A STUDY OF PLACENTAL HISTOPATHOLOGY AND NEONATAL HEALTH ASSESSMENT IN HIGH RISK PREGNANCIES

Thesis

Submitted for partial fulfillment
of Master Degree

In Pediatrics

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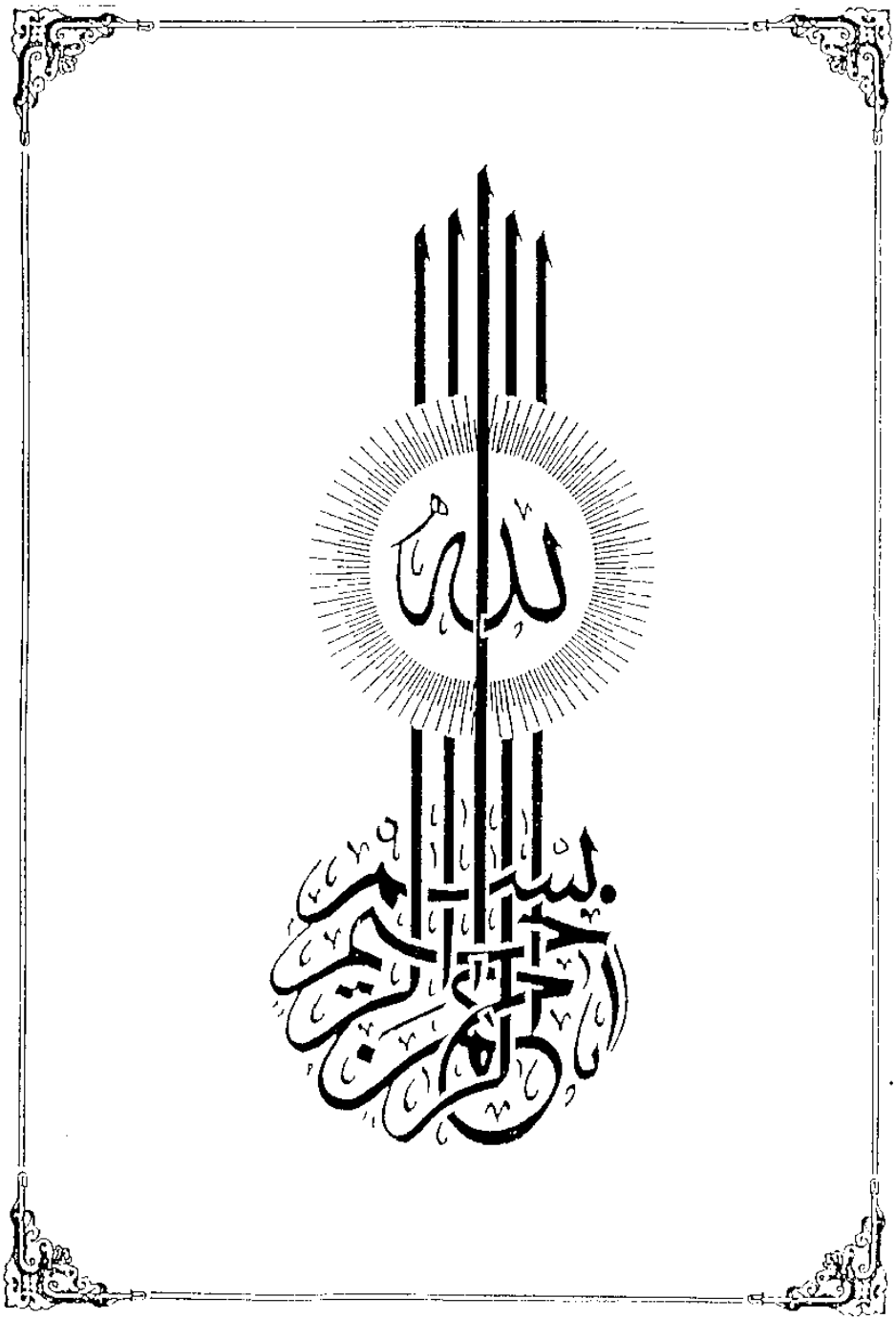
1993

بِسْمِ اللَّهِ الرَّحْمَٰنِ الرَّحِيمِ

وَلَقَدْ خَلَقْنَا الْإِنسَانَ مِن سُلَالَةٍ مِّن طِينٍ (١٢) ثُمَّ جَعَلْنَاهُ
نُطْفَةً فِي قَرَارٍ مَّكِينٍ (١٣) ثُمَّ خَلَقْنَا النُّطْفَةَ عَلَقَةً فَخَلَقْنَا
الْعَلَقَةَ مُضْغَةً فَخَلَقْنَا الْمُضْغَةَ عِظَامًا فَكَسَوْنَا الْعِظَامَ لَحْمًا
ثُمَّ أَنشَأْنَاهُ خَلْقًا آخَرَ فَتَبَارَكَ اللَّهُ أَحْسَنُ الْخَالِقِينَ (١٤)

