

Prevalence and Characteristics of Preterm Deliveries at Salmaniya Medical Complex

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ABSTRACT

Background: A significant contributor to infant morbidity and mortality is preterm delivery, which is defined as delivery prior to 37 weeks of completed gestation (259 days). The purpose of this research was to identify risk factors for preterm delivery and the frequency with which it occurs.

Methodology: The Salmaniya Medical Complex in the Kingdom of Bahrain was the site of a cross-sectional study that lasted from January 2019 through June 2019. The study's sample size was 1,289 people. The study included all pregnant women who gave birth after the 20th week of gestation during that time. We did not include patients who were discharged or transferred to another hospital prior to delivery. During the analysis, the data was found. A significance level was established with a p-value lower than 0.05, and a 95% confidence interval was computed.

Results: The current study's findings indicated that the rate of preterm birth was 205 and 1084, and there was no discernible relationship between preterm birth and mother age. Neonatal weight and gestational age showed significant difference in relation to preterm birth. Frequency of preterm birth was significantly higher among multigravida women. i.e. (p-value=0.018). Nulliparous women had significantly higher frequency of preterm birth as compared to primi-parous and multiparous women. i.e. (p-value=0.031) Spontaneous delivery was significantly higher among women without preterm birth. i.e. Preterm birth (Yes:92.7% vs. No:98.5%, p-value<0.001). Rate of antenatal complications was significant higher among women who had preterm delivery. i.e. p-value<0.001. The antenatal complications among women were PROM, PIH, GDM and APH respectively. Maternal complications were seen in 18(8.8%) mother with preterm delivery (the most frequent maternal complication was hypothyroidism followed by diabetes, cardiac disease and asthma) and among 87(7.5%) mothers without preterm delivery (the most frequent maternal complication was hypothyroidism followed by diabetes, infective disease, cardiac disease, hypertension and renal disease respectively) (OR=1.192, p-value=0.519).

Conclusion: Preterm birth is a notable issue among women who give birth at Salmaniya Medical Complex in the country of Bahrain. Extended gestational diabetes mellitus (GDM), premature rupture of membranes (PROM), pregnancy-induced hypertension (PIH), and antepartum haemorrhage (APH) are distinct factors that contribute to preterm birth. Improving the management of these obstetric difficulties and doing research to understand the mechanisms through which they contribute to premature delivery provide a viable strategy for reducing the high rates of preterm birth.

Keywords: Prevalence, Preterm, Pregnancy.

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