10. STUDY ON OUTCOME OF TEENAGE PREGNANT MOTHERS IN A TERTIARY CARE SETTING

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OBJECTIVES:

To study outcome of teenage pregnant mothers at a tertiary care hospital

METHOD:

A cross sectional prospective study using a pre tested interviewer administered questionnaire. All teenage pregnant mothers attending to the ante natal clinic of the professorial unit of the De Soyza Hospital for Women were recruited to the study after their informed consent from the period of 8 months from December 2005. And analysed using the Statistical Package for Social Sciences for windos (SPSS) version 11.

RESULTS:

150 teenage pregnant mothers who registered at the antenatal clinic were followed up. participated to the study. 84.9% of the study population consists of primi parous mothers. Among the 15.1% of multi parous mothers, 57.9% end up with spontaneous miscarriage and 42.1% end up with live birth. 2.1% of population were in their third parity and of them 2nd parity 33.3% ends up with spontaneous miscarriage and 66.6% end up with live birth. Majority (42.1%) identified the pregnancy at POA of 8 weeks (mean 8.20, SD ±3.33). 5.5% experienced hyperemesis gravidarum, prevalence of gestational diabetes mellitus, pregnancy induced hypertension, intrauterine growth retardation found to be in 5.5%, p.3%, 4.7% respectively, 0.8% of mother had ante partum haemorrhage and polyhydroamnios, 2.4% experienced oligohydroamnois. Prevalence of anaemia was 10.3%. 34.9% of the study population

experienced ante natal complication. 81.5% of mothers delivered by normal vaginal delivery, rate of vacuum delivery, elective caesarean section and emergency caesarean section were 0.8%, 4.8% and 12.9% respectively. 5.6% had preterm labour, 1.6% experienced prolonged labour, stil birth rate was 0.8%. 27.2% of the study ends up in post natal complication. 28.7% babies were low birth weight and 1.6% was very low birth weight. Mean weight was 2.74kg with a SD of ±0514.

CONCLUSIONS AND RECOMMENDATIONS:

Due to high prevalence of antenatal and post natal complications among teenage pregnancies there by necessitating the need for early registration and institutional deliveries are to be promoted.

This study supports earlier findings of risks associated with pregnancy in adolescence. Delay in marriage and conception should be promoted through the awareness campaigns.