

The correlation between vaginal infection during pregnancy, the emergence of perinatal infections and their outcome



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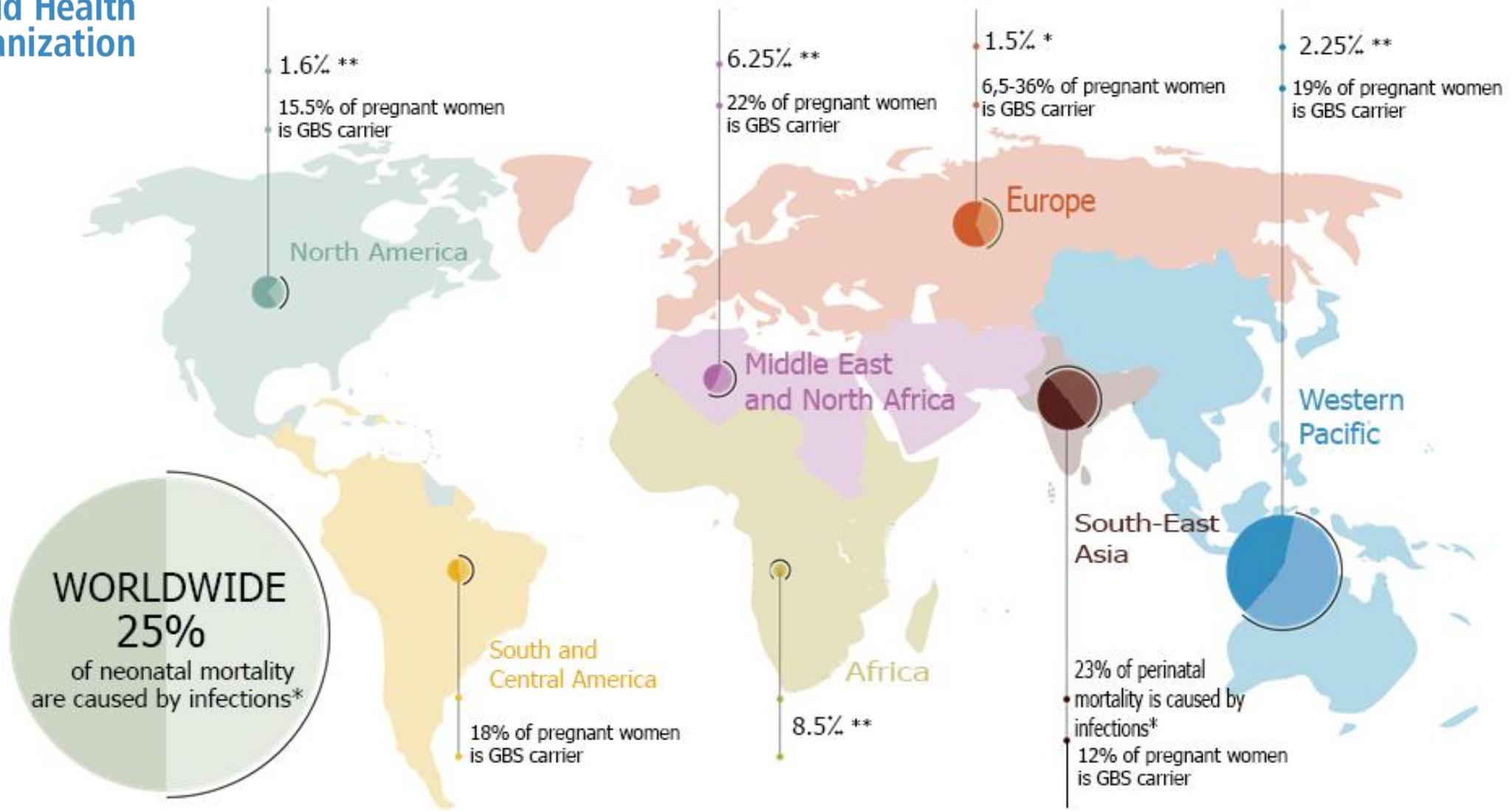
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11. July 2014.



World Health Organization

Frequency of Perinatal Infections



*Bulletin of the World Health Organization ** Mortality caused by infections, World Health Statistics, WHO, 2013

Studies

Emma L. Barber et al. – Interpretation of 2002 Centers for Disease Control Guidelines for Group B Streptococcus and Evolving Provider Practice Patterns, *Am J Perinatol.* 2011 February ;

Towers, Craig V et al. – The Accuracy of Late Third-Trimester Antenatal Screening for Group B Streptococcus in Predicting Colonization at Delivery, *American Journal of Perinatology*, Volume 27, issue 10 (2010);

Rasa Tamelienė et al. – Escherichia coli Colonization in Neonates: Prevalence, Perinatal Transmission, Antimicrobial Susceptibility, and Risk Factors, *Medicina (Kaunas)* 2012;

Melissa S. Bauserman et al – Group B Streptococcus and Escherichia coli Infections in the Intensive Care Nursery in the Era of Intrapartum Antibiotic Prophylaxis, *The Pediatric Infectious Disease Journal*, 2013;

Sen Sarbatama et al. – Obesity impairs cell-mediated immunity during the second trimester of pregnancy, *American Journal of Obstetrics & Gynecology*, 2013.

Objective

Finding a correlation between the perinatal infections caused by identified vaginal infection during pregnancy and the evolution of puerperal period

Material and Methods (1)

Inclusion criteria

Pregnancy
Vaginal swab test
Knowledge of pre-pregnancy weight and weight gain during pregnancy

