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Pre-operative Preparation of Pre-eclamptic Patients Undergoing Cesarean Section: A prospective randomized comparative study between the effect of Labetalol versus Nifedipine in controlling elevation of blood pressure.

Thesis

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Introduction

Pre-eclampsia is a confusion of far reaching vascular endothelial breakdown and vasospasm that happens following 20 weeks' incubation and can present as late as 4 a month and a half's baby blues. It is clinically characterized by hypertension and proteinuria, with or without pathologic edema. (Vattern and Skjaerven, 2004)

Entanglements of sound are not kidding and may influence both the mother and the embryo; intensely sound can be confused by a few sorts of strokes either ischemic or hemorrhagic which may prompt inside drain. Different genuine complexity is HELLP disorder. As of late, this disorder experiences new grouping made by University of Mississippi, which characterized the infection into 3 classes as indicated by level of thrombocytopenia, proof of interesting trace and proof of Specific brokenness, another arrangement made by University of Tennessee, which has similar criteria (Martin et al.,2006)

The utilization of Anti-effective additions in gentle pregnancy-initiated hypertension or sound isn't emphatically suggested, just when circulatory strain is more prominent than 150/100-millimeter data (mmHg), Labetalol, Methyldopa or Component are instructed as addition with respect to decision.

Regardless of that the customary dealing of default-initiated hypertension is Methyl-dopa (Aldomit), ongoing investigations uncovered that Beta-blockers and Calcium-channel blockers is by all accounts more compelling than Clean as they diminish by and large danger of creating proteinuria/sound when either are contrasted and Status. (Abalos et al.,2014)

Second firm is a nonselective, serious beta-adrenergic and a specific, serious alpha1-adrenergic blocking specialist. The instrument of activity is

applied by decrease of fringe wide-range opposition without trading off blood stream to the cerebrum and fringe, coronary, or renal frameworks.

Potential advantages incorporate speedy beginning of activity and less hazard for reflex tachycardia. Second firm, be that as it may, ought to be maintained a strategic distance from in patients with moderate-to-serious asthma, compound (pulse <60 thumps every moment), or congestive heart failure(Wagner, 2004).

Component is an oral, type 2 calcium channel play that restrains the internal progression of organ across moderate channels of cell films. It diminishes BP without bargain to placental liquid line. Component should just be given as an oral short-acting arrangement in an underlying portion of 10 to 20 milli-gram(mg) orally at regular intervals for a greatest measurements of 50 mg. Normal reactions incorporate tachycardia, cerebral pains, and palpitations (lim et al, 2012).

Aim of the Work

To think about the counter effective adequacy of oral Second firm with oral Component in mellow domain.

To consider the maternal and perinatal result in gentle domain following dealing with oral Second firm or oral Component.

PATHOPHYSIOLOGY OF SOUND

Definitions:

Domain is a confusion of boundless wide-range endothelial glitch and vasospasm that happens following 20 weeks' growth and can present as late as 4 a month and a half baby blues. It is characterized as increment circulatory strain and proteinuria, with or without pathologic shift (Sibai, 2003).

A clear medicinal accord is missing in regards to characterizing domain and deciding its qualities, however there are sensible criteria for ladies who have typical circulatory strain before 20 weeks' growth, this criteria is having estimating the patient's pulse, 2 progressive continuous estimations with 4-6 hours interim are required and the outcomes are 140/90 mm Hg or more. Domain in a patient with prior basic overload is analyzed if systolic circulatory strain has expanded by 30 mm Hg or diastolic pulse has expanded by 15 mm Hg (Vatten and Skjaerven, 2004).

Eclampsia is characterized as seizures with no inferable other reason in a affected with domain (Ngoc et al.,2006). The global rate of the sickness is 5-14%, while this occurrence increments in creating nations as it arrives at 4-18% (Sibai,2004). Effective issue of default are viewed as one of the commonest causes (the second) of stillbirth and early neonatal passings (Ness and Roberts,1996). Regardless of overload is a firm attribute of domain, different side effects or lab discoveries may show up first, as shift, cerebral pain, visual aggravation and epigastric delicacy (Tuffnell et al.,2006).

Arrangement:

The best possible arrangement of any infection should be impression of different factors as; pathophysiology, dangers and result. Various lofty bodies have acknowledged the accompanying grouping of effective issue whether protienuria is required or not to analyze domain (Magee et al., 2014).

Chapter 1

Globally, in the most recent rules, pieceuria isn't required any longer to analyze

sound, leaving just the British NICE rules with this prerequisite (Tranquilli et

al.,2013).

The order is as per the following:

1-Domain – Eclampsia.

2-Gestational overload.

