



Shaden Fadda ☺

CS - Lecture (4)

التوليد

# Obstetrics and Infertility

# Obstetrics – Initial History

- ✓ Vaccinations \* هل أخذت كل الطاعيم  
ما كان كانت  
صغيرة. وهل تحتاج  
هذا الطاعيم أو لا ؟
- ✓ 1<sup>st</sup> day of last menstrual cycle (LMP)
- ✓ Previous pregnancies
  - • Past abortions or miscarriages
  - • Problems during pregnancy (DM, HTN, etc.)
  - • Full term vs. premature
- ✓ PMH/PSH/Meds/Allergies/FH/SH
  - Also of Father (her husband.)
- ✓ Folic Acid
  - ↳ folic acid is very important during early development because it helps in forming the neural tube which later becomes the baby's spinal cord.

\* اذا اجبت وحدة حامل على العودة شو الراسلة المهمة في لازم تسأل عنها وتعرفها ؟!

- Remember ☺
- \* PMH → Past Medical History
  - \* PSH → Past Surgical History
  - \* Meds → Medications
  - \* FH → Family History
  - \* SH → Social History
    - ↳ alcohol
    - ↳ Smoking
    - ↳ Travelling
    - ↳ life style.... etc.

# Calculating Estimated Due Date (EDD)

د)؟ كيف تحسب موعد الولادة؟

- 1 • Determine 1<sup>st</sup> day of last menstrual period (LMP)
- 2 • Add 1 year and 7 days
- 3 • Subtract 3 months

- eg: • What is the EDD of a pregnant woman with a LMP of August 7, 2017?
- Add 1 year and 7 days to LMP = August 14, 2018
  - Then subtract 3 months = **May 14, 2018 = EDD**

# Gravida / Parity

- **Gravida**: number of pregnancies (including current pregnancy if applicable)
- **Parity**: Number of completed pregnancies
  - Written as  $x + y$
  - $X$  = number of live births and number of stillbirths together
  - $Y$  = number miscarriages
- Miscarriage: pregnancy loss before 24 weeks
- Stillbirth: pregnancy loss after 24 weeks

# Gravida / Parity Examples

- Female with 6 previous pregnancies/ 5 live births and 1 miscarriage
  - G6 P 5+1

gravida = 6  
 Parity = X+Y = 5+1  
 ∴ G6 P5+1

- Pregnant female with 5 prior pregnancies. 1 stillbirth and 4 live births.
  - G6 (5 previous and 1 current)
  - P5+0 (4 live births and 1 stillbirth + no miscarriages)

- Pregnant female with 4 prior pregnancies. 1 stillbirth, 1 miscarriage, 1 live single birth, 1 live birth of twins
  - G5 (4 previous and 1 current) P3+1 (2 live births and 1 stillbirth+1 miscarriage)

\* يعتبر التوأم رقم (1) لأنه احنا بنعتبر من عدد الولادات (مشتة + مشتة) يعني مش تروع تحسب التوأم بالعادة على انهم شخصين.

لا!! يعتبرهم بطن واحد (ولادة واحدة) لا

الترتيب  
 #

$$\# \text{ Parity} = \# \text{ live births} + \# \text{ still-birth} + \# \text{ miscarriages}$$



\* بهاد الـ لايد هاي اسئلة  
 لازم تنسأل للمراجعة الحامل  
 في كل زيارة لها

# Obstetrics – Ongoing History

\* هون المشيمة بتتزاوج من مكانها  
 ويتفطن عنق الرحم. هاد الحامي  
 كثير خطر خصوصا اذا صار باخر  
 شهر حمل

