

Preterm Birth in women with Asymptomatic Bacteriuria

Introduction:

Urinary tract infections are a common health problem among women compared with men due to a short urethra, vaginal proximity, and facilitated entry of pathogens by sexual activity. Pregnant women are more susceptible to asymptomatic urinary tract infection due to their anatomical and physiological status and increased sex hormones during pregnancy. Majority of untreated women with asymptomatic bacteriuria are prone to pyelonephritis during pregnancy and are associated with preterm labour. This study is designed to assess the magnitude and to diagnose asymptomatic bacteriuria on priority basis as early evaluation and management can prevent the patients to have preterm birth and proper specific health strategies can be initialized according to the observations of present study.

Objective:

To determine the frequency of preterm birth in women with asymptomatic bacteriuria.

Setting:

Department of Obstetrics and Gynecology Liaquat University Hospital Hyderabad.

Design:

Descriptive Cross-sectional study

Duration:

Six months from June 2020 to November 2020.

Subject and Methods:

A total of 151 women fulfilling the inclusion criteria was enrolled in the study. All the pregnant ladies with asymptomatic bacteriuria were recruited. The data was collected on pre-designed proforma, and all such maneuvers were performed.

Results:

The average age of the patients with asymptomatic bacteriuria was 27.95 ± 5.66 years. Frequency of preterm birth in women with asymptomatic bacteriuria was 17.88% (27/151).

Conclusion:

We conclude that asymptomatic bacteriuria during pregnancy has a significant impact on pregnancy outcome, mainly premature labour. The unwanted sufferings of the pregnant mothers and their offspring could easily be prevented by early screening and treatment of asymptomatic bacteriuria in pregnancy. In light of our results, we recommend that, health education sessions about personal hygiene should be emphasized during the antenatal care by the healthcare provider to all pregnant females, specifically those of low socio-economic level.

