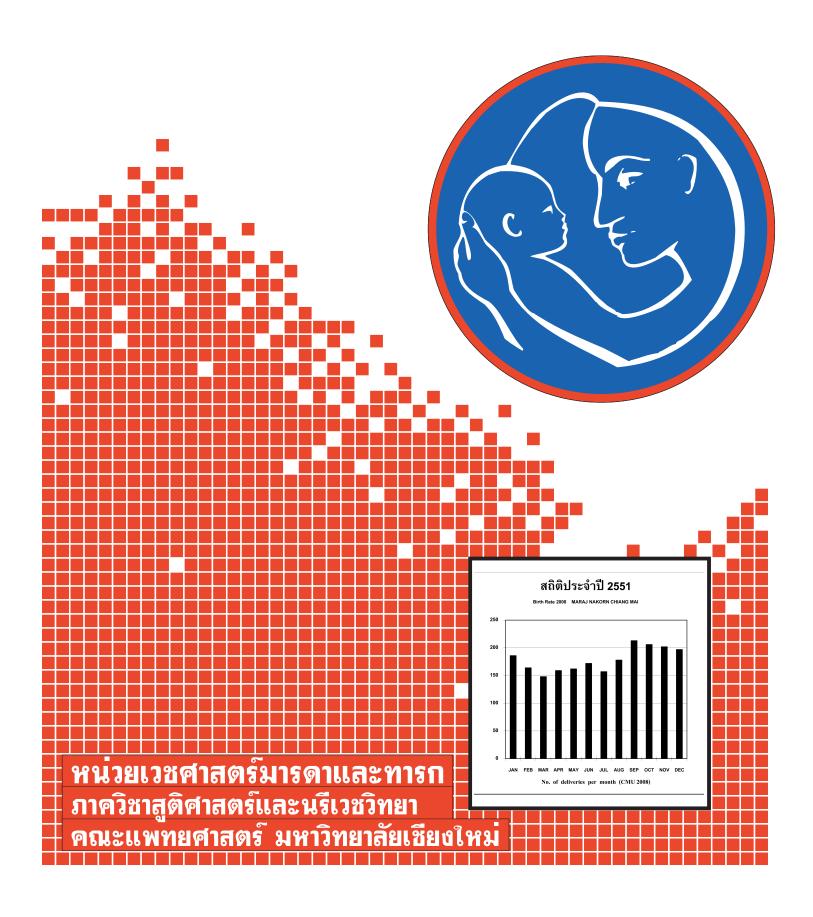
MATERNAL-FETAL MEDICINE 2008



ANNUAL REPORT 2009

MATERNAL-FETAL MEDICINE
DEPARTMENT OF OBSTETRICS AND GYNECOLOGY
FACULTY OF MEDICINE, CHIANG MAI UNIVERSITY
CHIANG MAI, THAILAND

MATERNAL-FETAL MEDICINE 2008

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PREFACE

This annual report 2008 on maternal-fetal medicine has been published with great contribution from Dr. Pannee, Dr Theera and their colleagues in the MFM division. It reflects our work and advance in obstetric care and can be used as a benchmark for medical personnels involved in this field.

I would like appreciate and express my sincere thanks to my colleagues for their hardworking and dedication to our OB & GYN Department. I gratefully acknowledge Associate Professor Sirivatanapa, Chief of the MFM Division and Professor Theera Tongsong for ongoing this report.

Jatupol Srisomboon, M.D.

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The 2008 annual report of Maternal-Fetal Medicine still presents various interesting data. This year our unit has established Down screening program with biochemical markers both in first and second trimester, as well as nuchal translucency in late first trimester.

Of interest, the total number of delivery is slightly increased and the number of perinatal work-ups are continuously increased. Moreover, we conducted several researches published via pubmed in the last year.

Our annual report has been presented online as seen on the homepage of our department as well as hard copy version. We hope that this report can be used as a benchmark for obstetricians in providing the best care to all pregnant women.

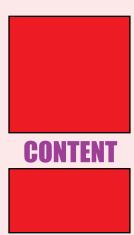
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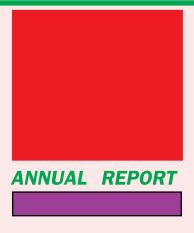
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	Page
Section I Obstetric Mortality	9
• Stillbirth	9
Neonatal Mortality	10
Perinatal Mortality	11
Maternal Mortality	11
Section II General Obstetrics	13
Singleton & Multifetal pregnancies	13
Categories of parturients	13
Deliveries per month	14
Distribution of maternal age	16
Distribution of parity	19
Distribution of the occupations of the paturients	21
 Distribution of the Residences of the parturients 	24
Gestational age at delivery of singleton pregnancy	28
Gestational age at delivery of twins pregnancy	31
Number of antenatal clinic attendance	34
Fetal presentations in labor	38
Modes of deliveries	40
■ Modes of delvieries in breech presentation	42
 Frequency of cesarean deliveries according to diagnostic 	c indication44

	Forceps delivery: Indications	45
	Vacuum delivery: Indications	46
•	Sex of the fetus, Fetal sex	47
•	Apgar score at 1 and 5 minutes of total neonates	48
•	Congenital anomalies of fetuses	
	Distribution of neonatal birth weight	
	Distribution of neonatal birth weight for each gestational pe	
•	Comparison of birth weight, gestational age between	
	singleton and multifetal pregnancies	
	Postpartum hemorrhage	60
S	ection III High-risk Pregnancies	61
•	Frequencies of pregnancies with major complications	61
	Pregnancies with heart diseases	62
	Pregnancies with diabetes melitus	63
	Pregnancies with thalassemia	65
	Pregnancies with thyrotoxicosis	66
	Pregnancies with hepatitis B antigen positive	68
•	Pregnancies with asthma	69
•	Pregnancies with chronic hypertension	71
•	Pregnancies-induced hypertension	72
	Pregnancies with placenta previa	74
	Pregnancies with acute pyelonephritis	76
	Pregnancies with small-for-gestational-age fetuses	77
•	Pregnancies with HIV infection	79
S	ection IV Perinatal Investigations	85
•	Antepartum fetal testing	
•	Prenatal diagnosis	
•	Ultrasound service	86
•	Cordocentesis	87
•	Amniocentesis	88
•	Chorionic villous sampling	89
•	Thalassemia screening	90
	High-risk pregnancies	92



2008

MATERNAL-FETAL MEDICINE

Presentation: January 2009

DIVISION OF MATERNAL-FETAL MEDICINE

DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

FACULTY OF MEDICINE, CHIANG MAI UNIVERSITY

CHIANG MAI, THAILAND

DATA SOURCE

Section I Obstetric Mortality Patient Record Charts

Section II General Obstetrics Delivery Records

Section III High-risk Pregnancies Patient Record Charts

Section IV Perinatal Investigations Statistics of the Division

Section I

OBSTETRIC MORTALITY

STILLBIRTH

Stillbirth (gestational age ≥ 22 weeks)

37 cases of total births 2,144 cases

■ Gestational age between 22-27 weeks 19 cases (51.3 %)

	CMU cases	Referred cases	Total
Low risk	-	-	-
High risk	7	12	19
Autopsy	2	6	8

Causes of death

		CMU	Referred	Iotal
		cases	cases	cases
1.	Normally formed macerated stillbirth	1	3	4
2.	Congenital malformations	3	4	7
3.	Conditions associated with immaturity	3	2	5
4.	Asphyxia developed in labor	-	-	-
5.	Other specific conditions	-	-	-
6.	Therapeutic termination related to PND	-	3	3

■ Gestational age between ≥28 weeks 18 cases (48.6 %)

	CMU cases I	Referred cases	Total
Low risk	-	-	-
High risk	6	12	18
Autopsy	4	8	12

Causes of death

		CMU	Referred	Total
		cases	cases	cases
1.	Normally formed macerated stillbirth	2	2	4
2.	Congenital malformations	1	4	5
3.	Conditions associated with immaturity	3	3	6
4.	Asphyxia developed in labor	-	1	1
5.	Other specific conditions	-	1	1
6.	Therapeutic termination related to PND	-	1	1

Stillbirth rate:

Stillbirth rate = 8.39 per 1000 total births

(by old WHO definition: > 28 weeks or birth weight > 1000 grams)

Stillbirth rate = 17.25 per 1000 total births

(by new WHO definition : \geq 22 weeks or birth weight > 500 grams)

Stillbirth rate = 15.39 per 1000 total births

(by new WHO definition : \geq 22 weeks' gestation or birth weight > 500 grams, not included therapeutic termination due to fetal malformations)

NEONATAL DEATH

Neonatal death 18 cases (GA > 22 weeks) of total 2186 live births

■ Gestational age between 22-27 weeks 4 cases (22.2%) (Livebirth 2186)

	CMU cases	Referred	cases	Total	
Low risk	-	1		1	
High risk	1	2		3	
Autopsy	-	1		1	
Causes of death					
1. Normally formed made	erated stillbir	th -	-	-	case
2. Congenital malformat	ions	-	-	-	case
3. Conditions associated	with immatu	rity -	1	1	case
4. Asphyxia developed i	n labor	-	-	-	case
5. Other specific condition	ons	1	2	3	cases
6. Therapeutic termination	on related to I	PND-	-	-	case

■ Gestational age \geq 28 weeks 14 cases (77.8%) (Livebirth 2186)

	CMU cases Re	ferred ca	ses	Total	
Low risk	1	-		1	
High risk	4	9		13	
Autopsy	3	3		6	
Causes of death					
1. Normally formed ma	cerated stillbirth	-	-	-	case
2. Congenital malformations		2	6	8	cases
3. Conditions associated with immaturity		1	-	1	case
4. Asphyxia developed in labor		-	-	-	case
5. Other specific conditions		2	3	5	cases
6. Therapeutic terminati	on related to PNI) -	-	-	case

