

DEVELOPMENT OF A SCORING SYSTEM FOR THE PREDICTION OF THE UNFAVOURABLE PREGNANCY OUTCOME

THESIS

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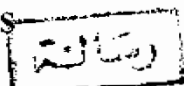
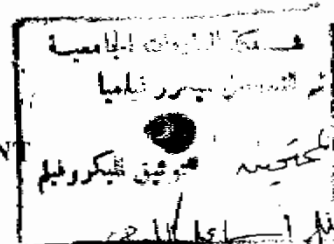
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وَقُلْ رَبِّ زِدْنِي عِلْمًا

صَدَقَ اللَّهُ الْعَظِيمُ

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مَكِّيَّةٌ - الْحِزْبُ السَّادِسُ - عَاثِرٌ



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**I DEDICATE THIS THESIS
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INTRODUCTION

INTRODUCTION

Of all population groups, mothers and children are considered the most susceptible to good or harmful influences that will permanently affect their health. The aim of modern maternity and perinatal care is to achieve the maximum possible quality of human reproduction. This is a significant challenge because the risks involved are relatively great. High perinatal morbidity and mortality levels are no longer acceptable natural hazards of child birth (Babson et al., 1975).

For the fetus and the neonate, the risks of mortality and morbidity are great and carry with them the additional potential for long term effects on the subsequent growth and development. It was estimated that the risk of death and sublethal injury in the perinatal period approaches 5-10 % (Aubry, 1977).

Perinatal mortality rate in developed countries has reached less than 10/1000 while, it is about 100/1000 in some developing countries (Fakher, 1990). Preterm birth remains the most frequent cause of perinatal morbidity and mortality in North America and Europe (Harger et al., 1990). It was also reported that low birth weight infant remains at much higher risk of

mortality than the normal birth weight infant (**McCormick, 1985**).

The concept of high risk pregnancy has received extensive endorsement in recent obstetrics. The clinical implication of "risk" is an increase in perinatal mortality and morbidity (**Low et al.,1975**). It was found that 70 to 90 % of all maternal and perinatal complications occur in the high risk group comprising 20- 50 % of all pregnancies and labours (**Fakher, 1990**).

The ability to predict the birth of a jeopardized infant before its delivery means that, decisions about the optimal management of pregnancy can be made and the chance of a favourable outcome can be increased (**Forteny and Whitehorne, 1982**). As a result, many attempts have been made to develop an index or a score for prediction of the high risk pregnancies (**Creasy et al., 1980, Forteny and Whitehorne, 1982, Mueller-Heubach and Guzick, 1989 and Knox et al., 1993**).

Perinatal and infant mortalities are serious public health problems throughout the world especially in developing countries. Their prevention has a major social, medical and economic implications (**Fakher, 1990**). So, early recognition of risk factors correlated with the unfavourable pregnancy outcomes in Egypt and their scoring is extremely important for their prevention.

AIM OF THE WORK