Eligible patients

211 mothers
Mean age: 29.8 ± 6.3 year
Postpartum evolution
Follow up for 7 days

Data storage

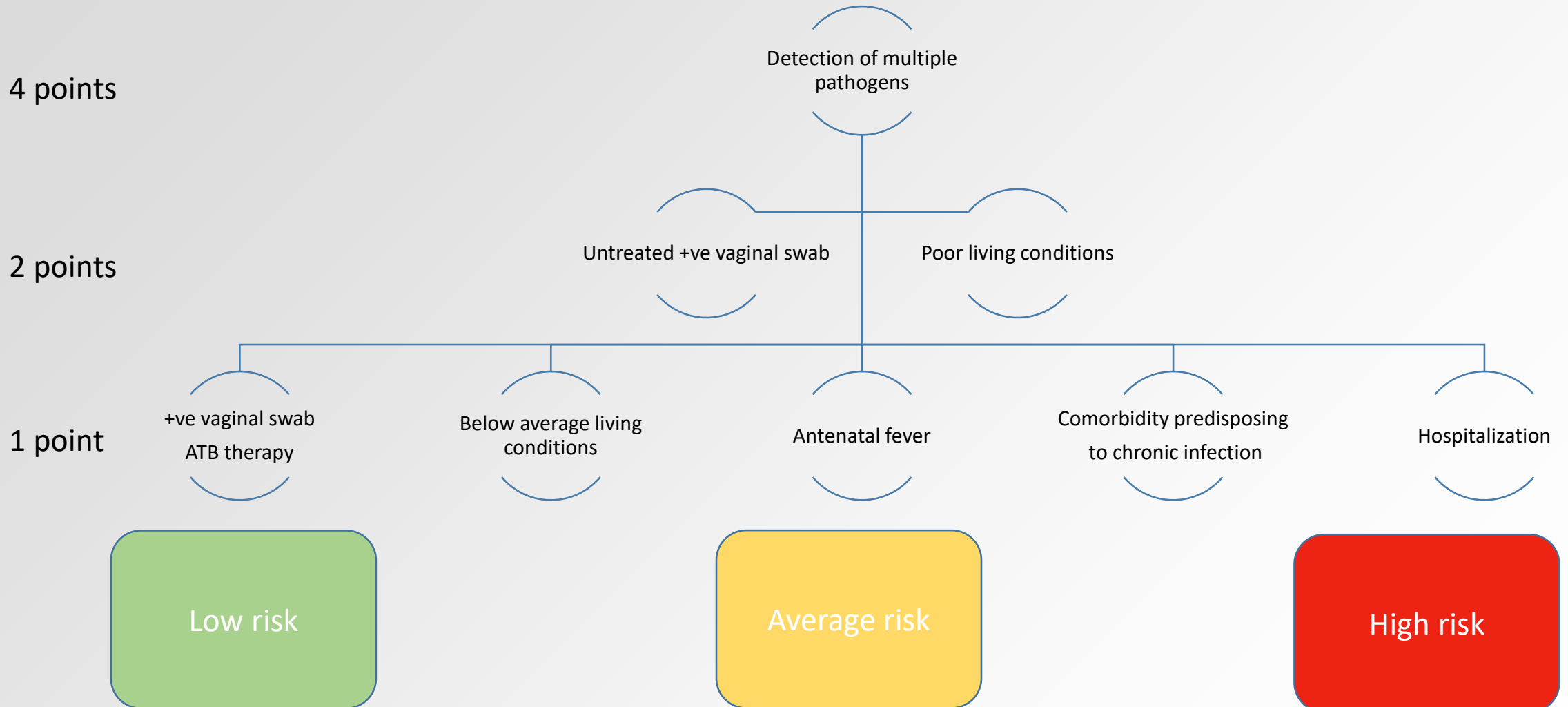


Statistical processing



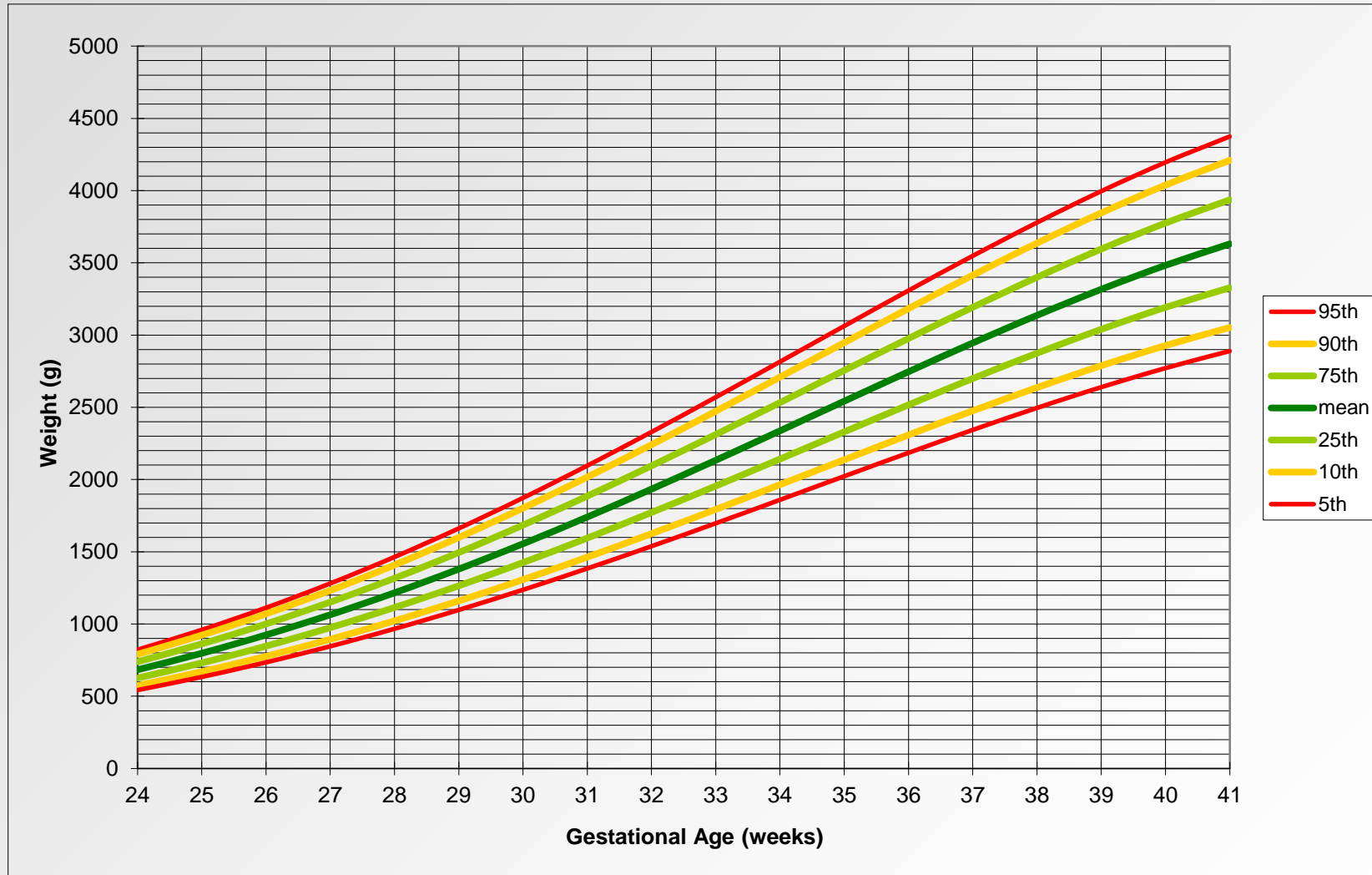
Material and Methods (2)

