

## **MULTIFETAL PREGNANCY: MATERNAL AND PERINATAL OUTCOME IN RSUP SARDJITO 2011-2015**

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### **ABSTRACT**

#### **Background**

The increase of multifetal pregnancy incidence nowadays caused by many factors, one of it by the successful result of assisted reproductive technology. Multifetal pregnancy is one of the high-risk pregnancies and associated with increased morbidity and mortality of mothers and fetuses, also can evolve into complications that may endanger mothers and fetuses.

#### **Objective**

To prepare a comprehensive overview of maternal and perinatal outcome in multifetal pregnancy in RSUP Sardjito.

#### **Method**

A non-experimental study design is used to investigate the maternal and perinatal outcome in multifetal pregnancy, using secondary data in form of medical record in RSUP Sardjito. Features include maternal outcome (gestational age, maternal obstetrical complication, and delivery method) and perinatal outcome (fetal birth weight, gender of the baby, APGAR score, fetal congenital anomalies, fetal death, fetal obstetrical complication). The data will be grouped according to the operational variable definition and serve the data in forms of tables.

#### **Result**

There were 273 selected multifetal deliveries (264 were twin, 8 were triplets, and 1 was quadruplet). Most common adverse maternal outcome was preterm deliveries (54.6%) followed by anemia (6.2%), premature rupture of membrane (5.1%), and preeclampsia (4.3%). The most common chosen method of delivery is caesarean section (48.3%) and followed by spontaneous vaginal birth (47.2%). The most common adverse perinatal outcome was neonatal asphyxia (86.2%), low birthweight (50.1%), and discordance in birthweight (10.5%).

#### **Conclusion**

Multifetal deliveries contribute to maternal and neonatal complications. Careful monitoring of mothers and fetal wellbeing throughout pregnancy is needed to improve maternal and perinatal outcome.

#### **Keyword**

Multifetal Pregnancy, Maternal Outcome, Perinatal Outcome

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### **INTISARI**

#### **LATAR BELAKANG**

Bertambahnya insiden kehamilan ganda belakangan ini banyak dipengaruhi oleh beberapa faktor, salah satunya yaitu dengan kesuksesan dari *assisted reproductive technology*. Kehamilan ganda merupakan salah satu kehamilan beresiko dan berasosiasi dengan kenaikan morbiditas dan mortalitas, juga dapat berkambang menjadi komplikasi yang dapat membahayakan ibu dan anak.

#### **TUJUAN**

Untuk menyiapkan gambaran komprehensif dari hasil akhir ibu dan anak pada kehamilan ganda di RSUP Sardjito

#### **METODE**

Studi *non-experiemntal* digunakan untuk menginvestigasi hasil akhir dari ibu dan anak pada kehamilan ganda, dengan menggunakan data sekunder dalam bentuk rekam medis dari RSUP Sardjito. Fitur ibu termasuk (umur gestational, komplikasi obstetrik ibu, dan metode kelahiran), dan anak (berat lahir bayi, APGAR score, kelainan kongenital bayi, twin-to-twin transfusion syndrome, dan kematian bayi). Data akan diklasifikasikan berdasarkan definisi *operational variable* dan akan disajikan dalam bentuk tabel.

#### **HASIL**

Terdapat 273 kehamilan ganda (264 merupakan kehamilan kembar dua, 8 merupakan kehamilan kembar tiga, dan 1 merupakan kehamilan kembar empat). Hasil akhir yang banyak terjadi dari sisi ibu adalah kelahiran prematur (54.6%), diikuti dengan anemia (6.2%), *premature rupture of membrane* (5.1%), dan preeklampsia (4.3%). Metode kelahiran yang paling banyak dipakai yaitu *caesarean section* (48.3%), lalu diikuti oleh *spontaneous vaginal birth* (47.2%). Hasil akhir yang banyak terjadi dari sisi bayi adalah asfiksi neonatal (86.2%), berat bayi lahir rendah (50.1%), dan *birthweight discordance* (10.5%).

#### **KESIMPULAN**

Kelahiran kehamilan ganda berkontribusi untuk komplikasi ibu dan anak. Monitor baik daripada ibu dan anak selama dan sesudah kehamilan sangatlah diperlukan untuk memperbaiki hasil akhir dari ibu dan anak

**KATA KUNCI:** Multifetal Pregnancy, Maternal Outcome, Perinatal Outcome