

## EUROPEAN ENDOCRINOLOGY AND DIABETES CONGRESS

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**Hypothyroidism in pregnancy; An overlooked health****Sufia Athar***Al-Wakra Hospital, Qatar*

**Introduction:** Hypothyroidisms in pregnancy is not uncommon. Lack of maternal awareness regarding hypothyroidism and its effects, impedes their compliance with the treatment and follow up. Untreated hypothyroidism may be associated with miscarriage, preterm birth, birth weight disorders, IUFD, preeclampsia, post-partum hemorrhage, abruption placenta and anemia. In Qatar, with diverse nationalities of patient, there is a need to look into the prevalence of hypothyroidism and complications associated in pregnancy. This will be beneficial in reducing maternal and fetal morbidity by addressing them as high-risk pregnancy and offering these patients early booking in the clinic. So, a retrospective trial was conducted to assess the fetal outcomes in hypothyroid pregnant women and their post-partum compliance was assessed.

**Methods:** The study was conducted as a retrospective chart review at Al Wakra Hospital Qatar. Study was approved by Medical Research Committee in 2019. Inpatient records of all women who had delivered from Jan 2017 to May 2018 were reviewed. 400 patients were by simple random sampling. The study population was divided in two groups; Group- Antenatal patients with hypothyroidism and Group B- Antenatal patients without hypothyroidism. Comparisons of quantitative data between two groups were performed applying unpaired t test. Associations between two or more qualitative variables was assessed using chi-square ( $\chi^2$ ) test.

**Results:** 25.56%, 22.78 % and 16.67 % women were diagnosed with hypothyroidism in first, second and third trimester, respectively. The prevalence of preterm birth was 6.11% and 4% (OR 1.56, 95% CI: 0.613-3.974) in group A and B, respectively. Small for dates babies in groups A and B were 6.67% and 3.00% (OR 2.309, 95% CI: 0.848-6.287). Low APGAR score was noted in 7.14% in group A and 3.09% (OR 2.3095, 95% CI: 0.848-6.287) in group B. 12.78% and 5% (OR 2.783, 95% CI: 1.286-6.023) babies had NICU admissions in group A and B, respectively. 1.11% women while none in the control group had IUFD. Only 56.11% women came for post-natal follow up despite being instructed.

**Conclusion:** Hypothyroidism in pregnancy have adverse effects on fetal outcome emphasizing the importance of routine antenatal thyroid screening as well as the post-natal follow up for the proper management of the pregnancy and safe delivery.

**Biography**

Dr Sufia Athar had done MBBS, DNB, Fellow in Minimal Invasive Surgery, Fellow Indian College of Obstetrician and Gynecologists. Specialized in high-risk Obstetrics, minimally Invasive Gynecology Surgery and infertility. Specialized in patients' safety from the John Hopkins University, USA. Certified in Global Health, Harvard T.H. Chan School of Public Health, USA. Specialized in digital health from Imperial College London. Presented and published many clinical papers and posters. Received prizes for the best papers and posters in several conferences.