

Table 2: Shows the overall maternal outcome in women among both groups with their statistical analysis

| Characteristics | Study group (N=42) | Control group (N=46) | P value |
|--|--------------------|----------------------|---------|
| No. of women who have developed preeclampsia | 19 (45.23%) | 6 (13.04%) | P<0.05 |
| No. of women who have developed oligohydramnios | 12 (28.57%) | 1 (2.17%) | P<0.05 |
| No. of women with meconium stained liquor | 7 (16.66%) | 1 (2.17%) | P<0.05 |
| No. of women with late deceleration | 7 (16.66%) | 2 (4.34%) | NS |
| No. of women with late and variable deceleration | 9 (21.42%) | 2 (4.34%) | NS |
| No. of cesarean section for fetal distress | 7 (16.66%) | 1 (2.17%) | P<0.05 |
| Mean gestational age at delivery in weeks | 34.1±1.3 | 37.12±1.8 | <0.05 |

NS; Not significant statistically

The overall maternal outcome for both groups can be summarized as below

1. Number of women who developed preeclampsia was significantly higher in the study group than in the control group {nine (45.23%) vs. six (13.04%): P<0.05}.
2. The number of women who developed oligohydramnios was significantly higher in the study group than in the control group {12 (28.57%) vs. 1(2.17%): P<0.05}
3. The number of women who developed placental abruption was significantly higher in the study group {seven (16.66%) vs. one (2.17%): P<0.05}.
4. The number of women with meconium stained liquor was higher in the study group, yet the difference was not significant {7 (16.66% vs. 2 (4.34%): P<0.05}
5. The number of women who have developed late and variable deceleration was higher in the study group than in the control group {9 (21.425 vs. 2(4.34%); P<0.05}

6. The number of cesarean sections for fetal distress was higher among women in the study group than in the control group {7 (16.66%) vs. 1 (2.17%): P<0.05}

7. The mean gestational age at delivery was lower among women in the study group than in the control group {34.1±1.3 vs. 37.12±1.8: P<0.05}

It is worth mentioning in this regard that among women in the study group who have developed placental abruption two were complete with intrauterine death, while the remaining 5 were partial as confirmed at time of cesarean section by the presence of retroplacental clot. While the only woman in the control group who has developed placental abruption was diagnosed as a case of fetal distress upon developing variable deceleration in the first stage of labor, upon doing cesarean section retroplacental clot was found.

Table 3: Shows the overall neonatal outcome among both study groups

| Characteristics | Study group (N=42) | Control group (N=46) | P value |
|--|--------------------|----------------------|---------|
| Mean birth weight at delivery | 2.1±0.41 | 3.3±0.54 | P<0.05 |
| Number of infants with IUGR | 12(28.57%) | 1(2.17%) | P<0.05 |
| Apgar score less than 5 at 1 minute | 14(33.33%) | 7(15.215%) | P<0.05 |
| Apgar score less than 7 at 5 minutes | 10(23.80%) | 3(6.52%) | P<0.05 |
| Number of infants who developed neonatal jaundice requiring phototherapy | 8(19.04%) | 1(2.17%) | P<0.05 |
| Number of perinatal death | 4(9.52%) | 0(0%) | P<0.05 |