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Perinatal Mortality of Singleton Pregnancy

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ABSTRACT

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The purposes of this retrospective study were to study rate, trend and factors associated with perinatal death and to measure the contingency coefficient and the strength of association between perinatal death and associated factors. Data were collected from hospital records of mothers with single birth delivered at Saraburi Hospital between January 1, 1983 to December 31, 1987 there were 1,242

mothers. Sampling was purposive. The study group consisted 414

mothers of singleton with perinatal death. The control group was

collected from delivery records in the same periods with perinatal death using livebirth before and after with the ratio 2: 1. There were 828 cases in the control group. Data were collected from files and analysed by Percentage, Rate, Chi-square test, Phi Coefficient, Cramer's V Coefficient and Relative Odds.

The results were

19.89, 22.65 24.64 and 19.84 per 1000 livebirths for the year 1983 to 1987 respectively. Perinatal Mortality rate decreased from 23.96 per 1,000 livebirths in 1983 to 19.84 per 1,000 livebirth in 1987.

Perinatal mortality rate was found to fluctuate between 23.96,

Wigglesworth's classification was used. It was found in this study that causes of death were maceration, other specific conditions, asphyxia developed in labour, immaturity and congenital malformation with the rate of 28.8, 24.2, 22.2, 20.5 and 4.3 respectively. It was found that preventable cause of death in the group with birth weight 22,500 gms. was asphyxia accounting for 47.1% of the total.

Factors associated with perinatal mortality with statistical

significance and the strength of association with perinatal death ranked from high to low were birth weight, gestational age, complication during pregnancy, maternal sickness during pregnancy, type of delivery, fetal presentation, antenatal care, complication during labour, maternal age, parity, number of antenatal care, hemoglobin, first antenatal care visit and pregnancy loss. Risk factors on perinatal death ranked from high to low were gestational age, birth weight type of delivery, complication of pregnancy,

antenatal care, transverse lie presentation, maternal sickness during pregnancy, breech presentation, birth weight, complication during labour, number of antenatal care, hemoglobin, maternal age, parity,

Factors not associated statistically with perinatal mortality were fetal sex and the attendant at delivery.

first antenatal care and pregnancy loss.

In order to reduce perinatal mortality rate further increase in antenatal care, and obstetric management must be encouraged.