\* بهاد الحامة مع تولدما cesarian

انفصال المشيمة

المشيمة المتزاوجة

## ① Bleeding

- Normal vs. placenta previa vs. placenta abruption vs. miscarriage

كيفية جدا اقلية  
 وهاد عادي

## ② Baby movement

- Begins around 16-20 weeks

\* after 30 weeks;  
 baby's movements  
 should increase

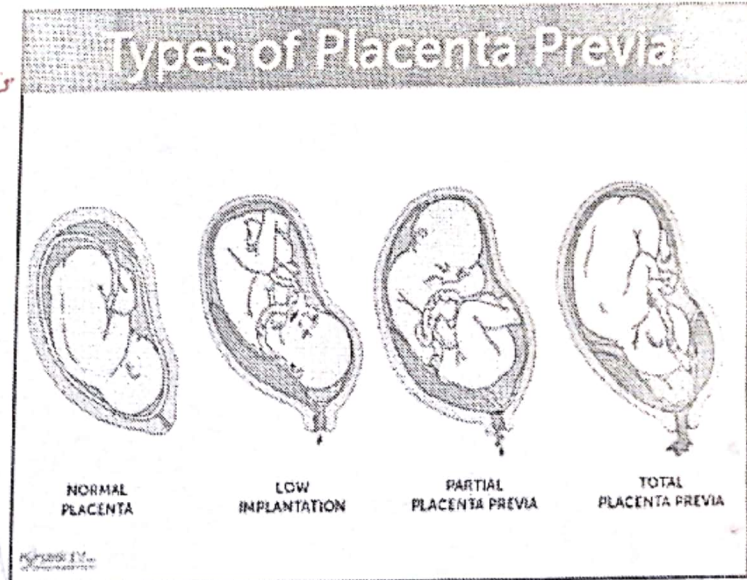
## ③ Contractions

- Braxton-Hicks contractions

## ④ Discharge

- ✓ Premature rupture of membranes (clear)
- ✓ Candidiasis (white, itchy)
- ✓ Bacterial vaginosis (green/yellow, bad smell)

افرازات



\* Braxton-Hicks contractions &  
 → Also called false labor pain, are the  
~~can't~~ body's way of preparing for true  
 labor, but they don't indicate that  
 labor has begun. اذا صارت الانتباهايات كل عشر  
 دقائق هاد يكون ولادة

# Obstetrics - Examination

✓ Blood pressure

✓ Fetal Heart Tones (after 12 weeks)

Normal: 110-160 beats per minute

✓ Edema

✓ Skin (scars, rashes)

✓ Fetal position

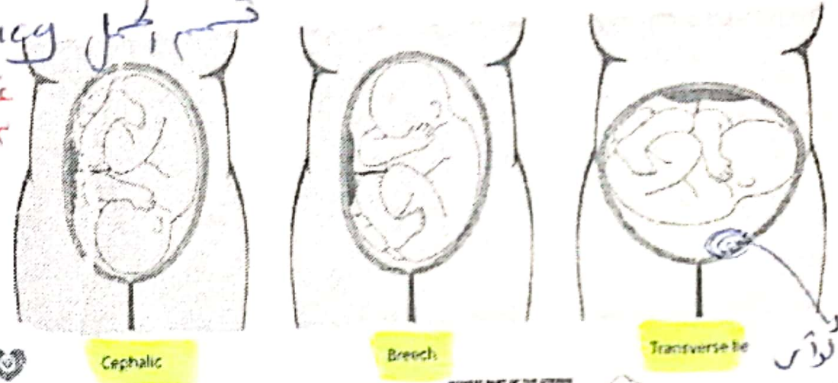
• Cephalic (vertex), breech, transverse, oblique

✓ Fundal height (the distance from pubic symphysis to the top of uterus)