Early neonatal death rate 6.40 per 1,000 live births
(up to 28 week's gestation or 1000 grams and died within first 7 days of life)
Early neonatal death rate 8.23 per 1,000 live births
(\geq 22 week's gestation or 500 grams and died within first 7 days of life)

The most common cause of perinatal death was related to congenital anomalies referred for diagnosis from regional areas and terminated at Maharaj Nakorn Chiang Mai Hospital

PERINATAL DEATH

Perinatal Mortality (including the referal cases)

- 1. Gestational age \geq 28 weeks (stillbirths + early neonatal death) perinatal death rate = 14.6 per 1000 total births
- 2. Gestational age \geq 22 weeks (stillbirths + neonatal death) perinatal death rate = 10.5 per 1000 total births

The most common related causes were fetal anomalies and immaturity (several cases associated with self attempt termination)

MATERNAL DEATH

Total (All were referred cases) 2 cases

Maternal mortality rate 0.91 per 1000 livebirths

Causes of maternal death

Postpartum hemorrhage with shoulder dystocia 1 case

Postpartum hemorrhage due to uterine atony 1 case

Summary

DATA	2008
Total birth (neonates)	2186
Stillbirth	37
• 22-27 weeks	19
• \geq 28 weeks	18
Stillbirth rate/1000 births	
• > 28 weeks / birthweight >1,000 gm	8.4
• > 22 weeks / birthweight >500 gm	17.3
Early neonatal death	18
• Early neonatal death rate / 1000 total birth (≥ 28 weeks)	6.4
 Early neonatal death rate / 1000 total birth (≥ 22 weeks) 	8.2

| Section ||

GENERAL OBSTETRICS

TABLE 1 Distribution of Singleton & Multifetal Pregnancies

Type of pregnancy	Number	Percent
Singleton	2103	98.1
Twins	36	1.7
Triplet	3	0.1
Total	2144	100.0

TABLE 2 Categories of the Pregnant Women

	2007			2008		
N	umber Percent N		Number	Percent		
General Cases	1813	82.0	1785	83.3		
Private Cases	399	18.0	359	16.7		
Total	2212	100.0	2144	100.0		

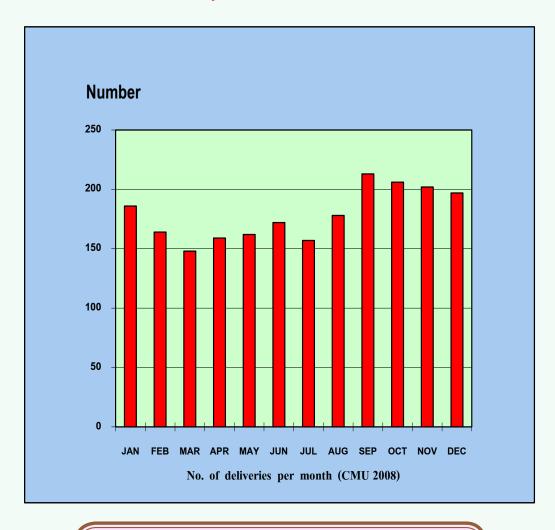
TABLE 3 Categories of the Pregnant Women

	Number	Percent
ANC at Maharaj Nakorn Chiang Mai Hospital	1215	56.7
Private Clinic	359	16.7
ANC at Other Hospitals	476	22.2
No ANC	84	3.9
Total	2134	99.5

TABLE 4 Number and Percentage of Deliveries per month

Month	Number (Neonates)	Percent
January	186	8.68
February	164	7.65
March	148	6.90
April	159	7.42
May	162	7.56
June	172	8.02
July	157	7.32
August	178	8.30
September	213	9.93
October	206	9.61
November	202	9.42
December	197	9.19
Total	2144	100.00

FIGURE 1 Histogram : Number of Deliveries from January to December 2008



Total deliveries in 2001 = 3103 cases

Total deliveries in 2002 = 2815 cases

Total deliveries in 2003 = 2753 cases

Total deliveries in 2004 = 2654 cases

Total deliveries in 2005 = 2420 cases

Total deliveries in 2006 = 2013 cases

Total deliveries in 2007 = 2212 cases

Total deliveries in 2008 = 2144 cases

TABLE 5 Number and percentage of parturients by age

Age	Number	Percent	Age	Number	Percent
13	1	0.0	31	110	5.1
14	4	0.2	32	94	4.4
15	4	0.2	33	89	4.2
16	23	1.1	34	82	3.8
17	41	1.9	35	84	3.9
18	57	2.7	36	63	2.9
19	72	3.4	37	57	2.7
20	76	3.6	38	36	1.7
21	78	3.6	39	26	1.2
22	84	3.9	40	24	1.1
23	116	5.4	41	20	0.9
24	107	5.0	42	18	0.8
25	108	5.1	43	4	0.2
26	137	6.4	45	2	0.1
27	133	6.2	47	1	0.0
28	143	6.7	46	1	0.0
29	120	5.6	47	1	0.0
30	123	5.8			
Total				2137	100.0

Average age (Mean<u>+</u>Standard deviation) 27.86<u>+</u>6.1 years

TABLE 6 Number and percentage of parturients by age group

Age Group	Number	Percent
10-14	5	0.2
15-19	197	9.2
20-24	461	21.5
25-29	641	29.9
30-34	498	23.2
35-39	266	12.4
40-44	66	3.1
<u>≥</u> 45	3	0.1
Total	2144	100.0

Summary: Age of parturients

1. Adolescent Pregnancies (11-19 years) 202 (9.4%) Early Adolescent Pregnancies (≤ 16 years) 32 (1.5 %) Late Adolescent Pregnancies (17-19 years) 170 (7.9 %)

2. Adult Pregnancies (20-34 years) 1600 (74.6 %)

3. Elderly Pregnancies (≥ 35 years) 335 (15.6 %)

FIGURE 2 Histogram : Number of Parturients by Age



TABLE 7 Parity of parturients

Parity	Number	Percent
0	1231	57.4
1	709	33.1
2	160	7.5
3	23	1.1
4	15	.7
5	3	.1
6	1	.0
7	1	.0
Total	2143	100.0

Parity = Number of pregnancies reaching the stage of fetal viability (more than 20 weeks) in this report

Nulliparous	57.4	%
Multiparous	42.6	%

FIGURE 3 Histogram : Number of parturients by parity

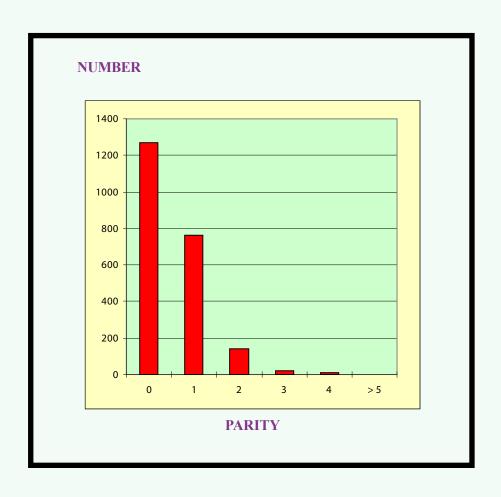
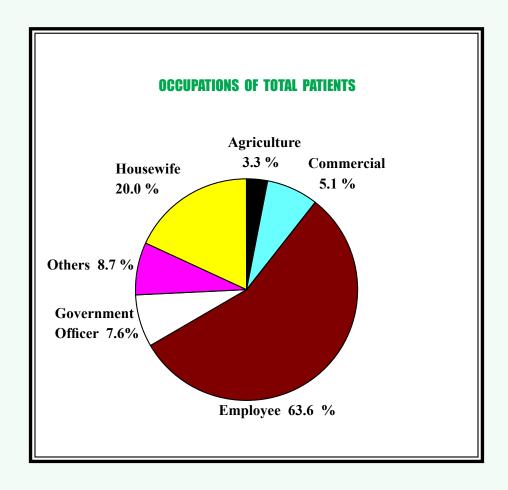
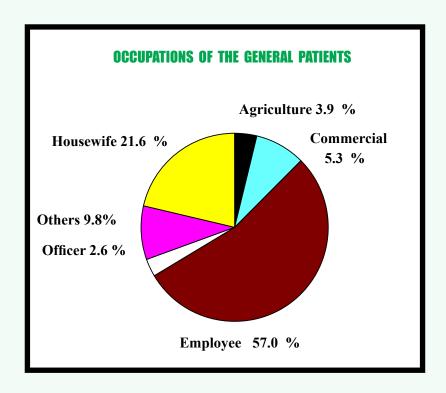


TABLE 8 Distribution of the occupations of the parturients

Occupations	То	tal	Gene	eral	Priva	ate
	Number	Percent	Number	Percent	Number	Percent
Agriculture	70	3.3	69	3.9	1	0.3
Commercial	110	5.1	94	5.3	16	4.5
Employee	1150	53.6	1017	57.0	133	37.0
Government Of	ficer 164	7.6	46	2.6	118	32.9
Private Busines	s 34	1.6	22	1.2	12	3.3
Housewife	428	20.0	385	21.6	43	12.0
Student	43	2.0	41	2.3	2	0.6
State Enterprise	e 7	0.3	3	0.2	4	1.1
Others	138	6.4	108	6.1	30	8.4
Total	2144	100.0	1785	100.0	359	100.0

