



Consequence Of Being An Older Pregnant Women



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INTRODUCTION

Being a pregnant older women has many risk and complications. Women are susceptible to medical disorders which will complicate pregnancy hence increasing morbidity and mortality to both mother and baby.

METHODOLOGY

This was a retrospective study from the National Obstetric Registry which captures data from 14 tertiary hospitals in Malaysia. One third of all deliveries in the country is captured in this registry from 2009. Data from 1st January 2011 to 31st December 2012 was analyzed for this study.

RESULTS

A total of 9859 women more than 40 years was analyzed from 260,959 deliveries in both years which accounted for 3.8% of deliveries in 2011 and 3.75% of deliveries in 2012. Preterm rates were 4.41% in 2011 and 4.75% in 2012. Caesarean sections were higher as compared to vaginal and instrumental deliveries for both years. 5.71% of these women were anemic at booking in 2011 with a haemoglobin concentration of <6.5% gd/L whist in 2012 a higher rate of anaemia at booking was noted at 6.50%. In 2011, 4.16% of these women were anaemic at delivery and in 2012 we see a slight reduction in the rate of anaemia at 3.75%.

11.71% of these women had preexisting hypertension in 2011 and there was a slight increase seen in 2012 at 12.42%. Pregnancy was complicated with gestational hypertension in 10.065 deliveries in 2011 and 10.50% of deliveries in 2012. 9.40% of women had preexisting Diabetes Mellitus in 2011 and with a higher rate in 2012, at 10.04%. Gestational Diabetes Mellitus was diagnosed in 9.30% in 2011 and 8.71% in 2012.

6.12% had heart disease in 2011 and 5.67% in 2012. Other diseases complicating pregnancy in this group of women were Tuberculosis, Blood disorders, Bronchial Asthma, thyroid disease and psychiatric disorders. There was a high rate of maternal collapse, amniotic fluid embolism, pulmonary embolism, uterine atony, stillbirth and congenital anomaly in these women. In 2011 there were two maternal death in this group and the cause of maternal death was due to postpartum hemorrhage and obstetric embolism. In 2012 there was one maternal death secondary to abruption placenta.

DISCUSSION/ CONCLUSIONS

Pregnancy after 40 years is associated with a worse reproductive outcome from this study. This has also been reflected in the previous Confidential Enquiry into Maternal Death reports. Women should be encouraged to complete their family early. Although there is a natural decline of fertility after 40 years, effective contraception is necessary in this group to prevent pregnancy in view of higher rate of mortality and morbidity to mother and fetus.

