

# Pregnancy Outcome in Women with Systemic Lupus Erythematosus treated with Hydroxychloroquine: A 10-year Experience

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## ABSTRACT

**Objective:** To determine the outcomes in pregnant women with Systemic Lupus Erythematosus who received treatment with hydroxychloroquine in Universiti Kebangsaan Malaysia Medical Centre. **Methods:** This was a retrospective study involving all pregnant women with Systemic Lupus Erythematosus who had antenatal follow up and delivery in Universiti Kebangsaan Malaysia Medical Centre between the 1st January 2007 and 1st January 2017. Data collection was performed using medical case notes and laboratory investigations. Study population was categorised into two groups based on the use of hydroxychloroquine during pregnancy. **Results:** There was a total of 82 pregnancies included with 47 (57.3%) in the hydroxychloroquine group and 35 (42.7%) in the non-hydroxychloroquine group. Amongst the hydroxychloroquine users, there were significantly more pregnancies with musculoskeletal involvement ( $p=0.03$ ), heavier mean neonatal birth weight ( $p=0.02$ ) and prolonged duration of pregnancy ( $p=0.001$ ). In the non-hydroxychloroquine users, there were significantly higher rate of recurrent miscarriages ( $p=0.003$ ), concurrent medical illness ( $p=0.005$ ), more pregnancies affected by hypertension ( $p=0.01$ ) and gestational diabetes mellitus ( $p=0.01$ ). Hydroxychloroquine use during pregnancy was protective against hypertension ( $p=0.001$ ) and the gestational age at delivery had significant effect on the neonatal birth weight ( $p=0.001$ ). However, the duration of the disease had significant negative effect on the neonatal birth weight ( $p=0.016$ ). **Conclusion:** The use of hydroxychloroquine led to improved neonatal outcomes due to reduction in the pregnancy complications such as hypertension and diabetes.

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# Maternal and Foetal Outcomes among Women with Precipitated Labour: A Cross-sectional Descriptive Study

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## ABSTRACT

**Objective:** To determine the prevalence of precipitated labour and its association with maternal and foetal outcomes. **Methods:** This was a retrospective study done in Hospital Kuala Lumpur. Women who delivered vaginally within three hours from admission were recruited (1st January 2016 till 31st December 2016) from delivery registry. Records of patients were traced and reviewed. Maternal and foetal outcomes were analysed. **Result:** The prevalence of precipitated labour was 1.9% (240 patients out of 12,379 vaginal births). The mean maternal age was 28.3±4.89 years. The mean gestational age for precipitated labour was 37.6±0.3 weeks. Based on BMI, the majority of them were obese (57%). There were associations with second degree perineal tear (52.1%) followed by first degree perineal tear (47.1%) and 3rd degree tear (0.8%). The mean of estimated blood loss was 307.29±87.85mls with no significant difference between pre and post-delivery haemoglobin levels. The mean of birth weight was 2.97 ± 0.41 kg. Majority (97.5%) of the newborn had good Apgar scores. There was a significant increased risk of perineal trauma in multiparae. A significant increased risk of poor neonatal Apgar score ( $p\leq 0.001$ ) and neonatal intubation within 24 hours ( $p\leq 0.001$ ) among those with precipitated labour who had induction of labour were seen. **Conclusion:** Among those women with precipitated labour, the majority was obese. The multiparae was associated with increased risk of perineal trauma and those women with induction of labour had increased risk of poor neonatal Apgar score and neonatal intubation within 24 hours.