FIGURE 4 Pie: Distribution of patient's occupations





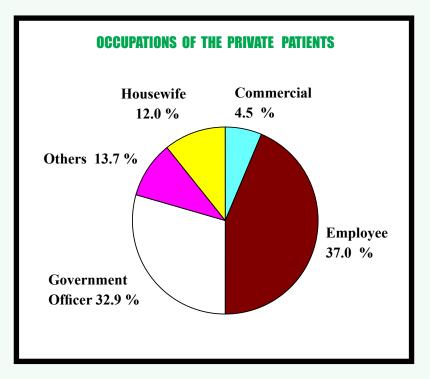


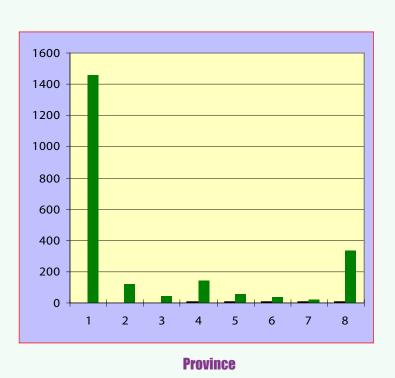
TABLE 9 Distributions of the residence (province)

of the parturients

Province	Number	Percent
Chiang Mai (เชียงใหม่)	1437	67.0
Chiang Rai (เชียงราย)	110	5.1
Lampang (ลำปาง)	36	1.7
Lamphun (ลำพูน)	130	6.1
Maehongsorn (แม่ฮ่องสอน)	72	3.4
Payao (พะเยา)	38	1.8
Prae (แพร่)	29	1.4
Others (อื่นๆ)	292	13.6
Total	2144	100.0

FIGURE 5 Histogram : Distribution of parturients by province of the parturients

Number



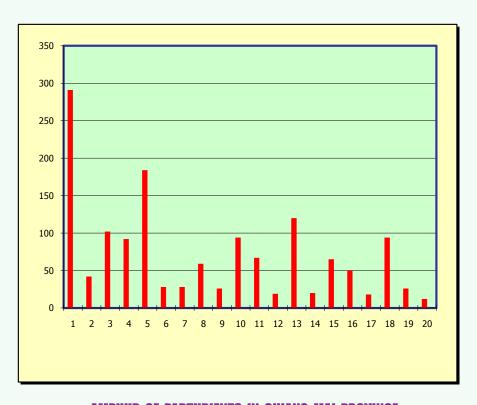
- 1. Chiang Mai (เชียงใหม่)
- 3. Lampang (ลำปาง)
- 5. Maehongsorn (แม่ฮ่องสอน)
- 7. Prae (แพร่)

- 2. Chiang Rai (เชียงราย)
- 4. Lamphun (ลำพูน)
- 6. Payao (พะเยา)
- 8. Others (อื่นๆ)

TABLE 10 Distributions of Amphur of the parturients in Chiang Mai province

	Amphur	Number	Percent
1.	Meung (เมือง)	291	20.3
2.	Maerim (แม่ริม)	42	2.9
3.	Doisaked (ดอยสะเก็ด)	102	7.1
4.	Sanpatong (สันป่าตอง)	92	6.4
5.	Hangdong (หางดง)	184	12.8
6.	Jomtong (จอมทอง)	28	1.9
7.	Mae-ai (แม่อาย)	28	1.9
8.	Prao (พร้าว)	59	4.1
9.	Hod (ฮอด)	26	1.8
10.	Sarapee (สารภี)	94	6.5
11.	Maetang (แม่แตง)	67	4.7
12.	Omkoi (อมก๋อย)	19	1.3
13.	Sankampang (สันกำแพง)	120	8.4
14.	Samoeng (สะเมิง)	20	1.4
15.	Chiangdao (เชียงดาว)	65	4.5
16.	Phang (ฝาง)	50	3.5
17.	Doitao (ดอยเต่า)	18	1.3
18.	Santrai (สันทราย)	94	6.5
19.	Maejam (แม่แจ่ม)	26	1.8
20.	Chaiprakarn (ไชยปราการ)	12	0.8
Tot	al	1437	100.0

FIGURE 6 Histogram: Number of parturients in each Amphur of Chiang Mai



AMPHUR OF PARTURIENTS IN CHIANG MAI PROVINCE

4. Sanpatong 1. Meung 2. Maerim 3. Doisaked 5. Hangdong 6. Jomtong 7. Mae-ai 8. Prao 9. Hod 10. Sarapee 11. Maetang 12. Omkoi 13. Sankampang 14. Samoeng 15. Chiangdao 16. Phang 20. Chaiprakarn 17. Doitao 18. Santrai 19. Maejam

TABLE 11 Number and percentage of parturients by gestational age in singleton pregnancies

GA (Week	Number (xs)	Percent	GA (Weeks)	Number	Percent
20	18	0.9	32	20	1.0
21	8	0.4	33	33	1.6
22	6	0.3	34	48	2.3
23	3	0.1	35	61	3.0
24	3	0.1	36	115	5.6
25	6	0.3	37	360	17.5
26	14	0.7	38	489	23.8
27	4	0.2	39	428	20.8
28	12	0.6	40	280	13.6
29	9	0.4	41	98	4.8
30	20	1.0	42	7	0.3
31	13	0.6			
Tot	al		1	2133	100.0

Average of Gestational Age 37.36±3.4 Weeks

FIGURE 7 Histogram : Number of parturients at various gestational age in singleton pregnancies

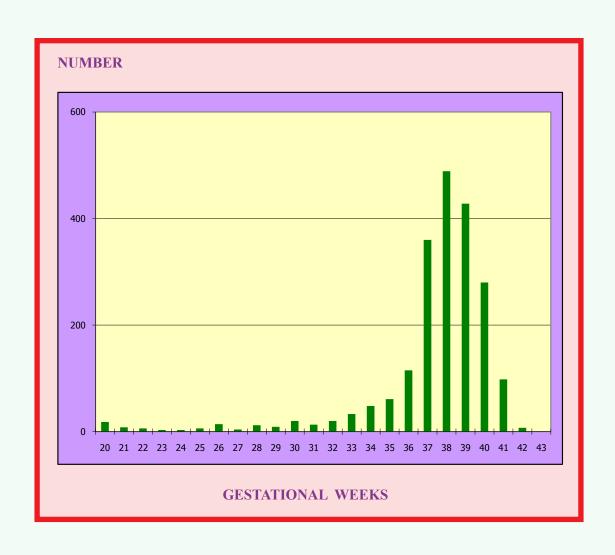


TABLE 12 Number and percentage of parturients by gestational age group in singleton pregnancies.

Gestational Age Group	Number	Percent
Immature (20-27 weeks)	62	3.0
Premature (28-36 weeks)	331	16.1
Term (37-41 weeks)	1655	80.5
Postterm (42 weeks or more)	7	0.3
Total	2055	100.0

Premature delivery included the refered cases

Immature cases included termination of pregnancies due to various indications especially serious anomalies.

TABLE 13 Number and percentage of parturients by gestational age in twin pregnancies

GA (Week)	Number (Twin sets)	Percent
28	3	8.3
29	2	5.6
30	3	8.3
31	2	5.6
32	8	22.2
33	5	13.9
34	2	5.6
35	3	8.3
36	3	8.3
37	2	5.6
38	1	2.8
39	2	5.6
Total	36	100

Average of Gestational Age 32.9±3.0 Weeks

FIGURE 8 Histogram : Number of parturients at various gestational week (in twin pregnancies)

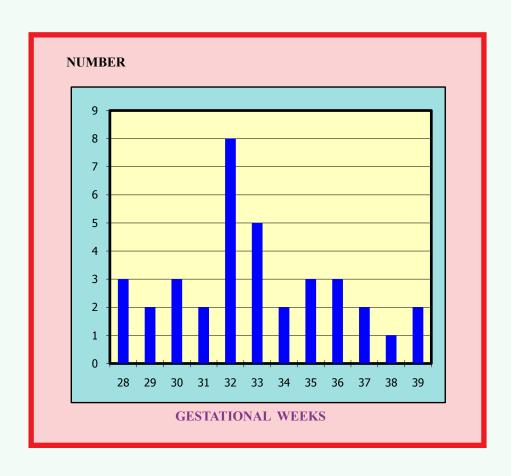


TABLE 14 Number and percentage of parturients by gestational age group in twin pregnancies.

Gestational Age Group	Number	Percent
Immature (20-27 weeks) Premature (28-36 weeks) Term (37-41 weeks)	0 31 5	0.0 86.1 13.9
Total	36	100.0

TABLE 15 Number and percentage of antenatal care attendance : General patients (not included the patients attending at other hospitals)

Number of ANCNum	ber of Parturients	Percent
0	84	6.6
1	28	2.2
2	56	4.4
3	41	3.2
4	44	3.4
5	51	4.0
6	59	4.6
7	87	6.8
8	91	7.1
9	105	8.2
10	143	11.2
11	146	11.4
12	158	12.3
13	94	7.3
14	57	4.4
15	24	1.9
16	9	0.7
17	4	0.3
Total	1281	100.0

Attending ANC at other hospitals 16.8% of total parturients

FIGURE 9 Histogram : Number of ANC attendance of general patients (excluding private patients and ANC at other hospitals)

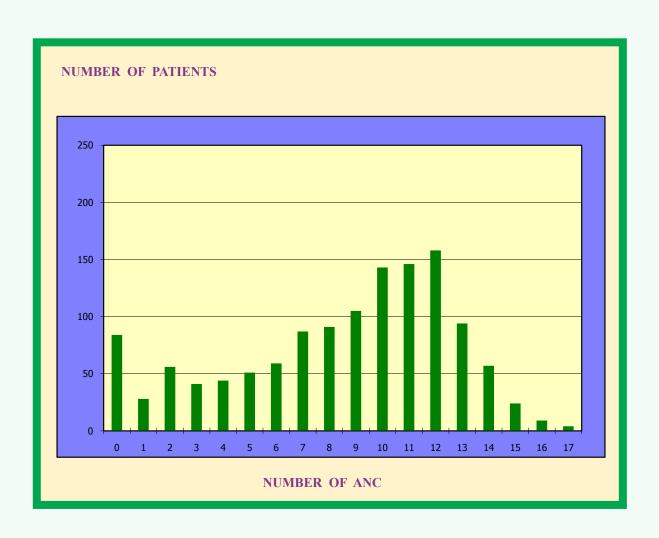


TABLE 16 Number of antenatal care attendance : General patients (not include the patients attending ANC at other hospitals)