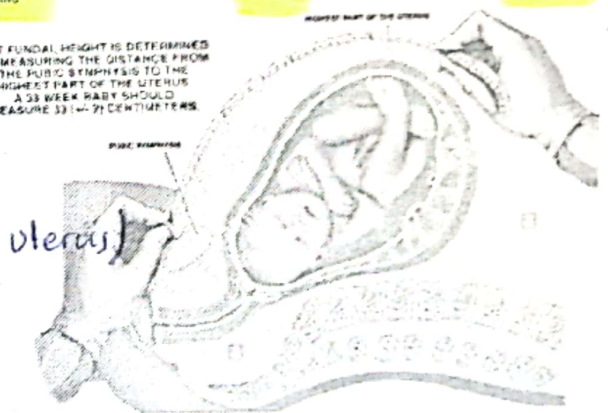
✓ Vaginal exam if indicated (discharge, bleeding, assess fetal position)

High BP leads to toxemia pregnancy and preeclampsia → غالباً يحدث آخر ٣ شهور عند الحمل

if < 110 → عن النبض السري لافت على رقبة البيني  
if > 160 → يمكن يكونه في inflam.



THE FUNDAL HEIGHT IS DETERMINED BY MEASURING THE DISTANCE FROM THE PUBIC SYMPHYSIS TO THE HIGHEST PART OF THE UTERUS. A 38 WEEK BABY SHOULD MEASURE 33-37 CENTIMETERS.



انظر الصورة  
اهدت الصورة  
oblique

\* السلايد هاد ناقص أثناء الفيديو  
لكن زدت كل الشغل بي راحة  
فلا تعلقوا !!

## Obstetrics - Labs

[3] \* Fasting blood sugar at 28 weeks.

[1] \* Initial: CBC, blood type, Hepatitis B+C, rubella immunity

[2] \* Urinalysis at every visit

① • Nitrates: infection

② • Glucose: possible diabetes

③ • Protein: possible pre-eclampsia (toxemia of pregnancy)



# Obstetrics -Summary

- History:

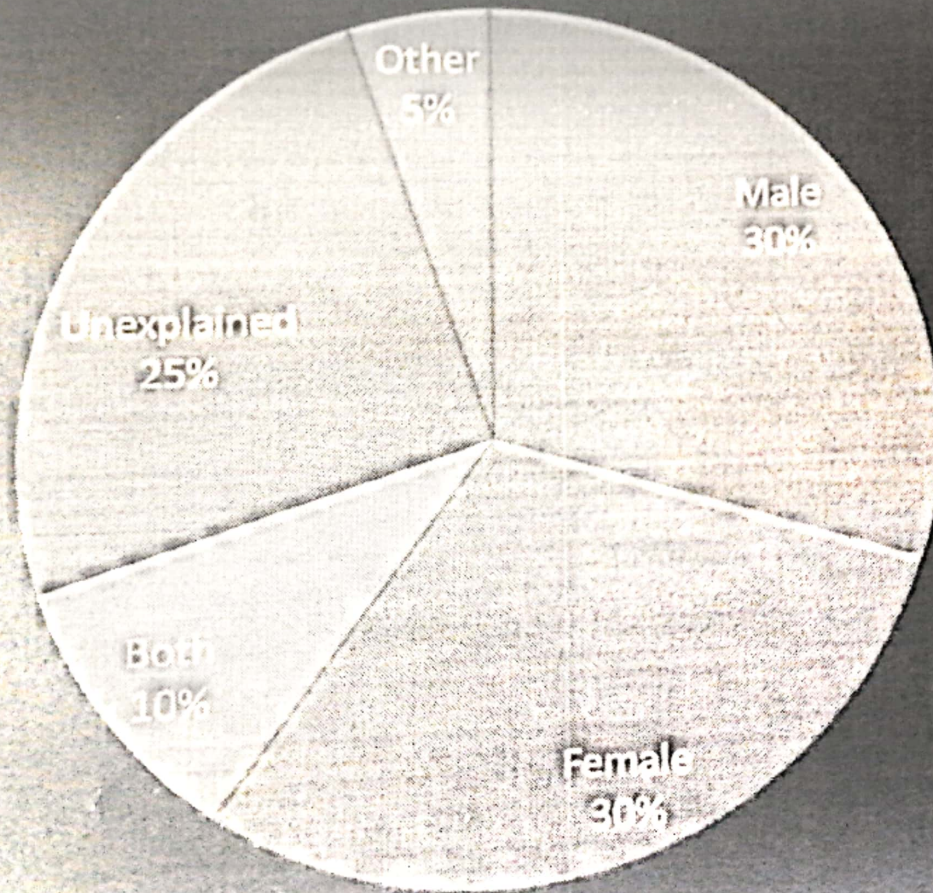
- 1<sup>st</sup> appointment: Normal history + Vaccinations + 1<sup>st</sup> day of last menstrual cycle (LMP) + History of Previous pregnancies  
Make sure they are taking folic acid!!!
- Ongoing appointments: Bleeding, contractions, discharge
- Physical exam: Blood pressure + fetal heart tones + edema + fundal height



