

# Multiple pregnancies at a maternity hospital in Nairobi.

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## Abstract:

: To review some of the aspects of multiple pregnancies. DESIGN: A retrospective review of multiple pregnancy deliveries. SETTING: Pumwani Maternity Hospital- Nairobi Kenya, between 1st January and 31st December 2006. SUBJECTS: Three hundred and twenty eight mothers with twins and two sets of triplet deliveries. RESULTS: The total annual deliveries were 15,642. The twinning rate was one in 48 deliveries and the triplet rate was one in 7,821 deliveries. Most of the mothers were of low parity and in the lower age group. Majority had no previous history of twins and were married. The sex differences in both the first and second twins were as of the normal population with males being delivered more than females. Most of the twins were delivered alive through spontaneous vertex delivery (SVD). Majority of first twins had no complications while in second twins the majority had more complications. Most of the deliveries had no obvious congenital malformations. Most of the twins were of low birth weight and were of the same sex (monozygotic). The most common complications in both first and second twins were prematurity and asphyxia. The majority of the twins were diagnosed during the prenatal period and the most common method of diagnosis was by ultrasonography. The majority of the mothers had no complications. The most common maternal complications being preeclampsia (PET) and anaemia. CONCLUSION: Most of the mothers with multiple pregnancies were of low parity and in the lower age group. Diagnosis was mainly done by ultrasonography therefore emphasis should be done to improve clinical diagnosis especially in resource constrained facilities. A more detailed study should be undertaken especially the events in the pre-pregnancy and during the antenatal period. The present study assumes that same sex twins are the same as monozygotic twins. A more detailed study on the types of placentation would be useful. As PET, anaemia, prematurity and asphyxia are the most common maternal and neonatal complications medical workers need to be made aware of the appropriate management of the conditions. These babies will need long-term follow-up.