

COULD INTRAPARTUM ISOLATED FETAL TACHYCARDIA BE CONSIDERED AS CHORIOAMNIONITIS?

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Objective

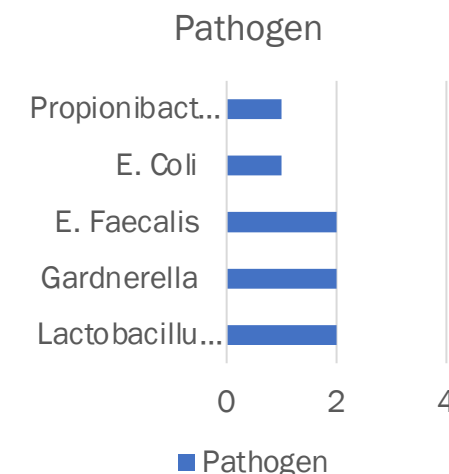
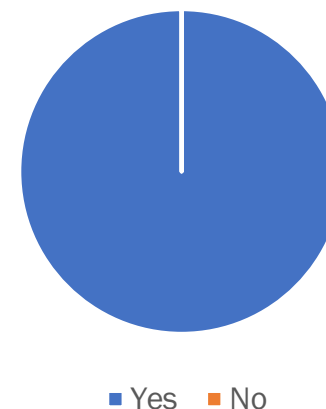
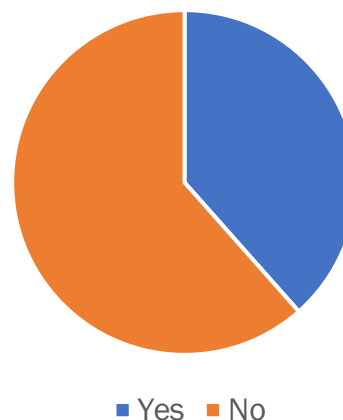
Isolated fetal tachycardia during labor has been proposed to be a sign of chorioamnionitis. The objective of our study was to evaluate the incidence of either microbiological or histological placental chorioamnionitis in fetus with isolated intrapartum tachycardia in absence of other infection signs.

Methods

An observational prospective study was carried out. We evaluated 13 fetuses between January 2019 and december 2021 with isolated intrapartum tachycardia (defined as maintained basal heart rate > 160 bpm), without Gibbs criteria for clinical chorioamnionitis, intraamniotic infection criteria or other signs of hipoxia in cardiotocography. Microbiological study of the placenta and histological evaluation was performed. Admission to the neonatal care unit was also evaluated.

Results

Histological chorioamnionitis Positive culture



3 neonates (23,1%) s were admitted to neonatal unit during a mean of 2,1 days

Conclusion

Although all the fetus with placental culture performed were positive, less than 40 % had histological changes. The neonatal admission rate was higher than in low risk population so, based in our data, isolated fetal tachycardia cannot be considered, per se, as a diagnosis of chorioamnionitis however could raise the level of awarness during intrapartum surveillance.

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