Number of ANC	Number of Parturients	Percent
4 or more	1072	83.6
1-3	125	9.8
No ANC	84	6.6
Total	1281	100.0

Note ANC less than 4 is considered to be inadequate

Inadequate ANC 16.4%

FIGURE 10 Histogram : Number of ANC attendance of general patients (excluding private patients and ANC at other hospitals)

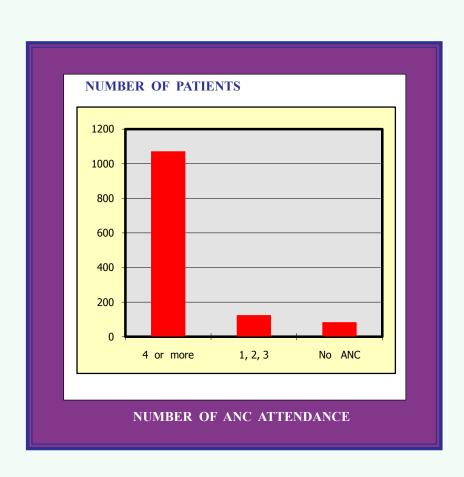
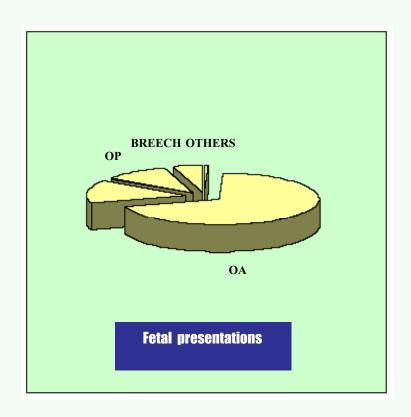


TABLE 17 Distribution of fetal presentations in labor (Singleton)

Fetal Presentation	Percent
Vertex	93.9
Breech	5.6
Transverse lie	0.2
Face	0.1
Compound	0.1

Breech Presentation was 5.6 % of Total Birth

FIGURE 11 Pie: Proportion of fetal presentations during labor



 $OA = occiput \ anterior, \ OP = occiput \ posterior, \ OT = occiput \ transverse$

TABLE 18 Mode of delivery : General and private patients Singleton

Mode of Delive	ry To	otal	Gen	eral	Priv	ate
ľ	Number	Percent	Number	Percent	Number	Percent
Normal Delivery	1441	68.5	1244	70.8	197	56.4
Forceps Delivery	12	0.6	12	0.7	-	-
Vacuum Delivery	155	7.4	112	6.4	43	12.3
Vaginal Breech Delivery	29	1.4	28	1.6	1	0.3
Cesarean Section	443	21.0	337	19.2	106	30.4
Other*	25	1.2	23	1.3	2	0.6
Total	2105	100.0	1756	100.0	349	100.0

^{*} other = conduplicato corpore, hysterotomy, internal version, caul etc.

Twins

Mode of Deliver	y To	otal	Gen	eral	Priv	ate
N	umber	Percent	Number	Percent	Number	Percent
Cesarean Section	24	66.7	16	57.1	8	100.0
Vaginal Delivery	12	33.3	12	42.9	0	0.0
Total	36	100.0	28	100.0	8	100.0

FIGURE 12 Histogram : Distribution of modes of deliveries : general & private patients (Singleton)

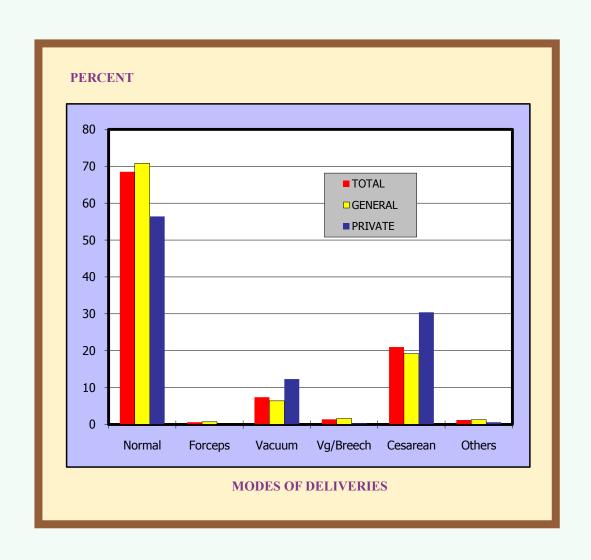


TABLE 19 Modes of delvieries in breech presentation :
general and private patients (Singleton)

Mode of Deliveries	To	otal	Ge	neral	Pri	vate
Nun	ıber	Percent	Number	Percent	Number	Percent
1. Assisting	20	19.6	19	21.8	1	6.7
(Mauriceau)						
2. Assisting	0	0.0	0	0.0	0	0.0
(Piper Forceps)						
3. Total Extraction	7	6.9	7	8.0	0	0.0
(Mauriceau-)						
4. Spontaneous Breech	n 2	2.0	2	2.3	0	0.0
5. Cesarean Section	73	71.5	59	67.8	14	93.3
Total	102	100.0	87	100.0	15	100.0

Total Cesarean Section Rate in Breech presentation 71.5 %

(General patients; 67.8 %, Private patients; 93.3 %)

FIGURE 13 Histogram : Distribution of modes of deliveries in breech presentation : general & private

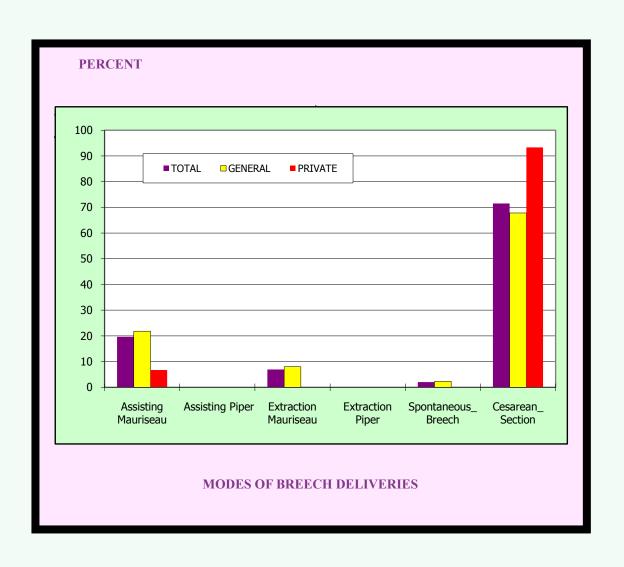


TABLE 20 Frequency of cesarean deliveries according to diagnostic indication (Singleton)

Inc	dications	Т	otal	Gene	eral	Priva	ate
	Nur	nber	Percent	Number	Percent	Number	Percent
1.	Previous C/S	141	31.8	101	30.0	40	37.7
2.	CPD	153	34.5	118	35.0	35	33.0
3.	Breech	73	16.5	59	17.5	14	13.2
4.	Fetal distress	27	6.1	22	6.5	5	4.7
5.	Placenta previa	15	3.4	10	3.0	5	4.7
6.	Face presentation	1	0.2	-	-	1	0.9
7.	Transverse lie	6	1.4	5	1.5	1	0.9
8.	Prolapsed cord	5	1.1	3	0.9	2	1.9
9.	HIV + ve	1	0.2	1	0.3	-	-
10	. Others*	21	4.7	18	5.3	3	2.8
	Total	443	100.0	337	100.0	106	100.0

^{*} Others = Vasa previa, IVF, Active herpes genialis, Fetal anomalies HELLP syndrome etc.

TABLE 21 Indications of forceps deliveries: general & private patients (Singleton)

]	Indications	Т	otal	Gene	eral	Priva	ate
	I	Number	Percent	Number	Percent	Number	Percent
1.	Fetal distress	1	8.3	1	8.3	-	-
2.	Expected prolo second stage	nged 1	8.3	1	8.3	-	-
3.	Poor expulsive force & training		58.3	7	58.3	-	-
4.	Maternal disease	se 3	25.0	3	25.0	-	-
5.	Others (OPP, failed vaccuum,	etc)	-	-	-	-	-
	Total	12	100.0	12	100.0	-	-

TABLE 22 Indications of vacuum deliveries :
general & private patients (Singleton)

Indications	To	otal	Gene	eral	Priva	ate
N	Number	Percent	Number	Percent	Number	Percent
1. Fetal distress	11	7.1	7	6.3	4	9.3
2. Expected prolon second stage	ged 18	11.5	14	12.5	4	9.3
3. Poor expulsive force & training	74 5	47.7	45	40.2	29	67.4
4. Maternal disease (PIH, ect)	e 48	31.0	44	39.3	4	9.3
5. Others (OPP, OT	, etc) 4	2.5	2	1.8	2	4.6
Total	155	100.0	112	100.0	43	100.0

TABLE 23 Sex of Fetuses (Including Multiple Pregnancies)

Sex	Number	Percent
Male	1136	52.0
Female	1009	46.2
Unspecified	38	1.7
Total	2183	100.0

FIGURE 14 Histogram : Distribution of fetal sex (including twins)

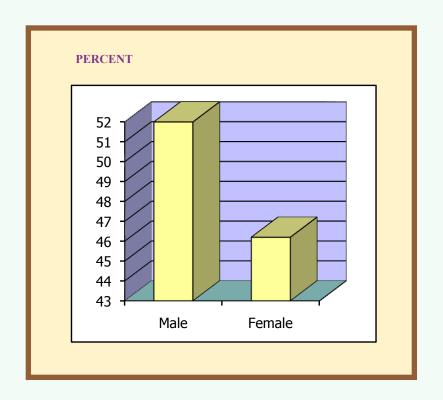


TABLE 24 Apgar score at 1 minute of total neonates

Apgar Scores	Number	Percent
0-3 (severe depression)	146	6.7
4-6 (mild depression)	123	5.6
7-10 (no depression)	1914	87.6
Total	2186	100.0

