

P144. PREGNANCY-RELATED HYPERTENSION IN A MULTIGRAVIDA WITH PREVIOUS CESAREAN DELIVERY

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Context: Pregnancy-related hypertension is a significant contributor to maternal as well as perinatal morbidity and mortality. It is generally considered as a disease of first pregnancy. There are not many studies undertaken to determine the changing incidence of pregnancy-related hypertension in multigravidas. Objective: To study whether prior cesarean delivery is associated with occurrence of pregnancy hypertension. Material and Methods: A prospective case-control study in consenting eligible consecutive 475 pregnancies with prior cesarean delivery and their age and parity matched 475 pregnancies with previous vaginal delivery was carried out. Results were subjected to multiple logistical regression analysis. Results: Body mass index, birth interval and neonatal birth weight were comparable between the study groups. In women with prior cesarean delivery, pregnancy-related hypertension was significantly higher (15.9 versus 6.7% in those with prior vaginal delivery; p < 0.05; OR 2.6; 95% CI 1.707-4.072). They were also found have higher proportion of women developing hypertension by 32 weeks of pregnancy. In both the study groups development of pregnancy-related hypertension was found to be higher in age group of 20-25 years, birth interval of >18 months, second gravidas and in gestation period between 32 to 36 weeks. Women with severe disease remained equal and high in both the groups. Conclusion: Pregnancy-related hypertension is more common in women with prior cesarean delivery and it occurs at an earlier gestation weeks than those without cesarean delivery. In multigravida severe forms of the disease are more common.

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