Results

## CLINICAL DATA

Table 1a shows the range and mean ( $\pm$  SD) of the age, weight and gestational age, while table 1b shows the range and mean ( $\pm$  SD) of systolic, diastolic and mean arterial blood pressure in the three study groups.

Table 1a shows that the mean maternal weight was significantly higher in the mild PIH group, compared to normal pregnancy group and severe PIH group (P <0.001).

Table 1b shows that there was no statistically significant difference between mean arterial blood pressure in normal pregnancy and mild PIH, but it was significantly higher in severe PIH compared to mild PIH and normal pregnancy.

Table 1a:Range and mean ( $\pm$  SD) age, weight and gestational age in the three study groups.

Parameter	Group I (Normal Pregnancy)	Group II (Mild PIH)	Group III (Severe PIH)		p	Value
Age : (years)	•	,				
Range Mean S D ± Weight : (Kgm)	20-29 24.10 3.100	20-32 25.26 3.814	29-33 24.50 4.232		: III : III	
Range Mean S D <u>t</u> Gest age (Weeks)	59-85 71.366 8.499	58-88 77.733 5.534	65-86 71.9 5.701	I	: III	0.001 N.S. (0.001
Range Mean S D ±	30-40 35.30 3.185	32-40 35.266 2.434	30-38 34.566 2.207	I : II :		N.S. N.S. N.S.

Table 1b:Range and mean ( $\pm$  SD) systolic, diastolic, and mean arterial blood pressure in the three study groups.

Blood	pressure	Group I (Normal Pregnancy)	Group II (Mild PIH)	Group III (Severe PIH)		P v	alue
Systo	lic						
	Range Mean S D ±	100-140 120.333 10.661	140-150 145.33 5.5.071	160-210 173.666 16.078	I	:III	<0.001 <0.001 <0.001
Diasto	olic						
Mean a	Range Mean S D ± rterial	60-90 78.33 7.914	90-100 95.83 4.927	110-150 118 11.861	I	:111	<0.001 <0.001 <0.001
	Range Mean S D ±	83.3103.3 122.33 27.300	106.66-116.66 152.33 30.49	126.66-153.33 176.77 39.73	I	: II :III	N.S <0.001 <0.001

In the 30 patients with severe PIH, there were symptoms and signs of eminent eclampsia in 18 patients (60%). In 14 of these 18 patients, there were more than one sign and/or symptom.

Table (2): Symptoms and signs of eminent eclampsia in 18 patients with severe PIH.

Symptoms and Signs	No.	8
Symptoms:		
Headache Epigastric Pain Visual disturbance Vomiting	18 12 5 5	100% 66% 27% 27%
Signs :	(6)	
Jaundice Tender liver	<b>4</b> 2	22% 11%
Combined symptoms and Signs	(14)	
Headache + Vomiting Headache + epigastric pain Headache + visual disturbance Multiple symptoms	3 5 1 5	16% 27% 0.05% 27%

Table 3 shows the grades of oedema and albuminuria in patients with mild and severe PIH.

Table 3: Grades of oedema and albuminurea in mild and severe PIH.

Parameter 	Mild PIH (n = 30)	Severe PIH (n = 30)
Oedema :		
111	9 (30%)	0
+	8 (26%)	0
+ +	13 (43%)	7 (23%)
+ + +	0	23 (76%)
lbuminuria:		
+	10 (33%)	0
+ +	20 (66%)	0
+ + +	0	19 (63%)
+ + + +	0	11 (36%)

## LABORATORY RESULTS

Table 4 shows the range, mean, ( $\pm$  SD) of platelet count, serum creatinine, SGOT, and LDH in the three study groups.

Table 4:Range, and mean, ( $\pm$  SD) of platelet count, serum creatinine, SGOT, and LDH .

Parameter	Group I (Normal Pregnancy)	Group II (Mild PIH)	Group III (Severe PIH)	P Value
Platelet count(/cumm)				
Range Mean S D <u>+</u>	170.000-250.000 212.333 33315.316	139.000-259.000 193.166 32528.06		00 I:II <0.001 I:III<0.001 II:III<0.001
Serum creat- inine(mg/dl)	¥ ;			
Range Mean S D <u>+</u>		0.8-1.8 1.796 2.895	1.1-2 1.623 0.299	N.S.
SGOT (U/L)				
Range Mean S D <u>+</u>	4-27 13.062 6.407	19-78 32.466 10.997	21-141 43.266 33.105	I:II <0.001 I:III<0.001 II:III<0.001
L D H (U/L)				
Range Mean S D <u>+</u>	100-210 137.321 31.08	113-290 182.366 49.278	178-590 376.267 94.105	I:II <0.001 I:III<0.001 II:III<0.001

This table shows that the mean platelet count in mild PIH was significantly lower than that in normal pregnancy (P<0.001) and in severe PIH was lower than that in normal and in mild PIH. (P<0.001). There was no statistically significant difference between mean serum creatinine levels in mild and severe PIH. On the other hand, the mean serum SGOT and LDH were significantly more in severe PIH compared to mild PIH (P<0.001) and to normal pregnancy (P<0.001) and in mild PIH compared to normal pregnancy (P<0.001).

