

Perinatal results in premature rupture of fetal membranes in pregnancies under 25 weeks, local experience

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OBJECTIVE: Determine obstetric and perinatal outcomes in pregnancies with premature rupture of membranes (PROM) before 25 weeks and their incidence according to gestational age at diagnosis at the Hospital Luis Tisné B.

STUDY DESIGN: A retrospective study was conducted of all pregnancies with a diagnosis of PROM occurring before 24 + 6 weeks, and with expectant management between 2013 and 2014.

RESULTS: Thirty pregnancies were analyzed with an average gestational age (EG) of 20 + 4 weeks (range 13 - 24 + 6 weeks), highlighting a bicorial diamniotic twin pregnancy, of which 19 (63%) had an RPM less than 22 weeks and 11 (37%), 17 (54.8%) were born alive. Of these, two (11.7%) neonates presented pulmonary hypoplasia and died within the first two days of hospitalization. 10 patients (56.25%) are discharged from the hospital with no severe neonatal morbidity, defined as grade III or IV intraventricular hemorrhage, bronchopulmonary dysplasia, pulmonary hypoplasia, necrotising enterocolitis, grade 3 or 4 retinopathy of prematurity. The most commonly reported maternal morbidity was during miscarriage in 12 of the patients (40%). Regarding the delivery route of the survivors, 56.25% was a cesarean delivery, 77.7% being of an emergency nature and 22.2% due to breech presentation and 43.75% vaginal delivery.

CONCLUSIONS: The global case management that is currently carried out in our hospital, shows 53% of live births and of these, 56% achieved medical discharge, with the largest group at 22 weeks showing the highest percentages of survival. However, 3 patients with PROM less than 20 weeks, who were discharged without major complications. Low maternal pathology was reported, being abortion associated with histological chorioamnionitis, the most frequent maternal pathology. Regarding perinatal pathology, of those that were born alive, the Respiratory Distress Syndrome (SDR) stands out in 100% of the cases, finding the Hyaline Membrane Disease (HMS) in a higher percentage (80%), followed by Bronchopneumonia and transient SDR a 20%. Pulmonary hypoplasia was reported in one patient, who died two days after hospitalization.

50% of the patients presented some degree of Intraventricular Haemorrhage (HIV), no cases of HIV Grade IV were reported. 40% have periventricular leukomalacia (LMPV).

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