TABLE 25 Apgar score at 5 minutes of total neonates

Apgar Score	Number	Percent
0-3 (severe depression)	124	5.7
4-6 (mild depression)	21	1.0
7-10 (no depression)	2037	93.2
Total	2186	100.0

TABLE 26 Apgar score at 1 and 5 minutes of total neonates

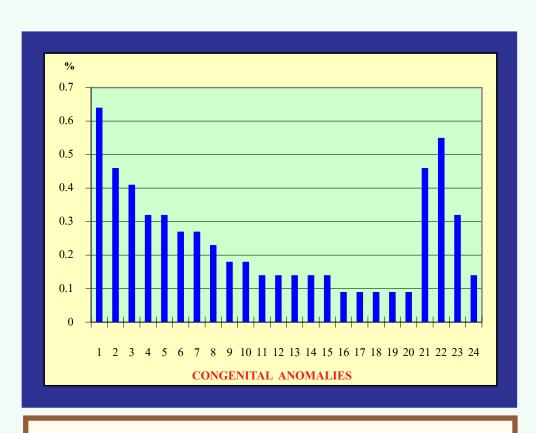
Apgar	1-Minute		5-Mi	nute
Score	Number	Percent	Number	Percent
0	111	5.1	114	5.2
1	14	0.6	5	0.2
2	7	0.3	1	0.0
3	14	0.6	4	0.2
4	15	0.7	2	0.1
5	51	2.3	8	0.4
6	57	2.6	11	0.5
7	101	4.6	22	1.0
8	183	8.4	48	2.2
9	892	40.9	190	8.7
10	738	33.8	1777	81.4
Total	2183	100.0	2186	100.0

TABLE 27 Prenatal sonographic diagnosis of anomalies*

Cor	ngenital Anomalies N	Number	Percent
Non c	hromosome-related anomaly		
1.	Hydrops fetalis (frank)	14	0.64
	Hb Bart's	6	
	Cystic hygroma	4	
	Others (hemolysis, heart disea	ase) 4	
2.	Multiple malformations	10	0.46
3.	Congenital heart disease	9	0.41
4.	Gastroschisis	7	0.32
5.	Abnormalities of extremities	7	0.32
6.	Cystic hygroma	6	0.27
7.	Hydrocephalus	6	0.27
8.	Hydroneprosis (frank)	5	0.23
9.	Porencephaly / Hydranencephaly	4	0.18
10.	Omphalocele	4	0.18
11.	Small bowel obstruction	3	0.14
12.	Isolated cleft lip, cleft palate	3	0.14
13.	Anencephaly & exencephaly	3	0.14
14.	Cephaloccele	3	0.14
15.	Holoprosencephaly	3	0.14
16.	Sacrococcygeal teratoma	2	0.09
17.	Diaphragmatic hernia	2	0.09
18.	Other brain disorders	2	0.09
19.	Bladder outlet obstruction	2	0.09
20.	Cystic adenomatoid malformation	s 2	0.09
21.	Others	10	0.46
Chron	nosome-related Anomaly (structure	es)	
22.	Trisomy 21	12	0.55
<i>23.</i>	Trisomy 18	7	0.32
24.	Othes chromosomes	3	0.14
	Total	129	5.90

^{*} Only diagnosed after 20 weeks and terminated at Maharaj Nakorn Chiag Mai, Most were referred cases

FIGURE 15 Histogram: Number of fetal congenital anomalies (not including chromosomal abnormalities)



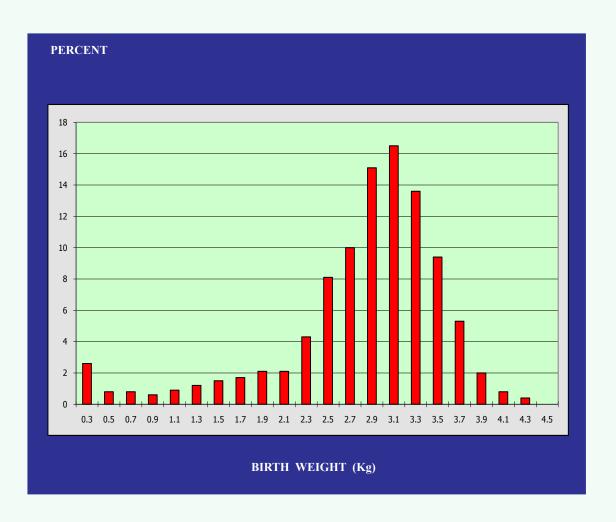
Hydrops fetalis (frank) 13 Anencephaly & exencephaly 1 2 Multiple malformations 14 Cephaloccele 3 Congenital heart disease 15 Holoprosencephaly 4 Gastroschisis 16 Sacrococcygeal teratoma 5 Abnormalities of extremities 17 Diaphragmatic hernia 6 Cystic hygroma 18 Other brain disorders 7 Hydrocephalus 19 Bladder outlet obstruction 8 Hydroneprosis (frank) 20 Cystic adenomatoid malformations 9 Porencephaly / Hydranencephaly 21 Others 10 Omphalocele 22 Trisomy 21 11 Small bowel obstruction 23 Trisomy 18 12 Isolated cleft lip, cleft palate 24 Othes chromosomes

TABLE 28 Number and percentage of neonates by birth weight*

Birth Weight (grams)	Number	Percent
< 400	57	2.6
400-599	18	0.8
600-799	17	0.8
800-999	14	0.6
1000-1199	20	0.9
1200-1399	27	1.2
1400-1599	33	1.5
1600-1799	37	1.7
1800-1999	45	2.1
2000-2199	45	2.1
2200-2399	93	4.3
2400-2599	176	8.1
2600-2799	217	10.0
2800-2999	329	15.1
3000-3199	360	16.5
3200-3399	297	13.6
3400-3599	204	9.4
3600-3799	115	5.3
3800-3999	44	2.0
4000-4199	18	0.8
4200-4399	9	0.4
4400-4599	1	0.0
Total	2176	100.0

^{*} *Including therapeutic termination of pregnancy*

FIGURE 16 Histogram : Percentage of neonates at various points of birth weight



^{*} Including therapeutic termination of pregnancy

TABLE 29 Number and percentage of neonates by birth weight group (total)

Birth Weight (grams)	Number	Percent
Extremely low birth weight (< 100	0) 93	4.3
Very low birth weight (1000-1499)	66	3.0
Low birth weight (1500-2499)	324	14.8
Average birth weight (2500-3999)	1652	75.6
Macrosomia (> 4000)	28	1.3
Total	2186	100.0

^{*} Including therapeutic termination of pregnancy

Average Birth Weight of Total Infants 2852±679 grams range 330-4580 grams

FIGURE 17 Histogram : Percentage of neonates among various birth weight groups

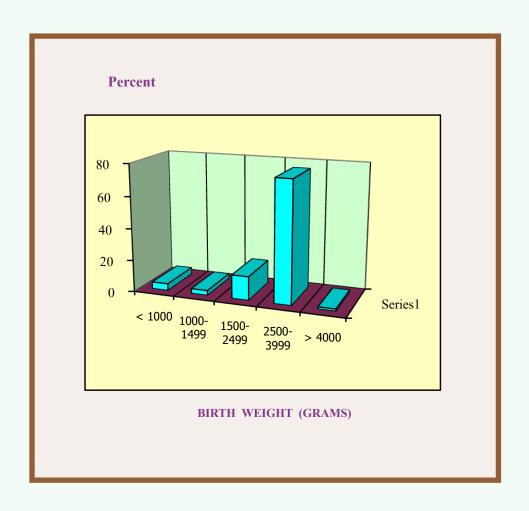


TABLE 30 Fetal weight (grams): the 10th, 50th, 90th percentile at various gestational age

Gestational Age (weeks)	Weight (grams) 10th Percentile	Weight (grams) 50th Percentile	Weight (grams) 90th Percentile
20	236.00	350.00	660.00
21	250.00	445.00	
22	300.00	525.00	
23	400.00	600.00	
24	690.00	735.00	
25	290.00	850.00	
26	582.00	900.00	1166.00
27	800.00	960.00	
28	983.00	1190.00	1838.00
29	868.00	1300.00	1682.00
30	1072.00	1470.00	1900.00
31	1228.00	1495.00	2260.00
32	1179.00	1620.00	2156.00
33	1588.00	1960.00	2726.00
34	1700.00	2350.00	2771.00
35	1982.00	2400.00	3012.00
36	2144.00	2600.00	3174.00
37	2400.00	2850.00	3355.00
38	2550.00	3050.00	3550.00
39	2700.00	3150.00	3608.00
40	2800.00	3250.00	3749.00
41	2788.00	3350.00	3857.00
42	2770.00	3300.00	

FIGURE 18 Graph: The 10th, 50th, 90th percentiles of fetal weight at various gestational age

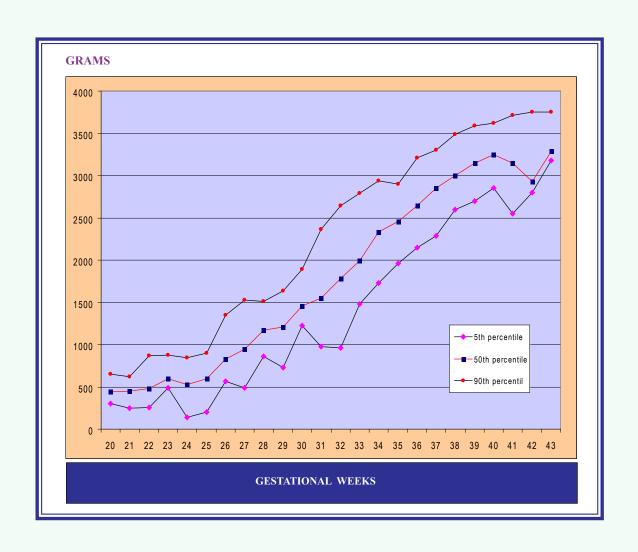


TABLE 31 Means and standard deviation of birth weight at various gestational age

Gestational Age (weeks)	Number of Neonates	Means (grams)	Standard Deviation
20	18	410	199
21	8	418	83
22	6	580	283
23	3	533	115
24	3	635	63
25	6	748	341
26	13	883	192
27	3	946	140
28	16	1268	398
29	13	1276	262
30	28	1501	372
31	20	1585	385
32	38	1651	412
33	43	2062	443
34	52	2281	420
35	67	2462	422
36	121	2637	400
37	364	2868	392
38	491	3050	396
39	431	3150	351
40	280	3258	371
41	98	3292	446
42	7	3417	481