- BRIEF CAPP 😊

- Bleeding and discharge, Rashes, Immunizations, Edema, Fetal movement and position and height, folic Acid, blood Pressure of mom, Pulse of baby, Pain - contractions)

### Infertility Causes



- Male
- Female
- Both
- Unexplained
- Other

# Infertility - Definitions

- **Infertility**: Failure to conceive after 1 year of unprotected sexual intercourse

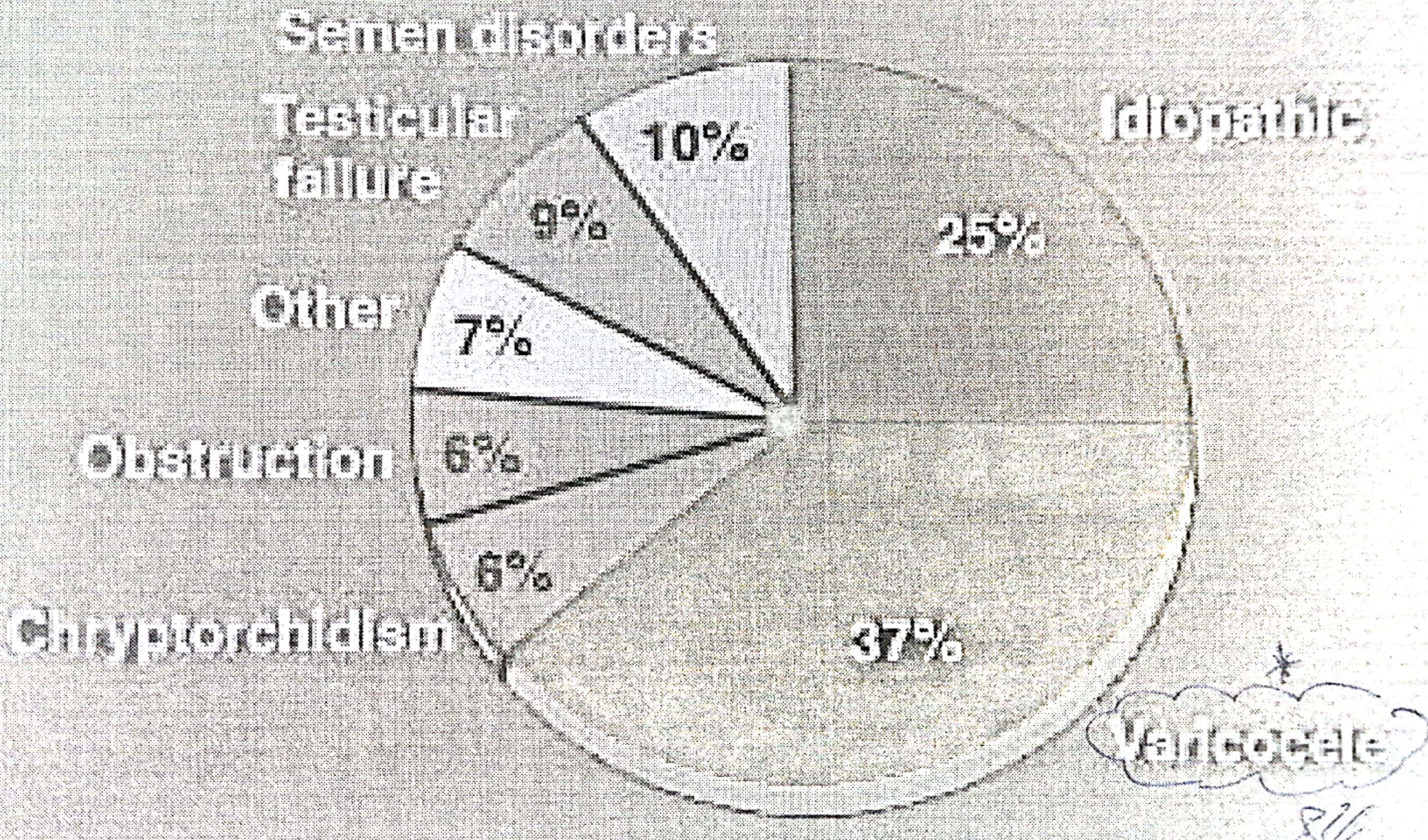
- **Primary infertility**: couple has failed to conceive before *سواء المرأة*  
*\* Couples who have not become pregnant at all*

