

EP.0275: Intensive Antenatal Monitoring and Pregnancy Outcomes after Previous Perinatal Deaths in Nigeria.

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•**Introduction:** Previous perinatal death is a significant predictor of recurrence, especially in low-and-middle-income-countries like Nigeria, where the Perinatal Mortality Rates (PMR) remain bothersome. This study evaluated the impact of an intensive antenatal monitoring and supervised delivery protocol on the outcome of the next pregnancy after a perinatal death among women that received care at the Obafemi Awolowo University Teaching Hospitals Complex, Nigeria.

•**Methods:** This is a prospective cohort study of all consenting pregnant women with history of previous perinatal deaths (PND) between Jan' 21 and Sept' 22. 75mg of aspirin was commenced between 12-16 weeks gestation for eligible women.

Anatomy scan and uterine artery Doppler were performed between 20-22 weeks gestation. Serial growth monitoring, with umbilical artery Doppler assessment was commenced from 26th week of pregnancy. Medical conditions such as hypertension and diabetes mellitus were meticulously managed.

•**Results:** Eighty-one women with 95 previous stillbirths and five early neonatal deaths (END) were managed within the study period. Sixty-four (79%), 15 (18.5%) and two women (2.5%) had one, two and three previous PNDs. The causes of PND were unexplained (41%), Obstructed labour (32%), FGR (17%), APH and PET (5%) each. In index pregnancy, 50% of the deliveries were

preterm, due to spontaneous preterm labour, hypertension and FGR, with a Caesarean section rate of 70%. There were five PNDs, due to abruptio placentae (2), preeclampsia (2) and uterine rupture (1), with a PMR of 61.7/1,000 births. Three (60%) of the PNDs were recorded in women that defaulted from the monitoring protocol.

Conclusion: Although the PMR remains high, given the appropriate antenatal surveillance and delivery supervision, pregnancy outcomes among women with previous PNDs in Nigeria can be significantly improved.