3-Chronic overload: an Essential.

b-Secondary.

c-white coat: it implies just rise of the pulse while estimated by a clinician; else

it is typical whenever estimated by home BP observing for instance

(Bulletin, 2002).

Sound:

It is a multi-framework issue related distinctly to human default, described by

overload (HTN) and inclusion of at least one other organ frameworks and

additionally the piece. In spite of fate is the commonest extra component by

VMP and effectively remembered, it shouldn't be considered as a manual

commitment for the determination. Prior VMP is a solid hazard factor for

creating domain (PET) (Nelson, 2003).

Domain is grouped into mellow and serious. Domain is mellow in 75% of cases

and extreme in 25% of them. On the off chance that seizures create on top, the

confusion has formed into eclampsia (Sibai, 2004).

 \rightarrow Mild domain is characterized as expanded circulatory strain (BP >

140/90mmHg)on 2 progressive back to back estimations, at any rate 6 hrs

separated, with barring end-organ harm, in a affected who had ordinary BP

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before 20 weeks' incubation. In a affected with previous fundamental VMP, domain is analyzed if systolic pulse (SBP) has expanded by 30 mm Hg or if diastolic circulatory strain (DBP) has expanded by 15 mm Hg (Villar et al.,2001).

- → Severe domain doesn't have straightforward definition, it has a basis to be satisfied. This model is available domain with 1 of the accompanying indications or signs:
- a) Measurement of 160 mm Hg or more prominent for her systolic or 110 mm Hg for her diastolic pulse on 2 progressive back to back estimations, in any event 6 hours separated.
- b) Reduced Oxygen immersion that prompts cyanosis or pneumonic shift.
- c) Low pee yield (24 hour pee assortment of under 400 mL).
- d) Investigations that uncover either disabled other capacities or fate of in excess of 500 mg in a 24 hour assortment. On the off chance that the pee test is arbitrary, in any event 2 examples with 4 hours interim is required with fate of 3+ or higher.
- e)Persistent cerebral pain.
- f) State, diminished fetal development or tall suddenness.
- g)Upper right quadrant or epigastric agony.
- h) Decreased platelet check.

Extreme domain may convolute into Disseminated Intravascular Coagulopathy (DIC), renal and other disappointment or even focal sensory system (CNS) issue or even HELLP disorder (Khedun et al.,1997).

→ Superimposed sound:

In the event that an incessant overload quiet grows further signs of domain following 20 weeks' of incubation, right now analyzed as superimposed domain. If fate went before different appearances it's harder to analyze the illness as fate ordinarily increments during default. In these sick closer checking is required, however the finding isn't affirmed without appearance of other maternal foundational signs or festal impacts with or without Small for Gestational Age (SGA), as fine or irregular line in uterine line Doppler

(Chappell et al.,2008).

Domain as recently characterized could be analyzed when overload shows up following 20 weeks' incubation, with the contribution of at least one of the accompanying: (Ritchie and Brown, 2010).

1) Renal:

- Significant fate, a spot pee protien/part proportion 30 mg/mmol (Kuo et al, 1992)
- Serum or plasma part > 90mmol/L (Von Dadelszen et al,.2011)
- Oliguria:< 80mL/4 h (Urate is excluded as a demonstrative element) (Koopmans et al.,2009)

1) Haematological:

- Thrombocytopenia <100 000/L
- HemolysisL schistocytes or red cell fragmentson liquid film, raise bilirubin, raise lactate dehydrogenase > 600mIU/L, diminished Haptoglobins (Rodeghiero et al.,2009)

1) Liver:

Raised serum transaminases.

· Severe epigastric as well as right upper quadrant torment (Haram et

al.,2009).

1) Neurological:

• Convulsions (eclampsia), Hyperreflexias with continued clonus,

Persistent new cerebral pains.

• Persistent visual aggravations (Photopsia, scotomata, cortical visual

impairment, back reversible encephalopathy disorder and retinal vasospasm)

Brain stroke.

1) Respiratory: Pulmonary shift.

2) Fetal development limitation (FGR)

(Magee et al.,2014)

Some antagonistic results – both maternal and fetal-are expanded by certain

highlights of domain (PET); those highlights are utilized to characterize the

infections (Tranquilli et al.,2013).

All pre-fault sick – whatever the degree - should be firmly observed, this is

because of the unforeseen course and unusualness of the movement of the

illness (NICE guidelines, 2012).

The order of extreme PET would push doctors to identify the two moms a

children who are risked to antagonistic results. Various arrangement frameworks

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and studies have attempted to identify which highlights are prescient (Bulletin, 2002).

It was accounted for in the investigation that prescribed highlights utilized as pointers of serious sickness, weren't touchy or explicit in foreseeing the neither females nor the children at explicit hazard (Menzies et al., 2007).