Score system:



Material and Methods (3)

Birth weight percentile :





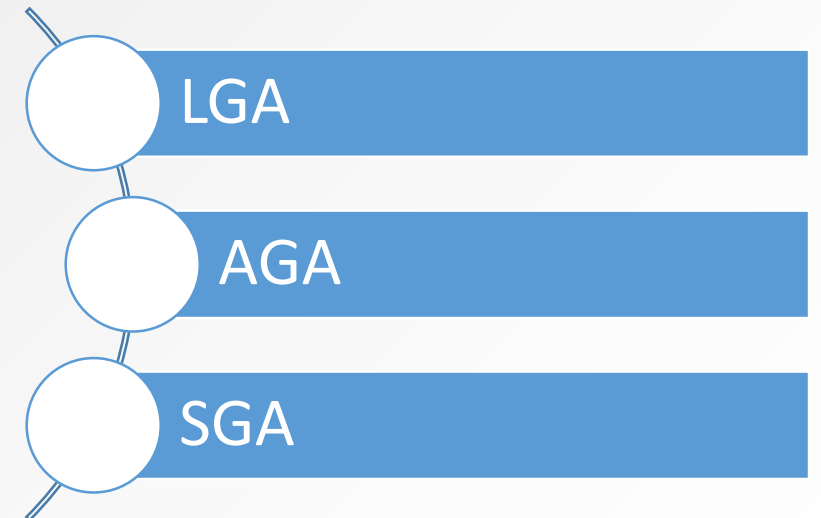
Material and Methods (4)

Gestational age and birth weight

<http://www.gestation.net>

Parameters used for the calculation:

- ✓ Parity
- ✓ Maternal height
- ✓ Maternal body weight
- ✓ Ethnic origin
- ✓ Newborn gender
- ✓ Gestational age(week and day)
- ✓ Birth weight

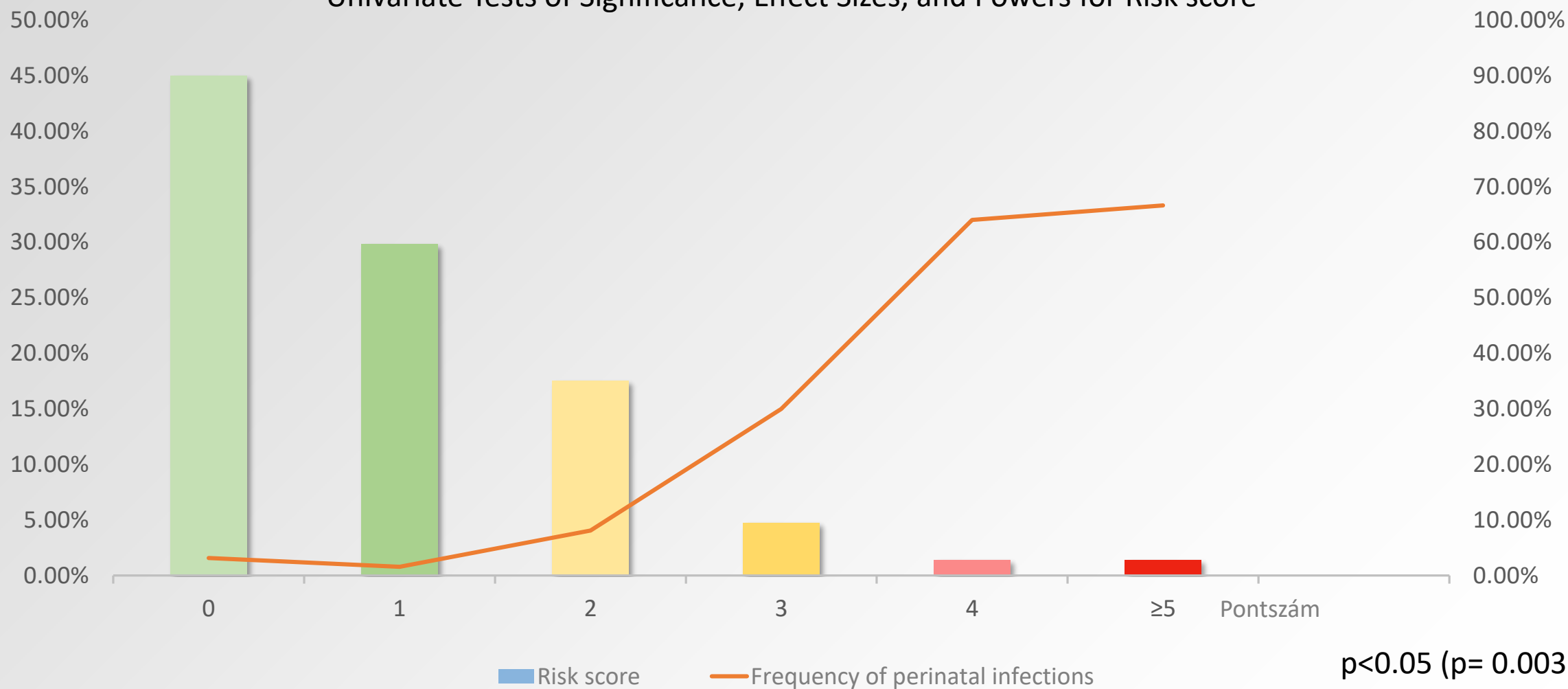


* With the permission of Perinatal Institute UK

Results (1)