TABLE 32 Means and standard deviation of birth weight at various gestational age (twins)

Gestational Age (weeks)	Number of Twin Sets	Means (grams)	Standard Deviation
28	6	1119	152
29	4	1107	292
30	6	1369	321
31	4	1451	197
32	16	1576	336
33	10	1788	282
34	4	1860	172
35	6	2124	132
36	6	2285	316
37	4	2490	167
38	2	2400	169
39	4	2730	340

TABLE 33 Comparison of birth weight (singleton & twins)

Туре	Means Birth Weight	Standard Deviation	Range
Singleton	2893	653	330-4580
Twins	1727	509	640-2850

TABLE 34 Comparison of gestational age (singleton & twins)

Туре	Means Gestational Age	Standard Deviation	Range
Singleton	37.36	3.4	20-42
Twins	32.94	3.0	28-39

TABLE 35 Early postpartum hemorrhage

Cause	Number	Percent
Uterine Atony	18	0.84
Lacerations	5	0.23
Retained Pieces of Placenta	8	0.37
Placenta Adherens	5	0.23
Uterine infection	4	0.19
Total	40	1.87

Section III

HIGH RISK PREGNANCIES

TABLE 36 Major complications during pregnancy

Complications	Numbers	Prevalence (%)
Diabetes mellitus	169	7.88
Previous cesarean section	160	7.46
Small-for-gestational Age (SGA)	158	7.22
Hepatitis B antigen positive	148	6.90
Pregnancy-induced hypertension (PIH)	143	6.67
Prolonged PROM (> 18 hours)	58	2.71
Asthma	28	1.31
Placenta previa	24	1.12
Chronic Hypertension	23	1.07
Iron deficiency anemia	22	1.03
Anti-HIV positive	19	0.89
Upper urinary tract Infection	17	0.79
Marked obesity	16	0.75
Thyrotoxicosis	14	0.65
Myoma Uteri	14	0.65
Heart Disease	25	1.17
Thalassemia	15	0.70
Chorioamnionitis	10	0.47
Renal diseases	8	0.37
Epilepsy	6	0.28
SLE	6	0.28
Genital tract infection	6	0.28
Abruptio placentae	4	0.19
Autoimmune thrombocytopenia	4	0.19
Ovarian tumor	3	0.14

Pregnancy with Heart Disease

Total 25 cases (1.17 percent of total parturients)

All were singleton

(not included 3 cases of therapeutic abortion)

Age range 17-37 years

average 26.4±6.2 years

age of 35 years or more 3 cases (12.0 %)

Functional Class (At delivery 25 cases)

Class II 13 cases
Class III 8 cases
Class III 4 cases
Class IV - case

Gestational Age at Birth

range 26-40 weeks (not included therapeutic abortion) average 36.9±2.8 weeks premature delivery (before completed 37 weeks) 9 cases (36.0 %)

Birth Weight

range 1050-3590 grams average 2739±565 grams number of low birth weight fetus (less than 2,500 grams) 5 cases (20.0 %)

Apgar Scores at 1 minute (less than 7) 3 cases (12.0 %)

Apgar Scores at 5 minutes (less than 7) 2 cases (8.0 %)

Small-for-gestational-age (less than 10th percentile) 3 cases (15.0 %)

Perinatal death 2 cases (8.0 %) (immaturity)

Congenital Anomalies

Other complications (No maternal death)

Diabetes mellitus 3 cases
Hepatitis B surface antigen positive 3 cases
Pregnancy-induced hypertension 2 cases
Previous cesarean section 1 case

Pregnancy with Diabetes Mellitus

Total 169 cases (7.88 percent of total parturients)

(Singleton: 168, Triplet: 1)

Note: Glucose challenge test was used as a screening test only in women at risk for diabetes melitus and age > 30 yr.

Age range 19-42 years

average 32.1±4.9 years

age of 35 years or more 55 cases (32.6 %)

Gestational Age at Birth

range 20-41 weeks average 37.5±2.9 weeks premature delivery (before completed 37 weeks) 32 cases (18.9 %)

Birth Weight

range 150-4230 grams average 3007±590 grams number of low birth weight fetus (less than 2,500 grams) 23 cases (13.6 %) Apgar Scores at 1 minute (less than 7) 16 cases (9.5 %)

Apgar Scores at 5 minutes (less than 7) 3 case (1.8 %)

Small-for-gestational-age (less than 10th percentile) 13 cases (7.7 %)

Perinatal Death 3 cases (1.8 %)

Congenital Anomalies 2 cases (1.2 %) (cystic hygroma, hydronephrosis)

Other complications

Pregnancy-induced hypertension 16 cases Previous cesarean section 15 cases Hepatitis B antigen positive 14 cases Chronic hypertension 7 cases Asthma 6 cases Prolonged PROM (> 18 hours) 4 cases Hearth disease 3 cases Condyloma 2 cases 2 cases Myoma uteri Placenta previa 2 cases Oligohydramnios 2 cases Polyhydramnios 2 cases **Epilepsy** 1 case Iron defeciciency anemia 1 case Thalassemia 1 case Upper urinary tract infection 1 case

Classifications

Pregestational DM (diagnosed before pregnancy)	28 cases (16.6 %)
Chemical DM (Class A)	2 cases
Overt DM (Class B-T)	26 cases
Class B	21 cases
Class D, F, R	5 cases
Gestational DM (diagnosed during pregnancy)	141 cases (83.4 %)
Chemical DM (Class A1)	101 cases
Overt DM (Class A2)	40 cases

Method of Glucose Control

Insulin 69 cases
Oral hypoglycemic drugs 4 cases
Oral hypoglycemic drugs & Insulin - cases
Diet Control only 96 cases

Pregnancy with Thalassemia

Total 15 cases (0.70 percent of total parturients)

(All were singleton)

(Including only the patients with hemoglobin less than 10 gm%)

Type of Thalassemia

β-thalassemia / HbE
 alpha-thalassemia (HbH disease)
 be cases
 cases
 description
 description</

Age range 18-37 years

average 28.6±5.1 years

age of 35 years or more 1 cases (6.7 %)

Gestational Age at Birth

range 21-39 weeks average 36.2±4.5 weeks premature delivery (before completed 37 weeks) 3 case (20.0 %)

Birth Weight

range 400-3650 grams average 2407±768 grams number of low birth weight fetus (less than 2,500 grams) 7 cases (46.7 %)

Apgar Scores at 1 minute (less than 7) 3 cases (20.0 %)

Apgar Scores at 5 minutes (less than 7) 2 case (13.3 %)

Small-for-gestational-age (less than 10th percentile) 4 cases (26.7 %)

Perinatal death 2 cases (13.3 %)

Other complications

Diabetes mellitus1 casesOligohydramnios2 casesUrinary tract infection1 case

Pregnancy with Thyrotoxicosis

Total 14 cases (0.65 percent of total parturients)

All were singleton

Diagnosed before pregnancy 8 cases
Diagnosed during pregnancy 6 cases

Age range 24-40 years average 32.6±4.8 years age of 35 years or more 6 cases (42.9 %)

Gestational Age at Birth

range 20-40 weeks average 35.9±7.2 weeks premature delivery (before completed 37 weeks) 3 cases (21.4 %)

Birth Weight

range 250-3750 grams average 2753±1137 grams number of low birth weight fetus (less than 2,500 grams) 3 cases (21.4 %)

Apgar Scores at 1 minute (less than 7) 2 cases (14.3 %)

Apgar Scores at 5 minutes (less than 7) 2 cases (14.3 %)

Small-for-gestational-age (less than 10th percentile) 2 cases (14.3 %)

Perinatal death 2 cases (14.3%, anomaly)

Congenital Anomalies 1 case: Trisomy 21

Other complications

Previous cesarean section5casesHepatitis B surface antigen2casesPregnancy-induced hypertension2casesOligohydramnios1caseSkin disease1case

Pregnancy with Hepatitis B Antigen Positive

Total 148 cases (6.90 percent of total parturients)

(singleton: 145; twins: 3)

Age range 13-47 years

average 27.9±6.1 years

age of more than 35 years 17 cases (11.3 %)

Gestational Age at Birth

range 21-42 weeks

average 36.8±4.7 weeks

premature delivery (before completed 37 weeks)

29 cases (19.6 %)

Birth Weight range 450-4580 grams

average 2812±771 grams

number of low birth weight fetus (less than 2,500 grams)

26 cases (17.6 %)

Apgar Scores at 1 minute (less than 7) 12 cases (8.1 %)

Apgar Scores at 5 minutes (less than 7) 3 cases (2.0 %)

Small-for-gestational-age (less than 10th percentile) 12 cases (9.7 %)

Perinatal Death 4 cases (2.7 %) (dead in utero 3 cases)

Congenital Anomalies 1 cases (Prune-Belly syndrome, beta-thal/HbE disease)