Variables that may decide the seriousness of the ailment incorporate BP contro(llability, eclampsia, declining thrombocytopenia or compounding (FGR) with less worries towards expanding fate (Tranquilli et al.,2013).

Estimation of Tall Growth Factor (P1GF) alone, or with dissolvable fms-like tyrosine kinase-1 (sF1T1), is recentlynot part of characterization of effective issue of default (Menzies et al.,2007).

→ HELLP disorder:

Definition: The mix of haemolyisis, raised other pieces and low platelet (PLT) check, regardless of whether HELLP disorder is isolated element or only a manual disorder of serious sound compilications stays open, however from a manual point of view ought to be overseen as extreme sound (Abildgaard and Heimdal, 2013).

As of late, there're two primary techniques to analyze this disorder (Table 1).

In the Tennessee Classification System, Only One phase is available and is known as obvious or complete HELLP disorder. Fringe liquid smear is utilized to analyze intravascular haemolysis, expanded serum bilirubin (>20.5 µmol/L or >1.2 mg/100mL) and raised lactic Dehydrogenase (LDH) levels (>600 units/L (U/L)) (Sibai,2004).

In the Messissippi-Triple Class System, a further grouping of the disorder depends on platelet check whenever throughout the malady. Class 3 is

considered as manual change period of the disorder that can advance. Class 1 and 2 are increasingly identified with haemolysis (LDH > 600 U/L) and raised AST (>70 U/L) level, while class 3 requires just LDH >600U/L and AST >40U/L notwithstanding the particular PLT tally (Martin et al.,2006).

Table **(1)**

HELLP Class	Tennessee Classification	Mississippi Classification
1	Platelets < 100 X 10 ⁹ /L	Platelets $< 50 \times 10^9 / L$
	AST > 70 IU/L	AST or ALT > 70 IU/L
	LDH >600 IU/L	LDH >600 IU/L
2		Platelets >50 $X10^9/L$ and < $100 X 10^9/L$
		AST or ALT > 70 IU/L
		LDH > 600IU /L
3		Platelets > 100X10 ⁹ / <i>L</i> and 150 X10 ⁹ / <i>L</i>
		AST or ALT >40 IU/L
		LDH >600IU/L

9 Eclampsia:

Definition: seizures with no inferable other reason in the affected with sound (Sibai,2004).

> Gestational overload:

It is charactarized by:

- No history of constant overload (HTN), with liquid pressure(BP) estimations of 140/90 or higher.
- Affected recovers ordinary BP in under 12 weels baby blues so last determination is just arrived at baby blues.
- No fate (Tuffnell et al.,2006).
- Chronic overload.

This class incorporates basic overload just as overload optional to specific conditions.

- 1-Essential overload or essential overload is analyzed by two strategies,
- an) It began preceding default or before it finishes 20 weeks', with BP of 140/90 or higher.
- b) A affected exhibiting early default getting drugs for overload with no reason for (optional) overload.

A few sick with fundamental overload may have white coat overload; these sick appear to have a diminished danger of superimposed domain than different sick with genuine basic overload, yet the two sorts are at higher hazard in examination with ordinary ladies (Brown, 2005).

2-Secondary overload:

It is because of various causes as:

a) Chronic renal maladies: Glomerulonephritis, reflux nephropathy and grownup polycystic kidney ailment.

- b) Renal supply route stenosis: Systemic ailment with renal contribution as; Diabetes mellitus (DM) or foundational Lupus Erythematosus (SLE).
- c) Endocrine disroders: Pheochromocytoma, Cushing's disorder and essential hyperaldosteronism.

d) Coarctation of the aorta.

On the off chance that any of these referenced conditions are missing, and the affected is experiencing raised BP in the primary portion of default, it's probably going to be considered as fundamental VMP. While it's difficult to research every one of these conditions during development, a total examination may hold up till after conveyance (Tranquilli et al.,2014).

NOTE

Proteinuria: it is analyzed by gathering the sick pee for 24 hours and piece is 300mg or more, or by a questionable strategy which is the piece: part proportion, numerous clinicians have acknowledged the proportion of 0.3 to analyze pieceuria. Different clinicians rely upon the negative prescient worth (NPV), which implies that if the past proportion arrives at 0.19 or higher, the affected is considered pieceuric till other sequential corroborative estimations of pieceuria is done just about 6 hours separated to build this prescient worth (Thompson aand Lieberman, 2001).

Hazard Factors of Sound:

The event of the sickness itself or even its hazard factors in the primary default may incline the affected for repeat of domain, particularly on the off chance that they were serious (Lykke et al., 2009).

Gestational age: