutes of baby's delivery. This is referred to as the third stage of labor. Mild contractions will remain after the baby is born. To assist the release the placenta, belly may be massaged or may be given an injection of oxytocin, and the umbilical cord may be gently pulled. The placenta will be removed at the same time as the baby if undergo a caesarean section. It is critical that the entire placenta is removed after pregnancy. If any placental pieces remain within, they must be surgically removed to avoid bleeding and infection.

Problems with the placenta can potentially be dangerous for both mother and baby:

Placenta accreta: When the placenta develops too deeply into the uterine wall. This can result in severe blood loss during or after delivery, which can be fatal.

Placental abruption: When the placenta separates from the uterine wall before birth. This can result in bleeding, and baby may not receive all of the nutrition which is required. Placental abruption occurs when the placenta pulls away from the inner wall of the uterus before birth, either partly or fully. This can deprive the baby's oxygen level and nourishment while also causing to bleed profusely. An abruption of the placenta might result in an emergency scenario necessitating an early birth.

Placenta previa: When the placenta partly or completely covers the cervix the uterine outflow occurs and this syndrome arises. Placenta previa is more frequent in the first trimester of pregnancy and may dissolve as the uterus expands during pregnancy or birth, a previa placenta can cause acute vaginal bleeding. If placenta previa remains late in the third trimester, they may have to undergo a C-section.

Placental insufficiency: When the placenta fails to function normally during pregnancy, the infant is deprived of oxygen and nutrients. This can have an impact on the baby's growth.

Retained placenta: The placenta may not be able to exit the uterus after birth if it is obstructed by the cervix or is still linked to the uterus. This can result in serious infection or blood loss, which can be fatal.

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