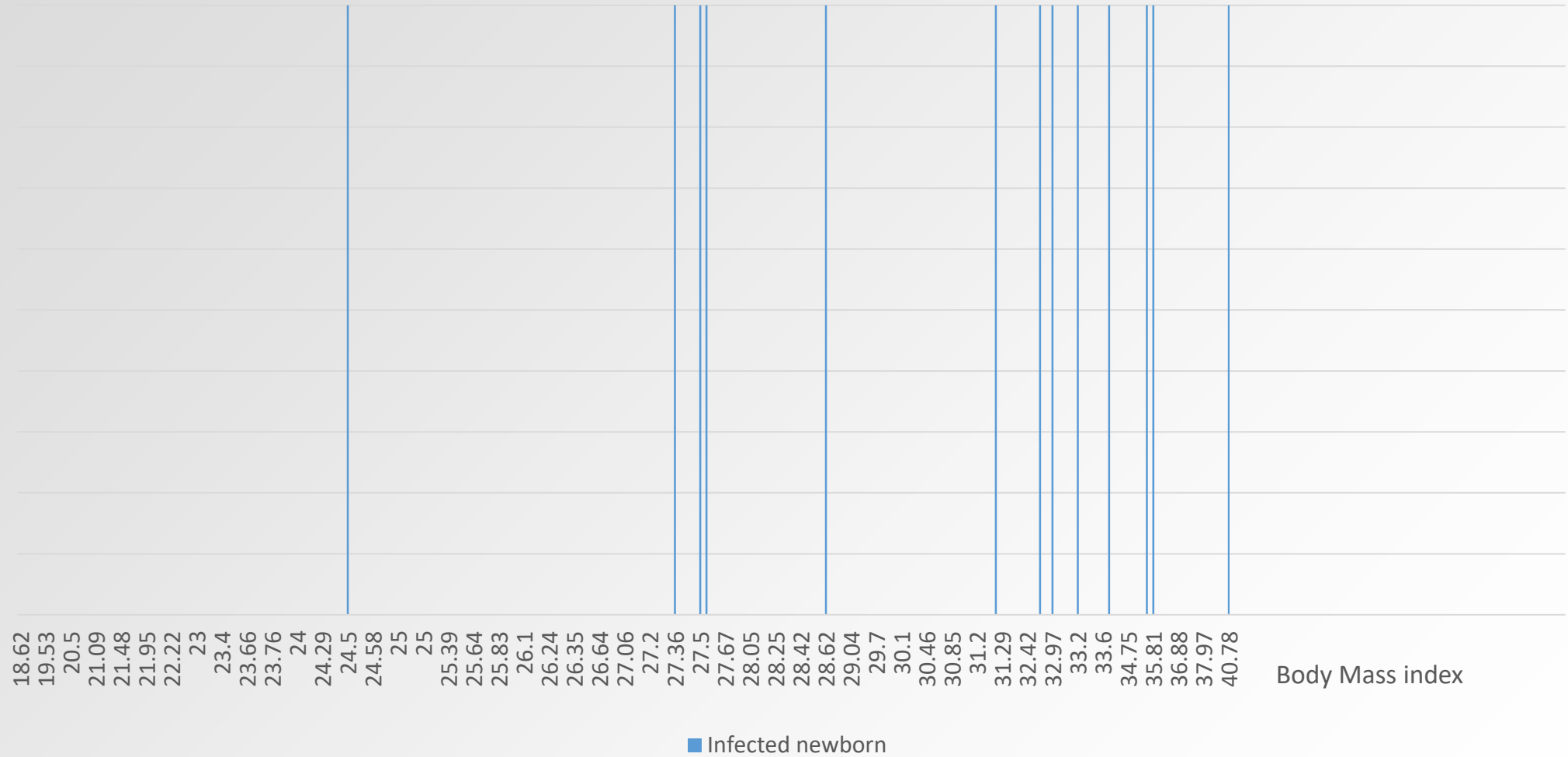
Distribution of group risks according to score:

Univariate Tests of Significance, Effect Sizes, and Powers for Risk score

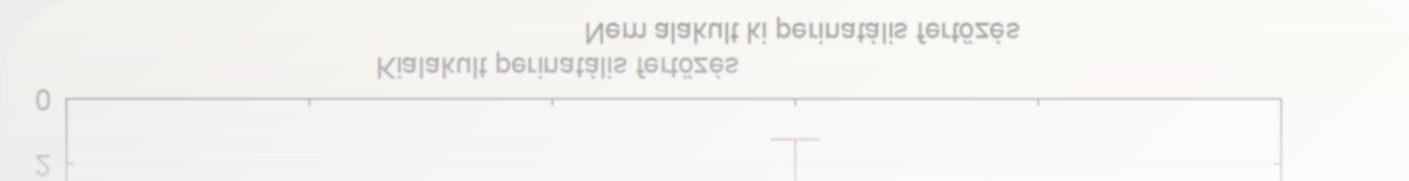
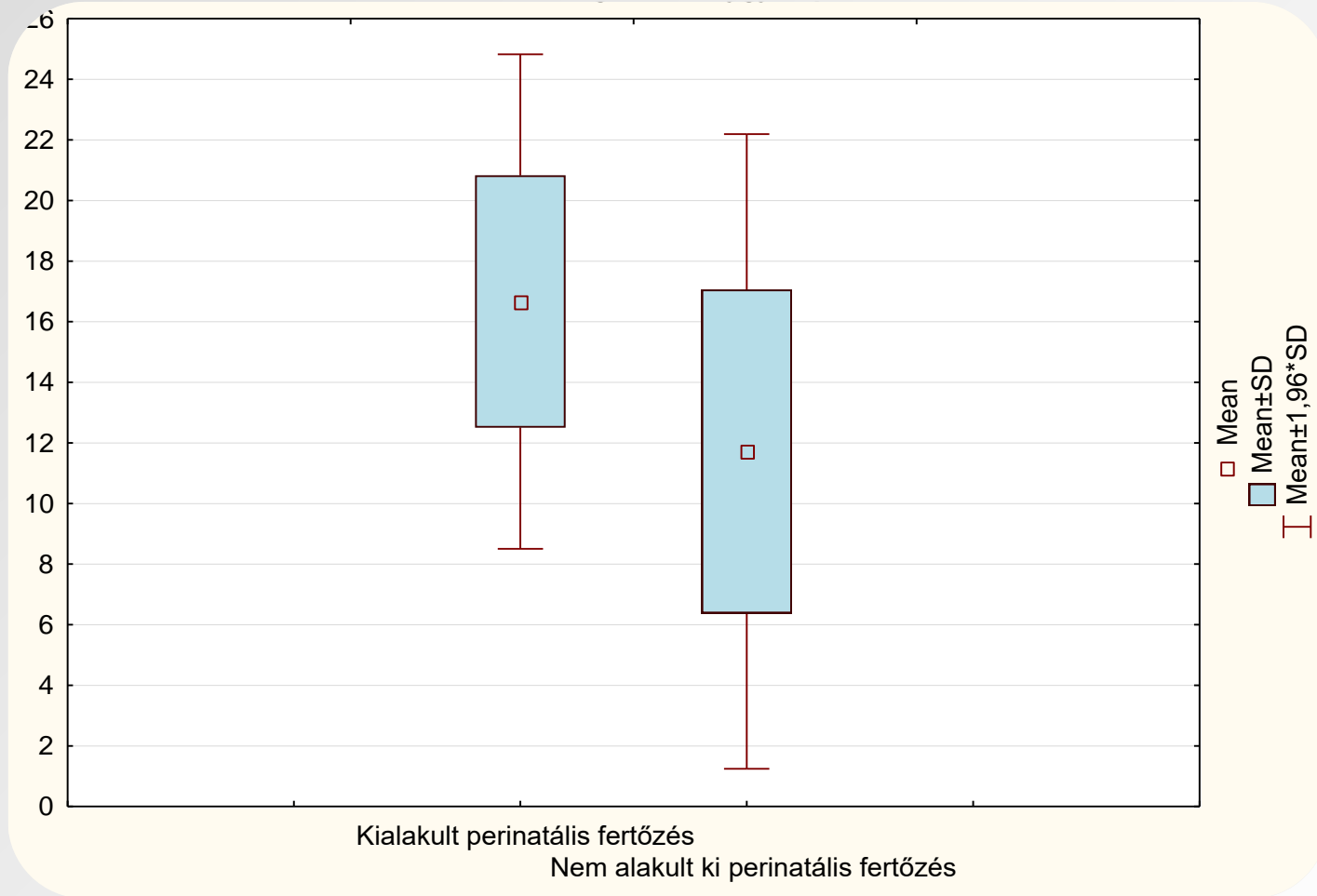