## THROMBOCYTOPENIA

This means that the platelet count was less than 150,000/cu mm. In mild PIH group, 6 cases were detected (20%) and in severe PIH group, 24 cases were detected (80%), (P<0.001). Out of these 24 cases, 13 cases (54%), had severe thrombocytopenia (i.e. platelet count less than 100,000).

Table 5: shows the clinical cheracterestics and laboratory findings of the 6 cases with thrombocytopenia in mild PIH gruop. It shows that all the 6 patients had no complaints, their blood pressure did not exceed 150/100, mm Hg, oedema and albuminuria were no more than (++), platelet count was not less than 139,000, serum creatinine level was increased (normal value up to 0.9 mg/100ml), there was elevated level of SGOT (normal value up to 12 U/L) and elevated level of LDH (normal value up to 240 U/L), and there was no evidence of haemolysis.

Table 5: Characteristics of patients with thrombocytopenia in mild PIH group.

Case No.   Compl- Blood press.   ema   min   Plat-   Creat inine   (U/L)   (U/L)   lysis
2 Nil 150/100 Nil + + 139.000 1.7 41 266 Nil 3 Nil 150/100 + + + + + 150.000 1.7 33 238 Nil 4 Nil 150/100 Nil + + 139.000 1.7 41 200 Nil 5 Nil 150/90 + + + + + 150.000 1.8 41 238 Nil 6 Nil 150/90 + + + + + 150.000 1.7 200 33 Nil
2 Nil 150/100 Nil + + 139.000 1.7 41 266 Nil 3 Nil 150/100 + + + + + 150.000 1.7 33 238 Nil 4 Nil 150/100 Nil + + 139.000 1.7 41 200 Nil 5 Nil 150/90 + + + + + 150.000 1.8 41 238 Nil 6 Nil 150/90 + + + + + 150.000 1.7 200 33 Nil
3 Nil 150/100 + + + + + 150.000 1.7 33 238 Nil 4 Nil 150/100 Nil + + 139.000 1.7 41 200 Nil 5 Nil 150/90 + + + + + 150.000 1.8 41 238 Nil 6 Nil 150/90 + + + + + 150.000 1.7 200 33 Nil
4 Nil 150/100 Nil + + 139.000 1.7 41 200 Nil 5 Nil 150/90 + + + + + 150.000 1.8 41 238 Nil 6 Nil 150/90 + + + + + 150.000 1.7 200 33 Nil
5 Nil 150/90 + + + + 150.000 1.8 41 238 Nil 6 Nil 150/90 + + + + 150.000 1.7 200 33 Nil
6 Nil 150/90 ++ ++ 150.000 1.7 200 33 Nil
ab. 150
Syst. 150
Mean 146333.33 1.71 72.3 210.8 Diast. 96.6
Syst. 0
SD ± 568.37 0.04 64.5 92.22 Diast. 30.98

Table 6 shows the clinical characteristics and laboratory findings of the 24 patients with thrombocytopenia that were found in the severe PIH group. Symptoms and signs were frequent and were found in 18 patients 80%). The systolic blood pressure ranged from 160 - 210 mm Hg and the diastolic from 110 - 150 mm Hg., Oedema ranged from (++) to (+++) and albuminuria ranged from (+++) to (++++). Lowest platelet count was 90,000. Serum creatinine, SGOT, and LDH were elevated in all cases and there was evidence of haemolysis in 4 cases (13.3%).

Table 6a shows the clinical characteristics and laboratory findings in the 11 cases with thrombocytopenia (platelet count from 100,000 to 150,000/cu mm) in severe PIH group.

Case		BL.P			Platelet			LDH	
No.	Complaints	(mm Hg)	ema inuria		count (/cu mm)	inine. (mg%)		(U/L)	lysis )
1	Headache, nausea and vomiting	160/100	+++	+++	137,000	1.9	57	270	No
2	Headache	180/120	+++	+++	112,000	1.9	41	370	No
••	Headache, visual disturbances and Jaundice	210/120	+++	+++	150,000	1.9	141	460	Yes
4	Headache, Epiga- stric pain, nau- sea and vomiting	160/110	+++	+,++	137,000	1.7	63	360	No
5	Headache, Epiga- stric pain, and visual disturba- nces	160/110	+++	+++	137,000	1.6	73	330	No
6	Headache, epiga- stric pain, and visual disturba- nces	200/140	+++	+++	125,000	1.7	41	350	No
7	Headache, epiga- stric pain, and visual disturba- nces	180/140	+++	+++	119,000	1.4	57	178	No
8	No complaints	160/110	++	+++	137,000	1.2	27	380	No
9	No complaints	160/110	+++	+++	112,000	1.2	137	187	No
10	Headache, and epigastric pain	200/120	++	+++	122,000	2.0	41	390	No
11	Headache, and epigastric pain	160/110	•		137,000				No
	Syst. 179 Mean Diast. 11	5.45			130045		65.		8.45
	Syst. 19 S D ± Diast. 12				12250.4	0.28	38.	6 85	. 49

