

FETAL OUTCOMES AMONG PREGNANT WOMEN PRESENTING WITH REDUCED FETAL MOVEMENTS AT KENYATTA NATIONAL HOSPITAL: A CROSS SECTIONAL STUDY

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ABSTRACT Background: Reduced fetal movement in pregnancy is a common cause of anxiety and admission of pregnant women. It is considered a high risk pregnancy with the fetus at risk of hypoxia and sudden death. Fetal surveillance is always indicated to assess the fetal wellbeing and to aid in opportune time of delivery. **Objectives:** This study was undertaken to examine fetal outcome of mothers who presented with decreased fetal movements **Design:** The study was hospital based descriptive cross-sectional study. **Study population:** women presenting with reduced fetal movements at 34 weeks gestation formed the study group. Those who met eligibility criteria were consented and standardized structured questionnaire administered. The study subjects followed the standard operating procedure for Cardiotocography (CTG) and Biophysical Profile (BPP) as tools for fetal surveillance. **Setting:** This study took place at Kenyatta National Hospital, the largest referral hospital in Kenya located in Nairobi. **Duration of the study:** The study took 4 months to complete. The study was conducted between June-September 2010. **Data collection:** Data was collected using a structured questionnaire. The questionnaire was administered by the principal researcher and three trained research assistants. **Data analysis:** Data analysis was performed using Statistical Package for Social Scientists (SPSS Version 17.0). Proportions were estimated using simple frequencies. Multivariate analysis was performed using logistic regression to determine independent factors associated with poor obstetric outcome. xi

Main outcome measures: Apgar score at 5 minutes, resuscitation of the new born, admission to Newborn Unit (NBU), low birth weight, congenital anomaly and stillbirth.

Results The newborns who had Apgar score of <4 at five minutes, congenital anomalies and fresh stillbirth were 1.3% each while 2% had macerated stillbirth and 3.3% had birth weight less than 2000. Newborns that had Apgar score of 4-7 at five minutes were 7.9% and similar proportion of the newborn were resuscitated, 8.6% were admitted to NBU and 14.5% had birth weight of > 3500. **Conclusion** Majority of pregnant women with reduced

fetal outcome have good fetal outcome. Fetal surveillance improves fetal outcomes in women who present with decreased fetal movements **Recommendation** Fetal surveillance tools should be used routinely in all women with reduced fetal movements and they are best delivered by caesarian section if a risk is identified. Pregnant women with pregnancy induced hypertension and reduced fetal movements require close fetal surveillance because the risk to poor fetal outcome is significantly increased.