

Basic B.sc In Nursing 4th Year
Subject:Midwifery & obstetrical Nursing II
Topic: Introduction to Abnormal

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Introduction to abnormal obstetrics

Abnormal obstetrics means a high risk in which the life or health of the mother or fetus is jeopardized by a disorder coincidental with or unique to pregnancy

1.Common abnormal obstetrics:

- Complication during pregnancy
- Bleeding disorder
- Bleeding in early pregnancy
- Abortion
- Ectopic pregnancy
- Bleeding in late pregnancy
- Placenta previa
- Abruptio placenta
- Disseminated intravascular coagulation
- Cardiovascular disorders
- Gestational hypertension
- Heart disease
- Anemia
- Gastrointestinal disorder
- Hyperemesis gravidarum
- Pregestational diabetes mellitus
- Gestational diabetes mellitus
- Infections
- Urinary tract infection

2. Complications during intrapartum

- Preterm
- Premature rupture of membranes
- Episiotomy
- Forceps assisted birth
- Postterm labor and birth
- Precipitate labor
- Uterine rupture
- Hydramnios
- Oligohydranios
- Prolapsed of the umbilical cord
- Multifetal pregnancy
- Cesarean birth

3. Complications during postpartum

- Puerperal pyrexia
- Sub involution of uterus
- Secondary postpartum heamorrhage
- Genital tract infection
- Mental illness in the puerperium

4. Complications of the new born baby

- The term new born infant
 - Resuscitation of the newborn
 - Low birth weight baby
 - Problems of the new born
 - Respiratory problems
 - Neonatal jaundice
 - Convulsions in new born
 - Birth trauma
 - Infections of the new born
 - Metabolic problems
- Congenital malformations

Factors influencing complications in obstetrics:

1.Economic status-

The poor are at greater risk for health problems. Economic risk is determined by the relationship between family financial resources and demands on those resources. Having adequate financial resources means that a family is able to purchase the necessary commodities related to health. These include adequate housing, clothing, food, education, health/illness care.

2.Educational status-

Low education and lack of knowledge about pregnancy and pregnancy related childbirth education. In our country there is no proper facility on expectant parenting classes, antenatal and postnatal exercise and easy childbirth exercise.

3.Women status-

Problems with the power (the force of labor), problems with the passenger, and problems with the passage

4.Social status-

Early marriage and early pregnancy, illiteracy, poor socioeconomic condition, high crime neighborhood

5. Life style factors-

Personal health habits continue to contribute to the major cause of maternal morbidity and mortality. Some don't know their proper diet, personal hygiene, exercise and activity, sleep patterns and proper antenatal checkup.

6. The age related factors-

The optimum reproductive efficiency appears to be between 20 to 25. In the young adolescent, pregnancy carries a higher risk due to preeclampsia, cephalopelvic disproportion and uterine inertia. In women aged 35 years or above the risk is 3-5 times higher.

7. Antenatal care-

The most significant factor affecting maternal complications is the availability of antenatal care and its acceptance by the community.

8. Parity-

The risk of slightly more in primigravida but it is 3 times greater in para 5 or above where postpartum hemorrhage, mal presentations and rupture of uterus are more common.

Midwifery roles in the management of abnormal obstetrics and medical conditions:

There are several important nursing roles in the management of abnormal obstetrics and medical conditions including care provider, teacher, collaborative, researcher, and advanced practice nurses.

The role of the professional midwife in Bangladesh is to:

1. Supervise and provide appropriate care for women during pregnancy throughout labor and the puerperium
2. Conduct deliveries skillfully to ensure a safe delivery. Using clinical and necessary appropriate technology, this includes being able to carry out the procedure of episiotomy and perineal suturing
3. Skillfully manage the third stage of labor and to apply if necessary appropriate technical skills to arrest hemorrhage in the absence of medical aid
4. To ensure that all appropriate assistance is given to the infant at birth, including appropriate serving of the umbilical cord
5. In the absence of medical aid to give all appropriate resuscitative actions as the infant may require

6.To ensure the infant is thoroughly examined as soon after birth as possible and to seek medical assistance if any deviations are noted

7.By careful screening and monitoring recognize and detect early signs of obstetric complications, especially early signs of pre-eclampsia and to take all appropriate steps to refer the woman for specialized obstetric care and apply appropriate life saving skills as may be necessary

8.Provide mothers their families and the community with appropriate health education, including education regarding future pregnancy spacing and EPI programmes

9.To provide exclusive breast feeding from birth for the first six months of life as the most appropriate methods of infant feeding. Especially encouraging mothers to give their babies colostrums

9.To refer to an appropriately qualified doctor, any woman found to have a serious medical problem.