Results (2)

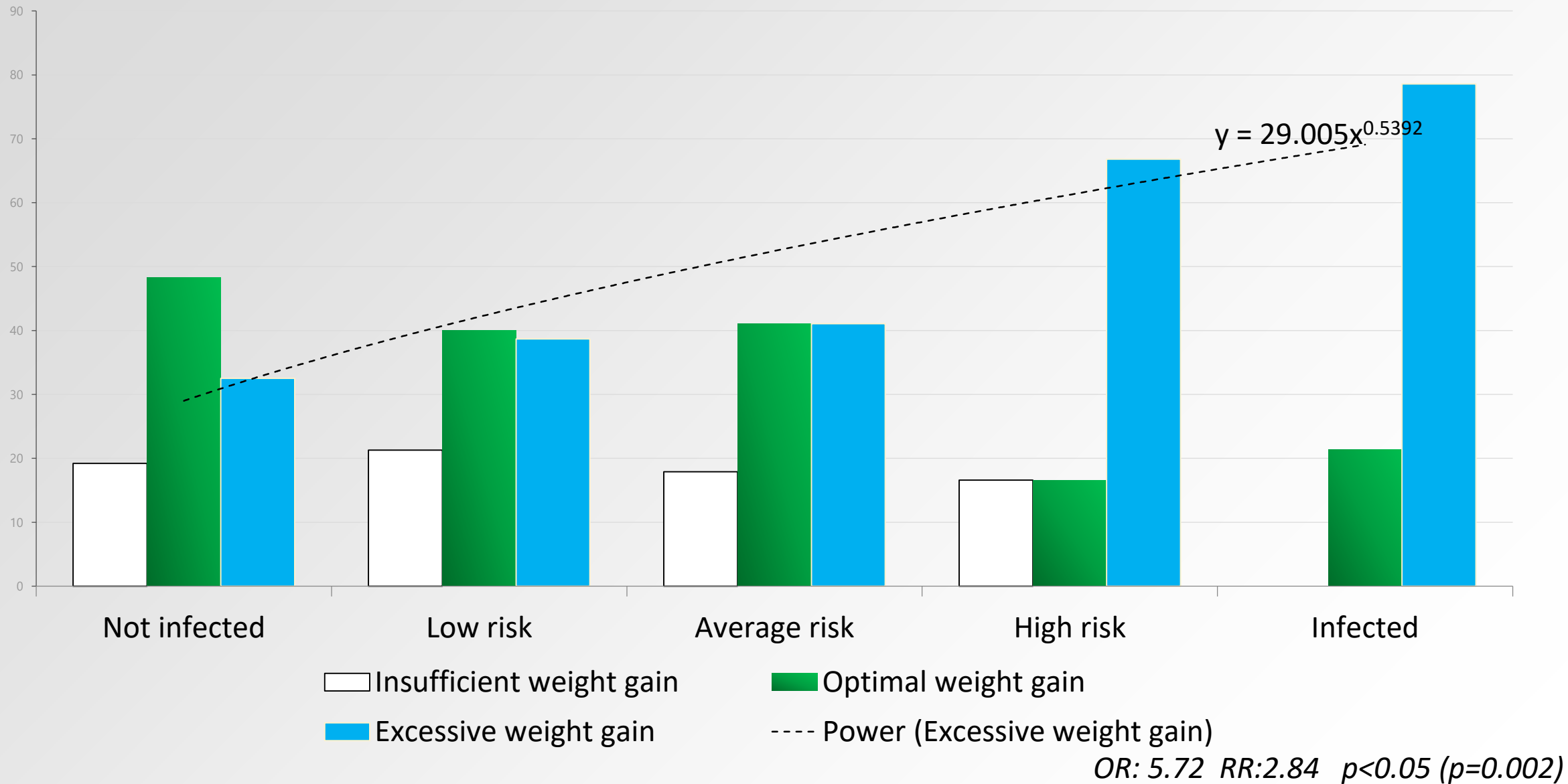
Perinatal infections depending on pre-pregnancy body mass index



Results (3)

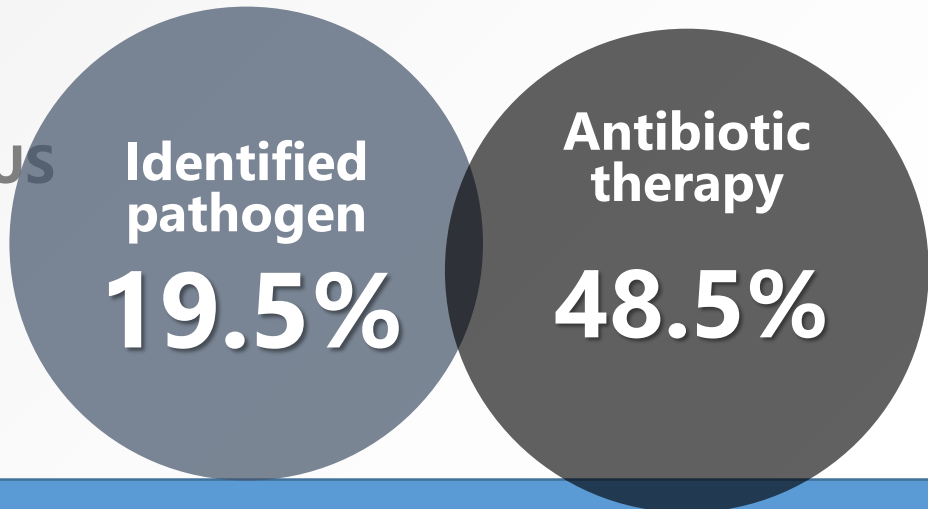
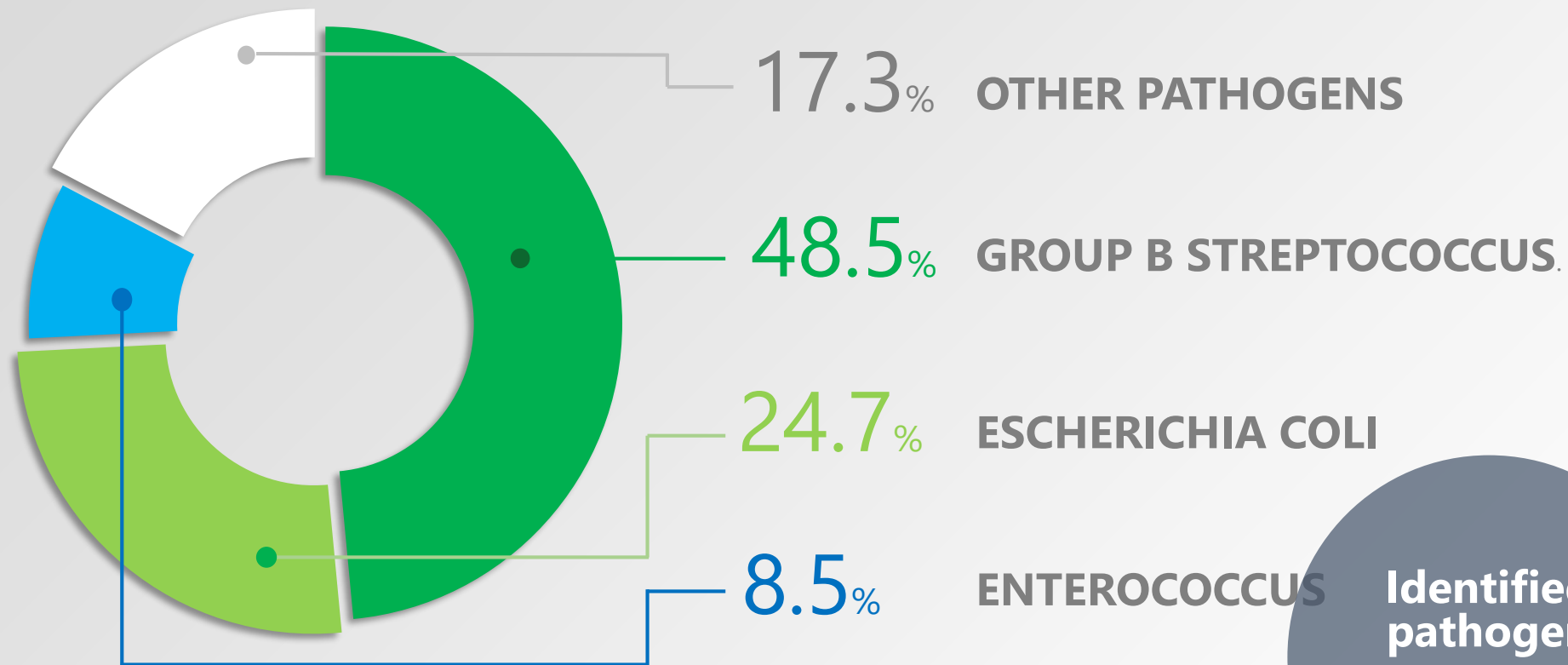


Results (4)



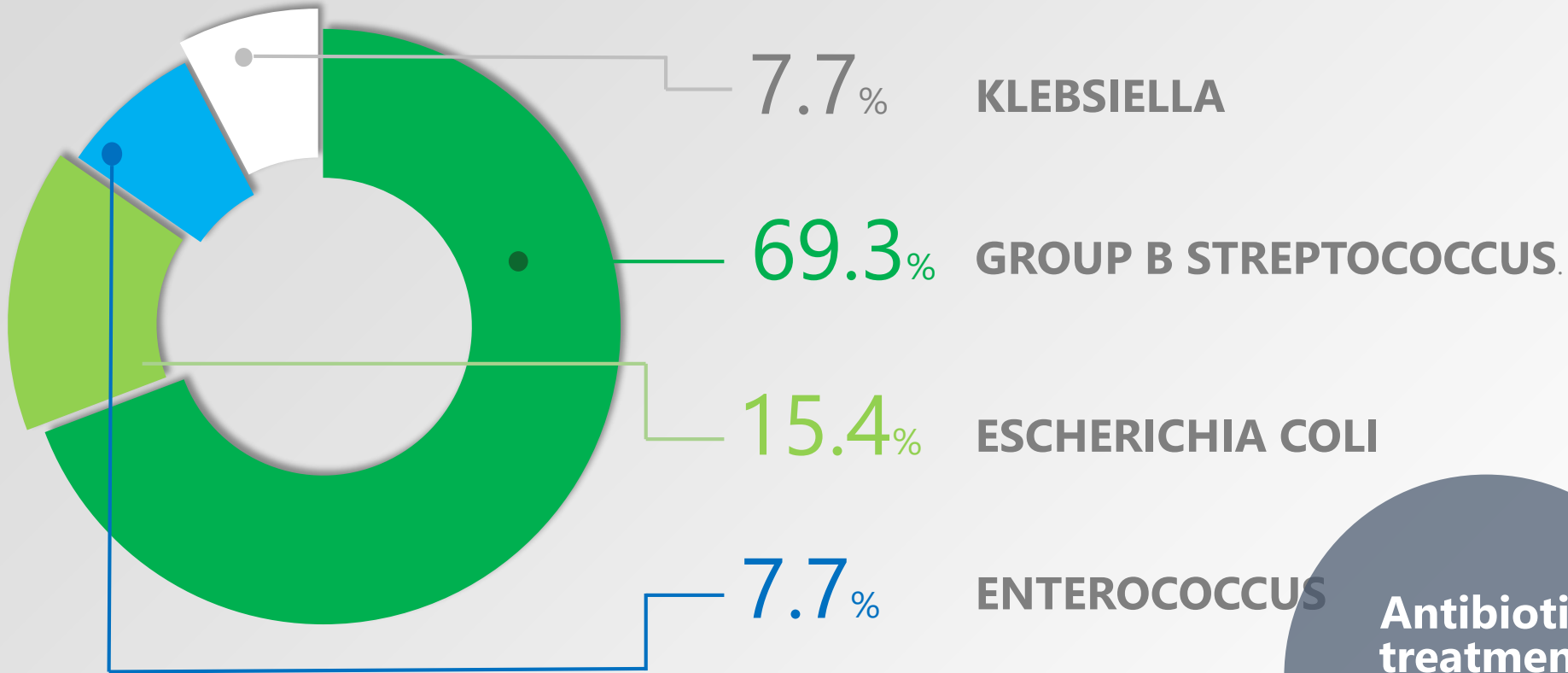
Results (5)

Modified vaginal flora of the mother



Results (6)

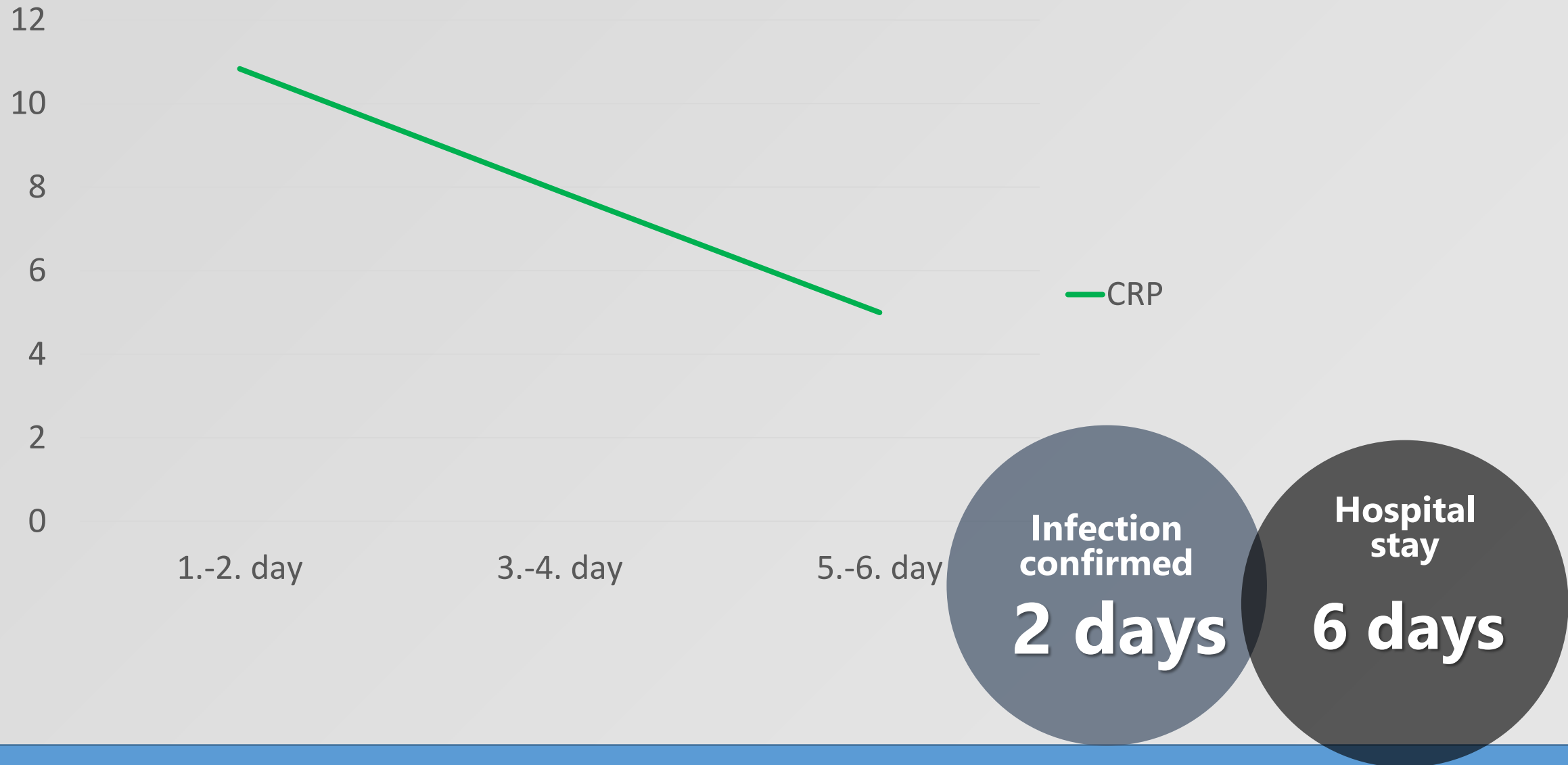
Infected Newborn



Antibiotic treatment
4 days

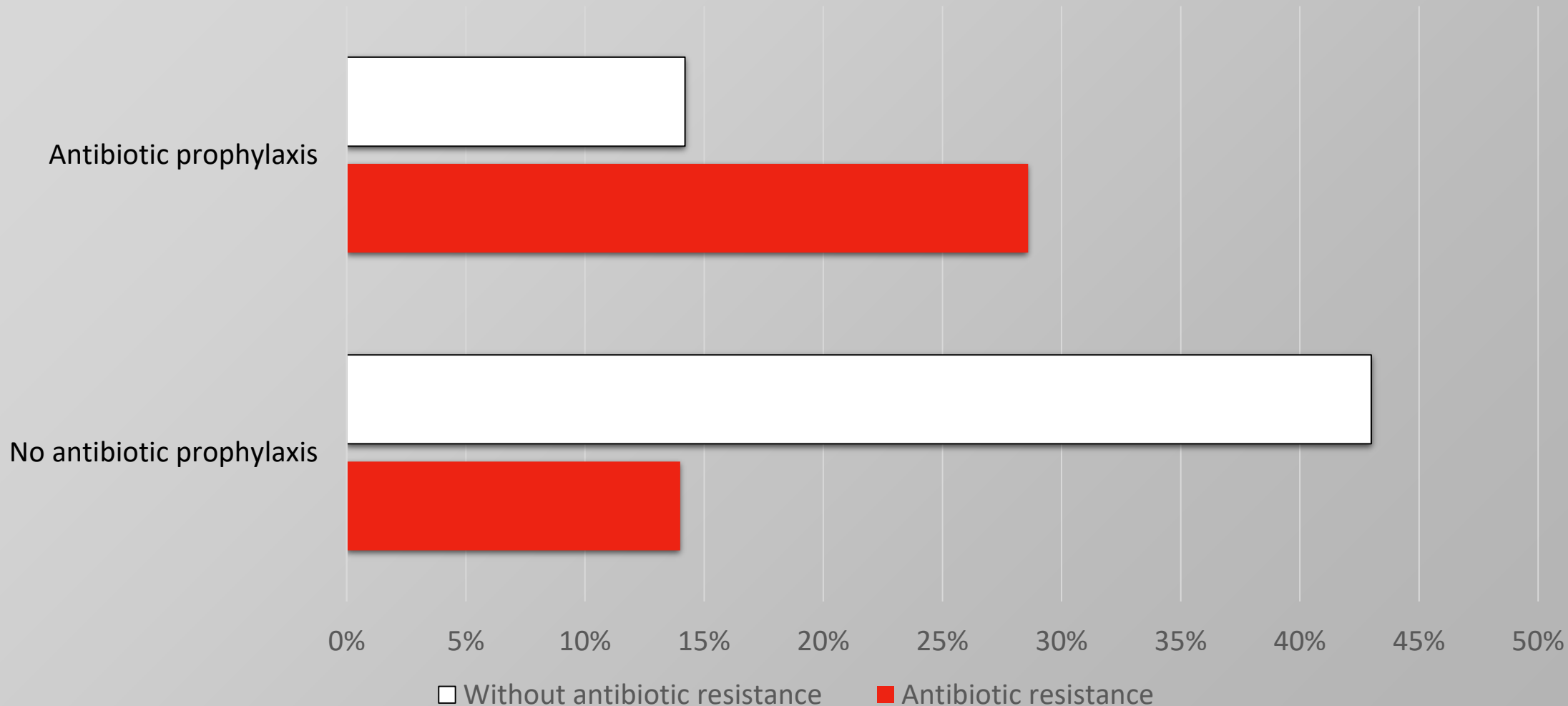
Antibiotic resistance
38.5%

Results (7)



Results (8)

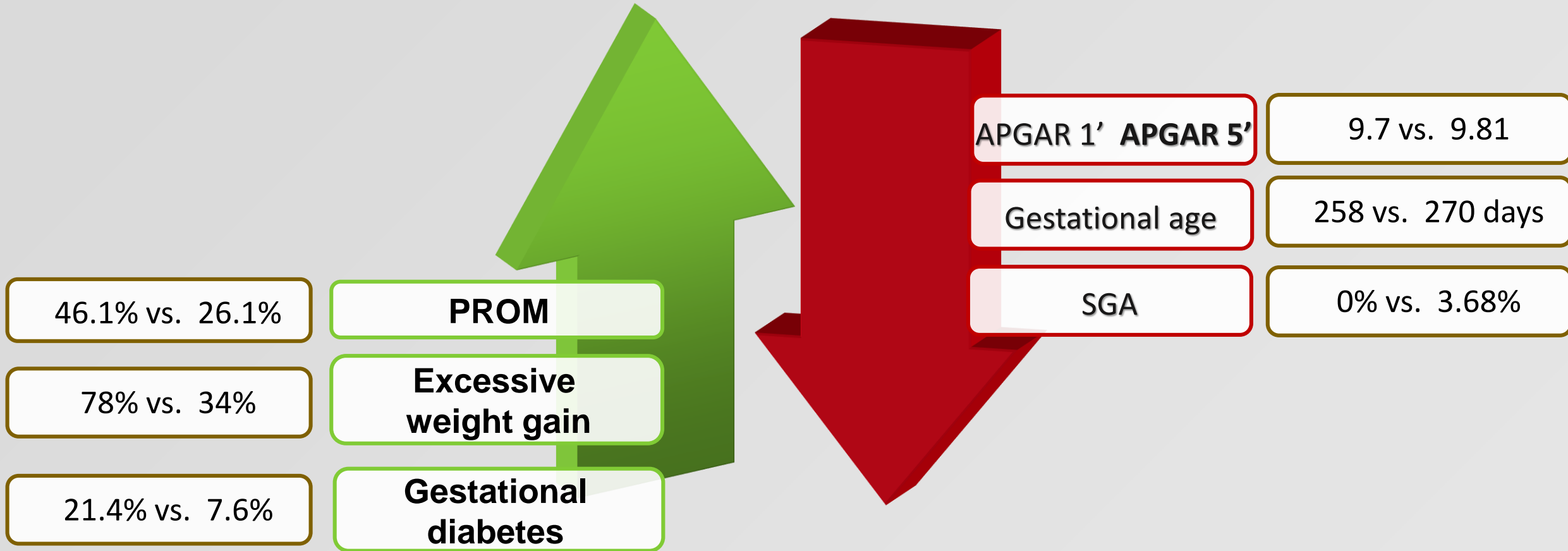
Antibiotic therapy of the pregnant mother and the antibiotic resistance in the newborn



OR: 6.25 RR:2.5 $p < 0.05$

Results (9)

Perinatal infections



Conclusions (1)



Pre-pregnancy overweight is a predisposing factor for vaginal infections



Excessive weight gain during pregnancy develops more frequently in those mothers, whose newborn was perinatally infected



Gestational diabetes may predispose to the development of perinatal infection



The small for gestational age group is showing almost an exponential decline rate in the perinatally infected newborns

Conclusions (2)



The main etiologic agent is still the GBS, which is followed by the E.coli



Perinatal infections developed more frequently in those newborns, whose mothers had modified vaginal flora identified during pregnancy



The antibiotic resistance was more frequent in those newborns, whose mother received prophylactic antibiotic therapy



Message
to
take home

**OVER-
WEIGHT**

**ANTIBIOTIC
RESISTANCE**



Thank you for your attention!