Other complications

Diabetes melitus	14	cases
Previous cesarean section	11	cases
Pregnancy-induced hypertension	10	cases
Heart disease	3	cases
Prolonged PROM (> 18 hours)	3	cases
Thyrotoxicosis	2	cases
Asthma	1	case
Chronic hypertension	1	case
anti-HIV positive	1	case
Oligohydramnios	1	case
Placenta previa	1	case
Urinary tract infection	1	case

Pregnancy with Asthma

Total 28 cases (1.31 percent of total parturients) (All were singleton)

Activity of Disease

Well-controlled 30 cases Poorly-controlled 7 cases

Age range 17-40 years average 28.9±6.0 years age of 35 years or more 6 cases (21.4%)

Gestational Age at Birth

range 37-41 weeks average 38.6±1.2 weeks premature delivery (before completed 37 weeks) 0 cases (0.0 %)

Birth Weight (not included abortion)

range 2250-4100 grams average 3034±427 grams number of low birth weight fetus (less than 2,500 grams) 2 cases (7.1 %)

Apgar Scores at 1 minute (less than 7) 4 cases (14.3%)

Apgar Scores at 5 minutes (less than 7) 1 case (3.6 %)

Small-for-gestational-age (less than 10th percentile) 2 cases (7.1%)

Perinatal death 1 case (3.6 %)

Congenital Anomalies 0 case (0.0 %; multiple malformations)

Other complications

Diabetes mellitus6casesPregnancy-induced hypertension2casesProlonged rupture of membranes2casesHepatitis B surface antigen1caseIron deficiency anemia1case

Pregnancy with Chronic Hypertension

23 cases (1.07 percent of total parturients) **Total** (All were singleton) Severity of Hypertension Severe (start treatment during pregnancy) 3 cases 8 Severe (controlled prior to pregnancy) cases Mild (no medication BP less than 160/90) 8 cases Mild (BP less than 160/90 but treated 4 cases with antihypertensive drug) range 23-42 years Age average 34.1±5.9 years age of 35 years or more 12 cases (52.2 %) Gestational Age at Birth range 30-39 weeks average 36.8±2.1 weeks premature delivery (before completed 37 weeks) 3 cases (13.0%) Birth Weight range 1220-3800 grams average 2764±665 grams number of low birth weight fetus (less than 2,500 grams) 7 cases (30.4 %) Apgar Scores at 1 minute (less than 7) 1 cases (4.3 %)

Apgar Scores at 5 minutes (less than 7) 0 cases (0.0 %)

Small-for-gestational-age (less than 10th percentile) 5 cases (21.7 %)

Perinatal death -

Congenital Anomalies -

Other complications

Diabetes mellitus7casesPregnancy-aggravated hypertension6casesMarked obesity5casesHepatitis B surface antigen1casePrevious cesarean section1case

Pregnancy-induced Hypertension

Total 143 (6.67 percent of total parturients)

(Singleton: 138, Twins: 5)

Age range 16-42 years

average 29.8±6.3 years

age of 35 years or more 38 cases (26.6 %)

Gestational Age at Birth

range 22-42 weeks

average 36.6±3.3 weeks

premature delivery (before completed 37 weeks)

46 cases (32.4 %)

Classification of PIH

Gestational hypertension 48 cases (33.6 %) (without proteinuria) Mild Preeclampsia 61 cases (42.7 %) Severe Preeclampsia 26 cases (18.2 %) Pregnancy-aggravated hypertension 6 cases (4.2 %) Eclampsia 2 cases (1.4 %) First eclamptic attack before admission 2 cases First eclamptic attack after admission 0 case No ANC at Maharaj Nakorn Chiang Mai 2 cases ANC at Maharaj Nakorn Chiang Mai 0 case

Birth Weight range 550-4350 grams

average 2671±691 grams

number of low birth weight fetus (less than 2,500 grams)

46 cases (32.4 %)

Apgar Scores at 1 minute (less than 7) 25 cases (17.5 %)

Apgar Scores at 5 minutes (less than 7) 11 cases (6.3 %)

Small-for-gestational-age (less than 10th percentile) 23 cases (19.5 %)

Perinatal death 5 cases (3.5 %)

Congenital Anomalies

Gastroschisis1caseMultiple anomalies1caseOmphalocele1caseHydrops fetalis1case

Other complications

Diabetes Mellitus	16	cases
Hepatitis B antigen positive	11	cases
Previous cesarean section	7	cases
Chronic hypertension	6	cases
Prolonged ruptured membranes	4	cases
Marked obesity	3	cases
Oligohydramnios	3	cases
Urinary tract infection	3	cases
Heart disease	2	cases
Systemic lupus erythromatosus	2	cases
Asthma	2	cases
Thyrotoxicosis	2	cases
Transverse lie	2	cases
Iron deficiency	1	case
Placental previa	1	case
Anti-HIV positive	1	case
Myoma uteri	1	case
Condyloma acuminata	1	case

Placenta Previa

Total 24 cases (1.12 percent of total parturients)

All were singleton

Age range 19-40 years

average 31.0±5.9 years

age of 35 years or more 9 cases (37.5 %)

Gestational Age at Birth

range 20-41 weeks average 33.8+5.0 weeks

premature delivery (before completed 37 weeks)

12 cases (48.0 %)

Birth Weight range 800-4200 grams

average 2433±954 grams

number of low birth weight fetus (less than 2,500 grams)

11 cases (45.8 %)

Apgar Scores at 1 minute (less than 7) 6 cases (25.0 %)

Apgar Scores at 5 minutes (less than 7) 3 cases (12.5 %)

Small-for-gestational-age (less than 10th percentile) 5 cases (20.8 %)

Perinatal death 4 cases (16.7 %; 4 were immature, 1 dead in utero)

Congenital Anomalies 2 case (exencephaly, hydrops fetalis)

Other complications

Previous cesarean section 6 cases
Diabetes mellitus 2 cases
Pregnancy-induced hypertension 1 case
Transverse lie 1 case
Hepatitis B surface antigen positive 1 case
Iron deficiency anemia 1 case
Myoma uteri 1 case
Urinary tract infection 1 case

Pregnancy with Acute Pyelonephritis

Total 17 cases (0.79 percent of total parturients)

(16 singleton, 1 twin pregnancy)

Age range 17-37 years

average 27.0±5.3 years

age of more than 35 years 2 cases (11.8 %)

Gestational Age at Birth

range 20-41 weeks

average 31.9±6.7 weeks

premature delivery (before completed 37 weeks)

12 cases (70.6 %)

Onset

First trimester	1	cases
Second trimester	6	cases
Third trimester	9	cases
Postpartum	1	case

Number of Episodes

1	11	cases
2	4	cases
3	2	case

Birth Weight range 860-3270 grams

average 1951±922 grams

number of low birth weight fetus (less than 2,500 grams)

9 cases (52.9 %)

Apgar Scores at 1 minute (less than 7) 5 cases (29.4 %)

Apgar Scores at 5 minutes (less than 7) 3 cases (17.6 %)

Small-for-gestational-age (less than 10th percentile) 2 cases (9.1 %)

Perinatal death 3 case (17.6%) (immaturity)

Congenital Anomalies 2 cases (Hydrops fetalis)

Other complications

Iron deficiency 4 cases Pregnancy-induced hypertension 3 cases Placenta previa 2 cases Previous cesarean section 2 cases Chorioamnionitis 2 cases Diabetes mellitus 2 cases Hepatitis B surface antigen positive 1 case Thalassemia 1 case Polyhydramnios 1 case

Small-for-Gestational-Age Fetuses

Birthweight less than 10th percentile

Total 158 (7.22 percent of total babies; 2186 fetuses)
Singleton 135 fetuses

Multiple pregnancies 23 fetuses

Age range 15-45 years

average 28.7±6.5 years age of 35 years or more 30 cases (18.9 %)

Gestational Age at Birth

range 25-41 weeks average 34.7±7.9 weeks

premature delivery (before completed 37 weeks)

30 cases (18.9 %)

Birth Weight range 250-2620 grams

average 2188±712 grams

number of low birth weight fetus (less than 2,500 grams)

135 cases (85.4 %)

Apgar Scores at 1 minute (less than 7) 32 cases (20.3 %)

Apgar Scores at 5 minutes (less than 7) 9 cases (5.7 %)

Perinatal Death 6 in 158 cases (3.80 %)

Congenital Anomalies

Chromosmal abnormalities 5 cases
Suspected of intrauterine infection 5 cases
Twin transfustion syndrome 4 cases
Multiple anomalies 3 cases
Congenital heart disease 2 cases
Gastroschisis 1 case
Omphalocele 1 case

Other complications

Pregnancy-induced hypertension 23 cases Poor maternal weight gain 20 cases Medical diseases 25 cases

Pregnant women with HIV infection

Pregnant women with HIV infection at Maharaj Nakorn Chiang Mai Hospital (1989-1997) 1989-1996--> No ANC screening for anti HIV antibody 1997-now--> Voluntary screening for anti-HIV antibody among pregnant women and their husbands and antiviral prescription for +ve female cases

TABLE 37 Pregnant women with positive HIV antibody at

Maharaj Nakorn Chiang Mai (1998-2008)

	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008
No. of Deliveries		3034	3105	3103	2815	2753	2628	2420	2013	2212	2144
No. of women wit	:h 90	55	36	38	25	39	29	20	41	37	19
Deliveries	90 79	49	35	35	25	39	26	19	39	37	19
Therapeutic	19	42	33	33	23	39	20	19	39	31	19
abortion	10	7	1	2	_	_	3	1	2	_	_
Spontaneous											
abortion	-	-	-	1	-	-	-	-	-	-	-
Illegal											
abortion	-	1	1	1	-	-	-	-	-	-	-

TABLE 38 Voluntary screening (2008) among pregnant women for anti-HIV antibody

Pregnant women (Counselling)	1,659	cases
Voluntary screening	1,614	cases
+ve anti-HIV antibody	22	cases
% positive case	1.36	%

TABLE 39 Age of pregnant women with positive HIV at

Maharaj Nakorn Chiang Mai (2008)