- **Secondary infertility**: woman has previously been pregnant and is now unable to conceive

*\* couples who have been able to get pregnant at least once, but now are unable*



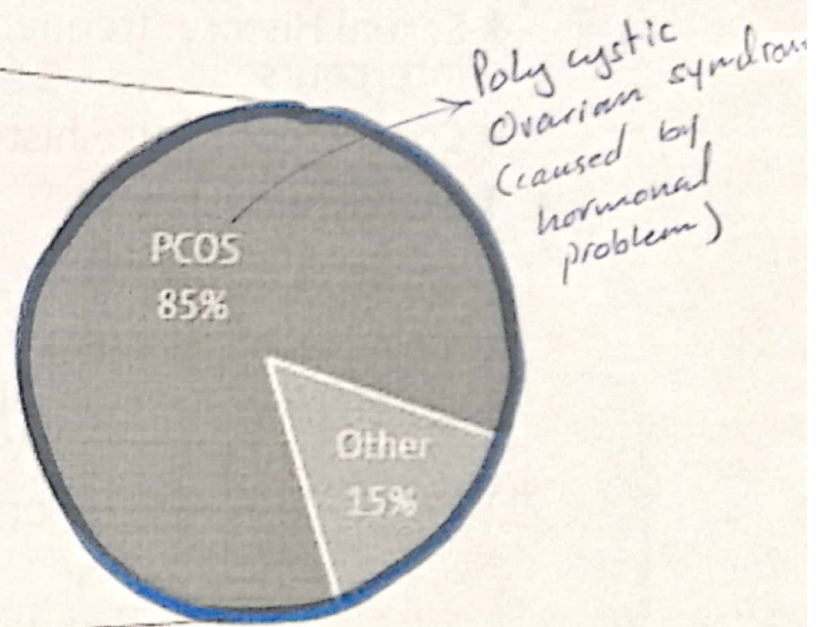
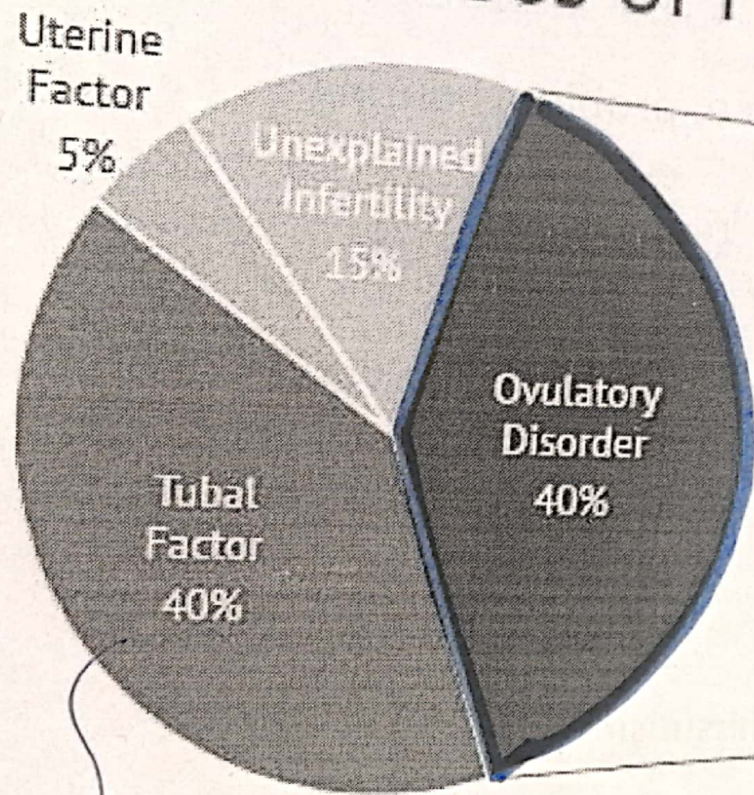
# Male Infertility Disorder



