SUMMARY AND CONCLUSION
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- Seventy antenatal cases were studied by ultrasonography for amniotic fluid volume estimation by amniotic fluid index method.

- Amniotic fluid index is a reliable method for amniotic fluid estimation and for diagnosing oligohydranmios cases for which it has predictive value of 93%.

- Mean amniotic fluid index in normal term pregnancy was 12.6±3.6 and there was significant gradual decrease in API in post term pregnancy as 10% per week.

- There was increase incidence of IUGR among oligohydramnios group (33.3%) as compared to normal group (10.9%).

- There was significant increase in foetal distress (53.3%) in oligohydranmios cases and increased incidence of birth asphyxia (33.3%) whereas in normal group fetal distress was 21.8% and birth asphyxia also in 21.8% cases.

- Perinatal mortality and morbidity was more in cases of oligoamnios (46.6%, 33.3%).
- Rate of caesarian section was much higher among oligoamnios group (60%) as compared to normal group (21.8%).

- In IUD cases amniotic fluid index was very low (average 2.6). Thus AFI in extremely low range is an ominous sign.

- In post maturity cases amniotic fluid index is a better predictor in comparison to placental grading by ultrasound.

Conclusion

Amniotic fluid index is simple, reliable, requires little time and semiquantitative estimate of amniotic fluid volume by ultrasound. This four quadrant technique was evaluated in relationship of fetal heart rate, meconium staining, birth asphyxia (APGAR 7) and perinatal mortality and morbidity. The study was done on 70 patients of term pregnancy. There was increased incidence of fetal distress, fetal asphyxia, perinatal mortality, morbidity along with increased incidence of caesarian sections in cases of oligoamnios. Thus reduced AFI is directly proportional to the poor fetal outcome. There was increased incidence of IUGR and postmaturity in oligohydroamnios cases.

Thus amniotic fluid index is a reliable method for antepartum foetal surveillance.