

## Is Grand Multiparity Still An Obstetrics Risk?

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### Abstract

**Background:** Grand multiparity has been known to be an obstetric risk because of the documented complications associated with the condition, and it is an indication for booking in a tertiary health institution.

**Patients and Methods :** Cross – sectional study was conducted in Al-Batool teaching hospital during the period from July 2014 to November 2014. Total number of deliveries was 200. Samples (100 grand multipara women and 100 woman as control group), who were admitted to the maternity unit for labour and delivery, the two groups were matched for age, antepartum outcome, intrapartum outcome, postpartum outcome and fetal outcome to compare the risk between grand multiparity and control.

**Results:** Two hundred of grand multiparous woman and control group were included in the present study the mean age was (32.32 ± 6.006) years. There was (56%) of grand multiparity have anemia and other medical diseases such as hypertension, diabetes mellitus, epilepsy and urinary tract infection. Statistically significant differences noticed when compared with the control group (p- value ≤ 0.05). Also there were higher incidence of preterm labour and abruption placenta in grand multiparity comparing to control group. However higher incidence of caesarian section delivery in grand multiparous woman than control group (60%, 40%) respectively. The most common cause for caesarian section was due to previous scar, which was (58.8%) in control versus (51.6%) in grand multiparity. Regarding the perinatal outcome there was Apgar score ≤ 7 at 1 minute (61%, 28%) in grand multiparity and control respectively which was statistically significant.

**Conclusion:** The grand multiparity still be considered a high risk in pregnancy due to medical and obstetrical complications, also it is necessary to provide a good health care for grand multiparous woman, and their neonates.

**Key Words:** Grand multiparity, anaemia, abruption placenta, caesarian section.

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