Age (years)	No. of cases	Percent
15-19	1	5.3
20-24	5	26.3
25-29	7	36.8
30-34	4	21.1
35-39	2	10.5
40-45	-	-
Total	19	100
Mean age (years)	27.21	
Standard deviation	4.66	
Range	18-35	years

TABLE 40 Parity of the pregnant women with positive HIV at Maharaj Nakorn Chiang Mai (2008)

Parity	No. of cases	Percent
0	10	35.1
1	7	46.0
2	2	13.5
≥ 3	-	-
Total	19	100

TABLE 41 Age at first marriage of pregnant women with positive HIV at Maharaj Nakorn Chiang Mai (2008)

Age (years)	No. of cases	Percent
15-19	5	26.3
20-24	5	26.3
25-29	1	5.3
30-34	1	5.3
Unknown	7	36.8
Total	19	100
Mean age (years)	20.0	
Standard deviation	4.79	
Range	<i>15-30</i>	years

TABLE 42 Number of marriages of the pregnant
women with positive HIV at Maharaj
Nakorn Chiang Mai (2008)

Number	No. of cases	Percent
1	7	36.8
2	9	47.4
3	2	10.5
5	1	5.3
Total	19	100

TABLE 43 Occupations of the pregnant women with positive
HIV at Maharaj Nakorn Chiang Mai (2008)

Occupations	No. of cases	Percent
Employee	9	47.4
Housewife	3	15.8
Commercial	4	21.0
Officer	1	5.3
Others	2	10.5
Total	19	100

TABLE 44 Residence (province) of the pregnant women with positive HIV at Maharaj Nakorn Chiang Mai (2008)

Province	Number	Percent
Chiang Mai (เชียงใหม่)	16	84.2
Lamphun (ลำพูน)	2	10.5
Chiangrai (เชียงราย)	1	5.3
Total	19	100

TABLE 45 Complications of the pregnant women with positive
HIV at Maharaj Nakorn Chiang Mai (2008)

	Cases	Percent
Without complication	11	57.9
With complication	8	42.1
Antepartum	8	
 Intrapartum 	-	
 Postpartum 	-	

TABLE 46 Birth weight in the pregnant women with posi-tive HIV at Maharaj Nakorn Chiang Mai (2008)

Birth weight (grams)	Number	Percent		
< 1,499	1	7.3		
1,500 - 1,999	2	4.9		
2,000 - 2,499	3	9.7		
2,500 - 2,999	6	53.7		
3,000 - 3,499	5	19.5		
3,500 - 3,999	2	4.9		
Total	19	100		
Mean birthweight (gram		2,791.05		
Standard deviation (gran	ns)	579.91		
Range (grams)	14	1470-3,800		

TABLE 47 Postpartum contraception of pregnant women with positive HIV at Maharaj Nakorn Chiang Mai (2008)

Method	No. of cases	Percent
Female sterilization	8	42.1
DMPA	1	5.3
Combined pills	4	21.0
Unknown	6	31.6
Total	19	100

Section IV

PRENATAL INVESTIGATION

Antepartum Fetal Testing

Primary Surveillance

Fetal Movement Count: For low-risk and high-risk pregnancies

Non-stress test

or Acoustic stimulation test 1392 tests

(OPD, 1277; LR, 95; OB2&3, 20)

Secondary Surveillance

Contraction stress test

or Nipple stimulation test 8 tests Biophysical profile/ultrasonography 80 tests Doppler velocimetry 350 tests

Prenatal Diagnosis

1. Ultrasonography 8,766 examinations (~25 % for gynecologic and infertile examinations)

2. Amniocentesis 1,300 cases3. Cordocentesis 439 cases

4. Chorionic villous sampling 120 procedures

OBSTETRIC ULTRASOUND SERVICE

Number of Patients undergoing sonographic examinations (OB&GYN) in 2,008 8,766 cases
Several examinations invovled in the researches without specific indications

Indications for sonographic examinations

Uncertained date of gestation	10.4	%
uterine size incompatible with gestational	age	
unrecognized last menstrual period		
Suspected intrauterine growth retardation	3.9	%
Bleeding in first half of pregnancy	2.0	%
Antepartum hemorrhage	0.3	%
Suspected fetal death	0.3	%
Rule out fetal anomalies	32.0	%
Fetal growth surveillance	8.7	%
twins, intrauterine growth restriction		
diabetic mother, mother complicated with		
medical diseases		
Gynecologic ultrasound	24.8	%
Infertility investigation	5.1	%
Perinatal research	6.1	%
Screening in menopausal women	6.4	%

Cordocentesis (2008)

Total 439 cases

Indications

		No.	(%)
1.	Previous child with hydrops fetalis	4	(0.9)
2.	Pregnancy at risk for Hb Bart's	65	(14.8)
3.	Pregnancy with early signs of hydrops fetus	6	(1.4)
4.	Previous child with β thal major	5	(1.1)
5.	Pregnancy at risk for β thal major	46	(10.5)
6.	Previous child with β thal Hb/E	11	(2.5)
7.	Pregnancy at risk for β thal Hb/E	144	(32.8)
8.	Chromosome analysis	59	(13.4)
9.	Combined chromosome and risk for Hb Bart's,	51	(11.6)
	β thal major and β thal Hb/E		
10.	Combined chromosome and Previous child with	8	(1.8)
	Hb Bart's, β thal major and β thal Hb/E		
11.	Combined chromosome analysis and uncertain OFT	23	(5.2)
12.	Uncertain OFT	3	(0.7)
13.	Repeat for chromosome confirmation	12	(2.7)
14.	Repeat for hemoglobin typing	2	(0.5)
	Total	439	cases

Amniocentesis (2008)

Total 1,300 cases

Indications

1.	Elderly gravida (age of more than 35 years)	1274	cases
	with no other obvious risk	1273	cases
	with previous child with Down syndrome	1	case
2.	Pregnancy with -ve serum markers / sonomarkers	9	cases
3.	Pregnancy with Down syndrome in previous child	8	cases
4.	Pregnancy with abnormal chromosomes in previous chi	ld 3	cases
5.	Pregnancy with fetal anomaly in previous child	2	cases
6.	Pregnancy with previous child of other mental deficiency	y 2	cases
7	Others	4	cases

Chorionic Villous Sampling (2008)

Total 120 procedures (119 cases; 1 twin pregnancy)

Indications

1.	Fetal chromosome study	42	cases
	Elderly gravida with no other obvious risk	3 <i>3</i>	cases
	Thickened nuchal translucency	3	cases
	Previous fetal trisomy	2	cases
	Previous fetal anomaly	2	cases
	Sonographic omphalocele	1	case
	Elderly gravida with other obvious risks	1	case
2.	Risk for fetal severe thalassemia	59	cases
	Fetal risk for Hb Bart's disease	23	cases
	Fetal risk for beta-thalassemia major	4	cases
	Fetal risk for beta-thalassemia/HbE disease	31	cases
	Fetal risk for Hb Bart's & b-thalassemia/HbE disease	1	cases
3.	Fetal chromosome & thalassemia diagnosis	19	cases
	Elderly gravida with fetal risk for beta-thal/HbE	8	cases
	Elderly gravida with fetal risk for Hb Bart's disease	5	cases
	Elderly gravida with fetal risk for beta-thal major	5	cases
	Others	1	cases

Prevention and Control Thalassemia Program

Chiang Mai strategy

- 1) Genetic counseling
- 2) Identificaion of pregnancy at risk
 - 2.1 Retrospective screening (history review for known risk)
 - 2.2 Prospective screening

Screening test

2 min OF (2-minute osmotic fragility test)

HbE screening test (only if 2 min OF is negative)

Diagnostic test (if both of the couple are positive screening test)

HbA₂ level & PCR for α-thal1 if 2 min OF is positive

HbA₂ level (negative 2 min OF but positive Hb E)

- 3) Prenatal diagnosis for pregnancy at risk
 - 3.1 Prenatal counseling
 - 3.2 Cordocentesis (16-22 weeks of gestation)
 - 3.3 Fetal blood analysis (checking maternal blood with acid elution test and hemoglobin typing with HPLC)
- 4) Counseling and termination of affected pregnancy

$$+ve \ OFT = OFT < 60\%, +ve \% \ HbA2 = HbA2 > 4\%$$

PROSPECTIVE SCREENING FOR THALASSEMIA PROGRAM 2008

Total number of pregnant screened	1,580	cases
Positive OFT or Hb E	633	cases
Number of couple at risk for thalassemia	32	couples
O Risk for Hb Bart's	11	cases
O Risk for Beta-Thalassemia major	4	cases
O Risk for Beta-Thal HbE	16	cases
O Risk for Hb Bart's & Beta-Thal HbE	1	case
The choice which selected by couples		
o Cordocentesis	14	cases
 Chorionic villous samplings 	10	cases
 No information 	4	cases
 Abortion before selection 	1	cases
o Others	3	cases
Result of PND		
o Hb Bart's	3	cases
o Beta-Thalassemia major	-	case
o Beta-Thal HbE	5	cases

High Risk Pregnancy

Number of patients approximately 480 cases

Management Guideline

Screening high risk patients at ANC

High-risk Clinic

Indicated for Antepartum surveillance

Prenatal diagnosis

Admission

Closed monitoring both fetus and mother

High-risk patients at Maharaj Nakorn Chiang Mai Hospital in 2008

1.	Elderly Gravida (age of 35 years or more)	15.6 %
2	Teenage Pregnancy (age of less than 20 years)	9.4 %
	Early adolescence (age of less than 17 years)	1.5 %
	Late adolescence (age of 17-19 years)	7.9 %
3.	Pregnancy complicated with medical or obstetrical	
	diseases	8 5 %

Note Some high-risk pregnancies were not included in the high-risk clinic and in this report e.g. maternal short stature, breech presentation, and previous cesarean section.