

## **SEVERE PREECLAMPSIA - INFLUENCE ON PREMATUREITY AND INTRAUTERINE GROWTH RESTRICTION**

**Samardziski MI, Stankova K, Ristevska I, Trajkova K, Kochoski G.**

**Univeristy Clinical Center, Dpt.of Obstetrics and Gynecology, Skopje-Macedonia**

Objective: To determine whether severe preeclampsia have influence on prematurity rate, and to evaluate the effect of severe preeclampsia on fetal growth.

Material and methods: Among 7450 deliveries over a two-year period, 395 (5,3%) babies were born after hipertensive disorder in pregnancy. We analyzed retrospectively 84 cases of infants born by mothers with severe preeclampsia. Inclusion criteria for severe preeclampsia were according to ACOG: hypertension >160/110 mmHg, proteinuria >5gr/l/24h, massive edema, HELLP syndrome and eclampsia. Gestational age was determined combining last menstrual period dating, earliest available ultrasonographic examination and neonatologic evaluation. Infants with birth weight < 10th percentile for gestational age according to the standards of Brenner et all. or smaller than two standard deviations from expected birth weight were classified as small for gestational age (SGA). We compared those with a sample of 150 control infants.

Results: Prematurity was five times higher in infants born by severe preeclamptic mothers (59 ; 70%) than in control group (20; 13,3%). Among 84 evaluated newborns 25(30%) were with birth weight >10th percentile-SGA, compared with controls where SGA were 10(6, 6%). Of 25 small for gestational age infants born with severe preeclampsia 18(72%) were with birth weight >5th percentile-severe SGA.

Conclusion: Severe preeclampsia was significantly associated with very high prematurity rate. The risk of having severe intrauterine growth retarded infant was significantly higher in women with severe preeclampsia during pregnancy.

email: [valentigor@sonet.com.mk](mailto:valentigor@sonet.com.mk)