

Performance of FULLPIERS risk prediction in women with severe Pre-Eclampsia could save women life

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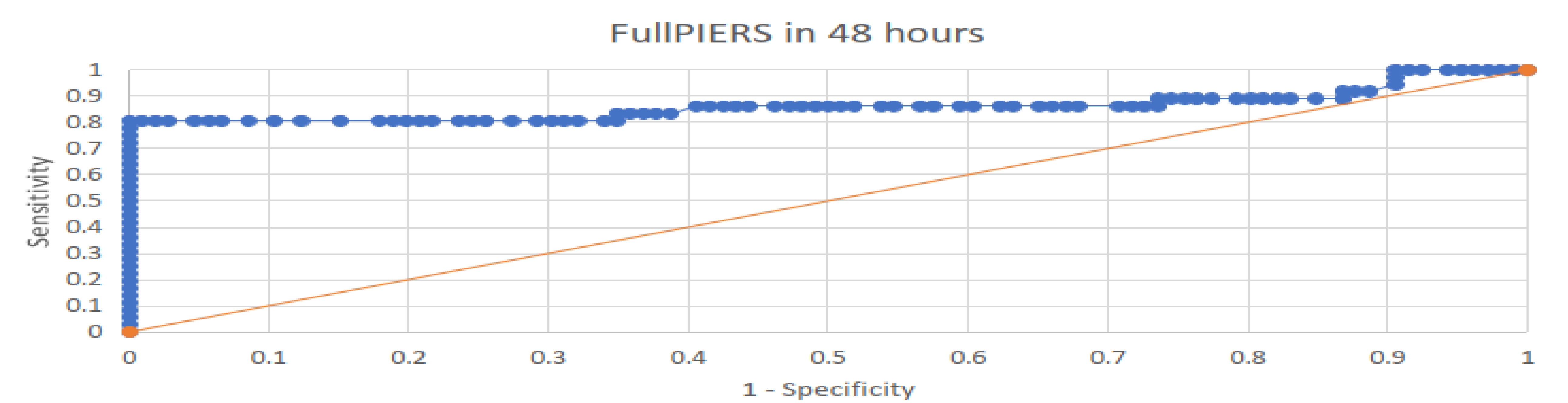
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- ❖ Hypertensive disorders of pregnancy are leading causes of serious complications and death for pregnant women; worldwide and in the middle east.
- ❖ Early prediction of adverse maternal outcomes and timely intervention can save women's life.

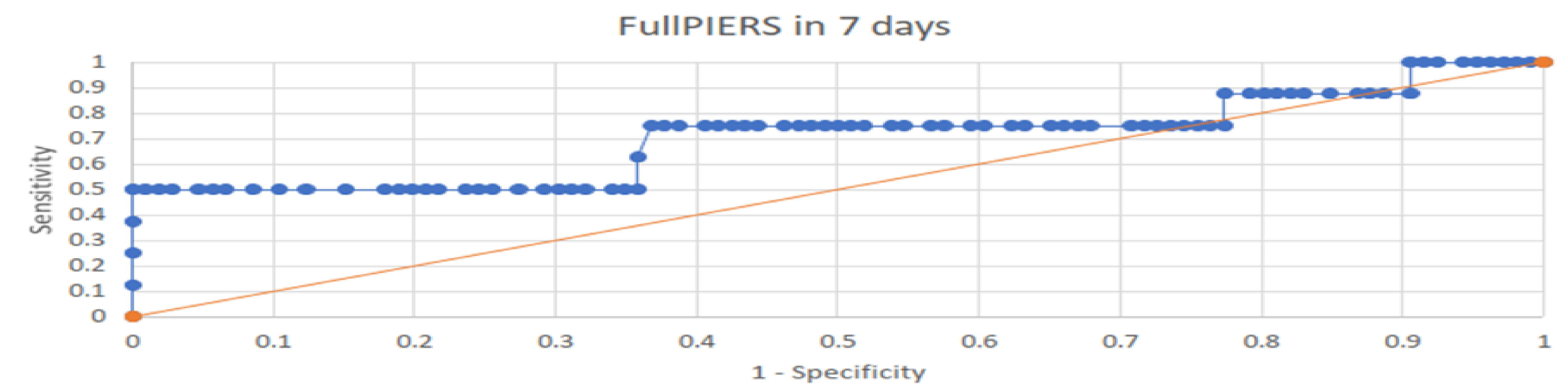
Objective: To assess the validity of the fullPIERS model for the prediction of severe complications in women with severe PE within 48 hs -7 days in limited resources hospital setting using data collected on women's admission.

Methods: 150 pregnant women / singleton pregnancy / GA $\geq$ 20 wks admitted as severe PE or its complications during the study period of 1 year.

They were followed for the first week postpartum.



Predictive ability of fullPIERS at a cutoff point of **25.8%**, the ROC curve for the first 48 hours with AUC is **0.860** (95% CI 0.760-0.959)
It is **80.6%**, sensitive, **72.6%** specific with **91.7%** & **74.6%** negative & positive predictive values respectively



Predictive ability of fullPIERS within 7 days associated with a lower sensitivity of **75%**, a **specificity of 72.6%**, a positive predictive value of 53.2%, and a high negative predictive value of 87.5%.

Conclusion: Usability of fullPIERS prediction model for the need for immediate interventions within 48 hours of admission of severe PE, it could enhance patient selection for more expectant management for cases with severe PE when the patients are remote from term