صدق الله العظيم
سورة المؤمنون الآية (١٢-١٤)



To my colleagues in
N.I.C.U. in Gynaecology and
Obstetric hospital .
Ain Shams University

Acknowledgment

I would like to express unlimited gratitude to Professor **Dr. Karima Abd El Khalek** Professor of Paediatrics, Faculty of Medicine, Ain Shams University for her most generous support and guidance during this work. She has always been giving, firmly encouraging and motherly caring. Words of gratitude are not enough, for without her, this work would have never been born.

To **Dr Hesham Awad**, Lecturer of Paediatrics, Faculty of Medicine, Ain Shams University. I'm in dept for his most kind and appreciable advice and explanations throughout the entire work. He has been very generously sacrificing his time and effort to make this work as it is now.

I am also grateful to Dr **Nahed Samy Khamis**, Assistant Professor of Pathology, Faculty of Medicine, Ain Shams University for her efforts in the histopathological part of the study. She has always been patient enough to withstand an unbelievable number of slides.

My gratitude to **Dr Essam Ammar**, Lecturer of Gynaecology and Obstetrics, University of Ain Shams, is beyond any word

capacity. This is something that no words can take. This gentleman has been kindly supplying me with references.He was always encouraging and supportive in critical times. I would like to tell him thank you sir.

To my **husband Dr. Hesham Dabbous** I owe a great dept for his unswerving persistent support and help throughout the whole work.

I would like also to express my gratitude to **Dr. Mervat Hasan,** Lecturer of Public Health and Community Medicine, Ain Shams University, for her assistance in the statistical part in this work.

To my colleague **Dr Raguia Labib,** I'm deeply grateful for her appreciable and unlimited cooperation in the revision of references .

I am very much obliged to my **mother** and all the members of my **family** for their great support and help.

I would like to thank all my dear **colleagues and nursing staff** in the N.I.C.U and Obstetric ward, Ain Shams University, for their cooperation.,

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List of Abbreviations

B.P : Blood pressure.

C.B.C : Complete blood count.

C.R.P. : C-reactive protein.

C.S : Caesarean section.

Cot : Cotyledon.

D : Diastole .

del : Delivery.

E.A.O : End arteritis obliterans.

E.coli. : Escherichia coli.

F.T : Full term.

Fig : Figure.

G.A : Gestational age.

G.B.S : Group B streptococci.

Gynaecol: Gynaecology.

H & E : Hematoxylin and Eosin.

H.S : Highly significant.

H.S.S : Hematologic Scoring system.

hr : hour.

I.D.M. : Infant of diabetic mother.

I.S or insig: Insignificant

I.U.G.R : Intra uterine growth retardation.

I.U.I : Intra uterine infection.

I.V	: Intra venous.
Kg	: Kilogram.
M.T	: Masson trichrome.
min	: minute.
N.I.C.U	: Neonatal intensive care unit.
N.V.D	: Normal vaginal delivery.
N°	: Number.
Obstet	: Obstetric.
P.M.N	: Poly morphonuclear leucocyte.
P.R.O.M	: Premature rupture of membranes.
R.D	: Respiratory distress.
S	: Systole.
S.D	: Standard deviation.
Sig or S	: Significant.
U.C	: Umbilical cord.
V.H.S	: Very highly significant.
+ ve	: Positive
- ve	: Negative.
WK	: Week.
Wt	: Weight.

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INTRODUCTION

Introduction

High risk pregnancy is a complication of the maternal illness, obstetric disorder or drug therapy and from which one may anticipate an ill or immature infant. Some maternal illnesses that can seriously affect the newborn include hypertension and pre- eclampsia, diabetes mellitus, post maturity, infection and others (Halliday et al., 1989).

Although the placenta has both foetal and maternal components, it essentially serves as a foetal organ, a vascular organ of exchange, located outside the foetal body cavities. It performs similar functions as the lungs and kidneys do in extra unterine life, namely, respiration and excretion. In addition it assists the transfer of nutrients from maternal to foetal blood and secretes hormones that serve to maintain the pregnancy and foetal growth (Sander, 1991).

Careful examination of the placenta can prove to be a valuable aid in the diagnosis and treatment of the newborn infant. Gross examination of the placenta is of dual interest first, the examination gives an opportunity for verifying the placenta's integrity, thus avoiding maternal complications. Second, it is an important supplement of the newborn's physical examination. The placenta may either be