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**Original article:**

**Study of use of progesterone for symptomatic placenta previa in a tertiary care teaching hospital**

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**Abstract**

Present study was conducted to determine the effectiveness of intramuscular 17α hydroxy progesterone caproate (Progestin analog) therapy versus placebo in conservative management of patients with symptomatic placenta previa before 34 weeks ofgestation.Primary outcome measure was prolongation of pregnancy and secondary outcome measures were maternal outcomes i.e. number of episodes of bleeding, number of blood transfusion required, birth weight of babies.A prospective study with 60 pregnant females with symptomatic placenta previa that is having episode of warning hemorrhage before 34 weeks of gestation were enrolled for the study.Patients with Placenta previa symptomatic with at least one episode ofbleeding, estimated gestational age within 28 to 34weeks, maternal age > 18yrs and only singletonpregnancy cases were included.Study showed that prolongation of pregnancy in progesterone receiving group is statistically significant (p value <0.05), significant difference were also found in gestational age at delivery (p value<0.05), birth weight (p value <0.05). Recurrent episode of bleeding was not significant (p value> 0.05) in both groups.17α OH progesterone in expectant management of symptomatic placenta previa tends to be beneficial than placebo as it causes clinically significant prolongation of pregnancy i.e admission to delivery and increased birth weight as well as not appear to be any increased morbidity or mortality in a controlled tertiary setting.

**Key words:** Placenta previa, Progesterone, Pregnancy, Premature labor