

Unit II – Problem 1 – Clinical: Pregnancy



- **Pre-embryonic period:** 1st & 2nd weeks of development.
 - **Embryonic period:** 3rd week of development ---> 8th week of development.
 - **Fetal period:** 8th week ---> delivery.
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- **Parity:** giving a birth to infants \geq 500g (dead or alive).
 - **Live birth:** complete expulsion (إخراج) of a fetus showing evidence of life.
 - **Infant:** birth ---> 1 year.
 - **Neonatal:** birth ---> 28 days.
 - **Perinatal:** 28 weeks of gestation ---> 7 days after delivery.
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Pre-mature

*Less than 37 weeks
Of gestation*

Mature

*37 to less than 42
weeks*




Post-mature

*42 weeks or
more*

- A birth weight is considered low if it is 2500g or less. (normal range is between 2.5 – 3.5 kg).
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- **Diagnosis of pregnancy is made by:**
 - History of amenorrhea (إنحباس الطمث):
LMP: Last Menstrual Period.
EDD: Expected Date of Delivery.
 - Positive pregnancy test: hCG in urine or blood.
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- **Manifestation of pregnancy (مظاهر أو عوارض الحمل):**
 - 1) Presumptive: refers to signs and symptoms that may resemble pregnancy signs and symptoms, but may in fact be caused by something else.
 - 2) Probable: refers to signs that indicate pregnancy the majority of the time.
 - 3) Positive: refers to signs that cannot, under any circumstances, be mistaken for other conditions than pregnancy.

-Gravid: pregnant
-Gravidity: No. of pregnancy either normal or abnormal



Presumptive Manifestations	
Signs	Symptoms
<p>1- Increased basal body temperature and basal metabolic rate (BMR).</p> <p>2- Skin:</p> <ul style="list-style-type: none"> - <u>Chloasma</u> (darkening of skin).  <ul style="list-style-type: none"> - <u>Linea nigra</u> or <u>linea alba</u>: due to increased MSH & estrogen.  <ul style="list-style-type: none"> - <u>Stretch marks</u> of breast and abdomen. - <u>Spider telangiectases</u>: due to increased estrogen. 	<p>1- Amenorrhea: due to increased estrogen and progesterone. Delayed menses can be caused by emotional factors or diseases.</p> <p>2- Nausea and vomiting (usually during the first trimester): 2-12 weeks of gestation. In 50% of women, it is more severe in the morning due to high levels of hCG.</p> <p>3- Breast:</p> <ul style="list-style-type: none"> - <u>Mastodynia</u> (breast tenderness & engorgement): due to increased circulation and hormonal responses of mammary duct and alveoli. - <u>Enlargement of sebaceous gland of areola</u>. - <u>Colostrum secretion</u>. - <u>Secondary breast</u>. <p>4- Quickening (fetal movement): occurs between 18-20 weeks in primigravida (first pregnancy). It occurs in 14-16 weeks in most multigravida.</p> <p>5- Increased urination: because of pressure from the uterus.</p>

Probable Manifestations	
Signs	Symptoms
<p>1- Pelvic organs:</p> <ul style="list-style-type: none"> - <u>Chadwick's sign</u>: bluish vagina and cervix. - <u>Leukorrhea</u>: vaginal discharge of epithelial cells and cervical mucous (protection from infections). - <u>Relaxation of pubis symphysis joint</u>. <p>2- Abdominal enlargement.</p> <p>3- Braxton-hicks contraction: short-irregular- sporadic- painless contractions.</p>	<p>Same as presumptive.</p>



Positive Manifestations		
Fetal heart sound: 5 th month	Palpation of the fetus	Ultrasound examination

Pregnancy Test		
Urine: <ul style="list-style-type: none">- Most common.- Detecting hCG by antibodies.- Advantages: affordable رخيص, reliable, fast, qualitative.	Serum: <ul style="list-style-type: none">- Quantitative and qualitative.- Reliable for early pregnancy.	Home test: <ul style="list-style-type: none">- Immunological.- Detecting hCG in morning urine sample.