\*  
Vandana  
8/11



# Causes of Female Infertility



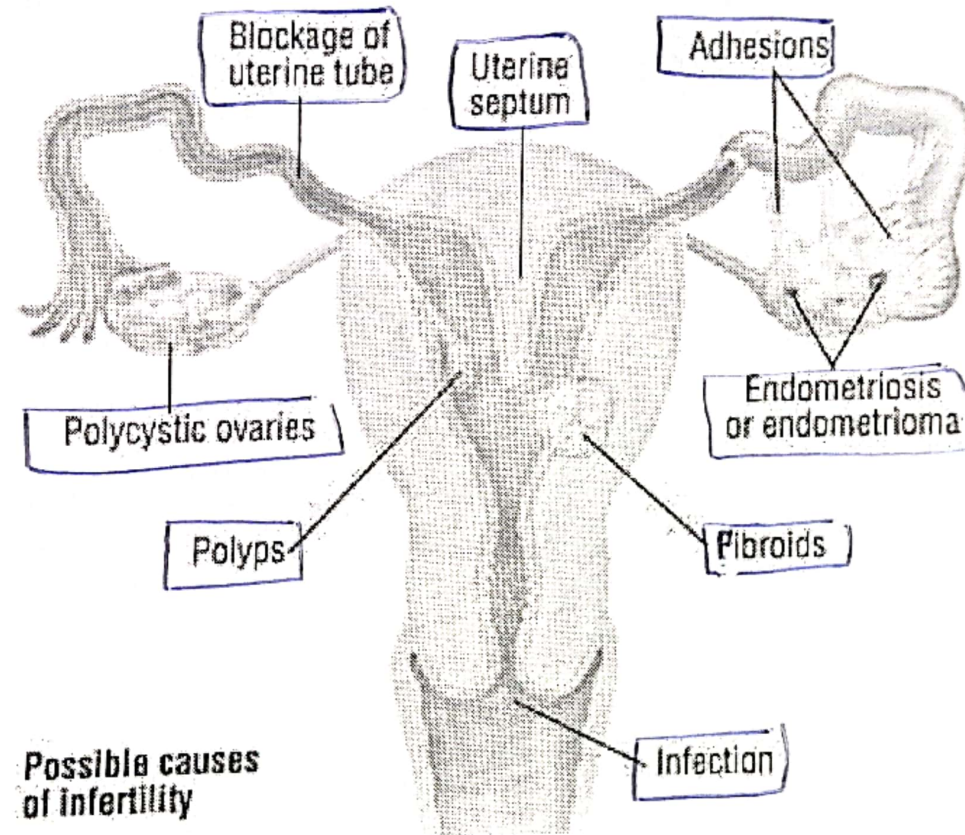
Poly cystic Ovarian syndrome (caused by hormonal problem)

## Tubal factor

caused by diseases, obstructions, damage scarring, congenital malformations or other factors which impede the descent of a fertilized or unfertilized ovum into the uterus through the Fallopian tubes and prevents a normal pregnancy and full term birth.



