

Bölüm 18

POSTTERM GEBELİK: KLİNİK ÖZELLİKLER, KOMPLİKASYONLAR VE YÖNETİM

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GİRİŞ

Postterm gebelik, aynı zamanda uzamış gebelik olarak da bilinen, 42 hafta veya daha uzun süren bir gebeliği ifade eder. Tüm gebeliklerin yaklaşık %10'unda görülür ve hem anne hem de bebek için olumsuz sonuç riskinin artmasıyla ilişkilidir (1). Bu nedenle etkili yönetim ve bakım için bu karmaşık durumun kapsamlı değerlendirilmesi gerekmektedir. Mevcut literatürün kritik bir şekilde gözden geçirilmesi ve kanıta dayalı yaklaşımlar aracılığıyla, bu bölüm, gebelik süresinin beklenen süreyi aşan durumlarında bakımı optimize etme konusunda sağlık profesyonellerine rehberlik etmeyi ve bilgi tabanına katkıda bulunmayı amaçlamaktadır.

TANIM

Postterm gebelik tanım olarak gebeliğin son adet tarihine göre 42 0/7 (>294 gün) haftalık gebelik süresini aşması veya tahmini doğum tarihinin 14 gün veya daha uzun süren aşan gebelik olarak tanımlanır (2). 41 0/7 41 6/7 gebelik haftası arasındaki gebelikler ise geç term gebelik olarak isimlendirilmektedir. Postmatürite, postmatürite sendromu ve dismatürite, postterm gebelikle eşanlamlı terimler değildir. Genellikle postterm gebelikte karşılaşılan utero-plasental yetmezliğe sekonder intrauterin büyüme kısıtlamasının (IUGR) etkilerini tanımlamaktadırlar (3).

PREVELANS

Postterm gebelikler tüm gebeliklerin %5-10'unda görülür (4). Post-term gebelik prevalansını etkileyen pek çok faktör mevcuttur. Prevelansı etkileyen faktörlerden biri de ülkelerin sağlık politikalarıdır. Planlanmış doğum induksiyonu, gebelik

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indüksiyon başarısız olursa, ikinci indüksiyon başarılı olabilir. Karar vermeden önce ikinci bir indüksiyonun risklerini ve faydalarını anne adayları ile tartışmak önemlidir. Ancak ikinci bir indüksiyonu başarı oranının ilkinde göre daha düşük olduğu akılda bulundurulmalıdır (25). Post-term gebelikte indüksiyon sonrası genel sezaryen oranı yaklaşık %20-30'dur.

REKÜRRENS RİSKİ

Postterm gebeliğin tekrarlama riski, genel popülasyondaki riskten yaklaşık 2-3 kat daha yüksek olarak yaklaşık %15-20 olarak tahmin edilmektedir. Bu artan risk, genetik ve çevresel faktörlerin bir kombinasyonundan kaynaklandığı düşünülmektedir. Postterm gebeliğin tekrarlama riskini artırabilecek bazı faktörler; postterm gebelik öyküsü olan bir aile, obezite, ileri anne yaşı, gestasyonel diyabet, preeklampsi başlıcalarıdır (51).

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