# Female Infertility - Causes



# Infertility – Female History

\* Sexual History: frequency of intercourse, problems during intercourse

\* Contraceptive use history → سواء كانت تأخذها، أو أخذت سابقاً. ولازم نعرف مدة الاستخدام

\* Menstrual history:

- Age of menarche → *كم كان العمر لما أجهتها أول menstrual cycle*
- Regularity of cycle
- Amount of bleeding
- Duration of menstrual cycle → *More than 7 days / less than 3 days indicates a problem!!*
- Pain with menstruation

\* PMH/PSH/Meds/Allergies/FH/SH

\* Specific symptoms

- STDs, galactorrhea, thyroid symptoms, hirsutism, acne

*Sexual Transmitted Disease.*

*\* changes in sleeping or appetite*

*\* fatigue or muscle weakness*

*etc.*

*Excessive body hair*

# Infertility – Male History

- Sexual History: frequency of intercourse, problems during intercourse
- Contraceptive use history
- GU History:
  - Lesions/swelling/pain in testicles/scrotum/penis
  - Undescended testicles
- PMH/PSH/Meds/Allergies/FH/SH

# Female Infertility - Investigations

## Labs:

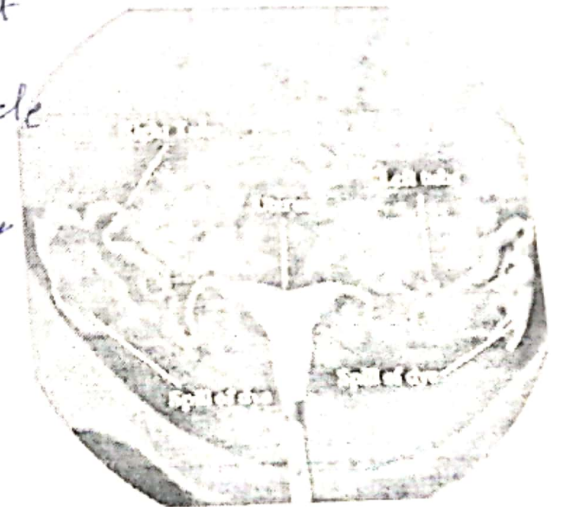
- Thyroid function tests (TSH, T3, Free T4)
- Prolactin → *تكون عالٍ بسبب tumor*
- Follicle stimulating hormone (FSH)
- Luteinizing hormone (LH)

} Hormones that regulate the menstrual cycle

## Imaging:

- \* Hystero/salpingogram
  - Investigates tubes and uterus
- \* Ultrasound
  - Evaluates ovulation by examining uterine wall

to see whether the fallopian tubes are open and if uterine cavity is normal









\* مثلاً { sexual intercourse إنه ال }  
عم بصير على صاير سنة كاملة !!

## Infertility - Treatment

- ✓ Reassurance or advice if definition of fertility not met
- ✓ Treat underlying problem
  - hypo/hyperthyroid, prolactinoma, infection, etc.
- ✓ Varicocele (surgery)
- ✓ Blockage of tube or uterus (surgery)
- ✓ Ovulation problem
  - Lose weight → especially in polycystic ovarian ds.
  - Fertility drugs (clomiphene, metformin)

# Infertility - Summary

- Caused by male and female equally
- Need to assure criteria for infertility is met
- Main cause is male is varicocele
  - Diagnosed by ultrasound and needs surgery
- Main causes in female are hormonal problems or blockage
  - Diagnosed by labs or imaging

يعني بدون فاصلات في وسائل لمنع الحمل على مدار عام

One year of regular unprotected intercourse