Table 6b shows the clinical characteristics and laboratory findings in the 13 cases with severe thrombocytopenia (Platelet count less than 100,000/cu mm) in severe PIH group.

lase	Compla	ints	BL.P	Oed- ema	Album- in	Platelet count	S.Creat- inine.	SGOT	LDH	Haemo lysis
10.			(mm Hg)			(/cu mm)	(mg%)	(U/L)	(U/L)	_
1	stric p	pain, vis- sturbances	200/120			90,000				
2		liver and	160/110	+++	+++	100,000	1.2	103	478	Yes
3	No comp	laints	160/120	+++	+++	100,000	1.8	73	388	No
4	Jaundic liver	e, tender	180/110	+++	+++	95,000	1.8	33	560	Yes
	Headach stric p vomitin	ain, and	180/140	++++	+++	100,000	1.8	34	353	No
	stric p	e, epiga- ain and disturb-	180/130	+++	+++	100,000	1.8	33	360	No
		e, and ric pain	200/130	+++	+++	90,000	1.9	101	491	No
	Headach stric p vomitin	ain and	180/120	+++	+++	90,000	1.8	33	590	No
9	No comp	laints	160/110	++	+++	100,000	1.9	50	430	No
:		ain and	180/110	+++	+++	95,000	1.9	69	470	No
	Headach									* • *
	-	ric pain	170/120	+++	+++	90,000	1.3	27	438	No
	No comp		160/110	++	+++	100,000	1.1	103	310	No
3 1	No comp	laints	190/150	+++	+++	100,000	1.3	47	410	No
h	Mean	Syst.	176.9			88461.538	1.42	59.15	440	
		Diast.	122.3						edecat (\$0)	
c	BD±	Syst.	14.366			4634 043	0 204	20 642	70.0	
3	, , ,	Diast.	12.3			4634.043	0.304	28.649	79.8	

Table 7 shows the incidence of thrombocytopenia in relation to age, gestational age and systolic and diastolic blood pressure. This table shows that in both mild and severe PIH, there was no statistically significant difference in the number of patients with thrombocytopenia in the age group 19-25 and 25-52 years, nor in those with a gestational age of 30-36 and 36 to 42 weeks (P: N.S). On the other hand, the number of cases with thrombocytopenia increased significantly with increased levels of systolic B.P. in both mild PIH (P< 0.001), severe PIH (P< 0.05) and diastolic B.P. in severe PIH (P< 0.05).

Table 7 incidence of thrombocytopenia in relation to age, gestational age, systolic and diastolic blood pressure.

Parameter				Severe PIH (n=30)			
Parameter	No.		. P	No.	Thrombocyt	P	
Age (years)		9					
19-25	19	3 (16%)		20	14 (70%)		
25-32	11	3 (27%)	N.S	10	10 (100%)	N.S	
Gest. age (Weeks) 30-36	23	4 (17%)	N.S	21	15 (71%)	N.S	
36-42	7	2 (28%)	5	9	9 (100%)	11.5	
Systolic B.P. (mm Hg) 140-145	14	0 (00.0%)	P <0.00	,			
145-150 160-185	16	6 (73.5%)	P (0,00.	25	19 (76%)	<0.05	
185-210	-			5	5 (100%)	(0.05	
Diastolic B.P. (mm Hg)							
90-95	13	2 (15%)	и.s				
95-100 110-130	17	4 (23.5%)	n.5	26	 20 (77%)	40.05	
130-150				4	4 (100%)	<0.05	

Table 8 shows the incidence of thrombocytopenia in relation to oedema, albuminurla and symptoms of severe PIH. This table shows that the incidence of thrombocytopenia increased significantly with the severity of albuminuria, Morever, it increased only in cases with symptoms of severe PIH.

Table 8:Thrombocytopenia in relation to oedema, albuminuria and symptoms of severe PIH.

Parameter	М	PIH	Severe PIH					
	cases		hrombocyt.	P	No. cases	T	hrombocy	
Oedema								
Nil	9	0						
+	8	1	(12.5%)					
++	13	5	(31.0%)	N.S	7	4	(57.1%)	
+++	0	0			23	20	(86.9%)	N.S
Albuminuria								
+	10	0	(0.0%)	N.S				
++	20	6	(30%)	и. 5				
+++	0	0			18	12	(66%)	
++++	0	0			12	12	(100%)	<0.05
Symptoms								
Epigastric pain	-	-			12	7	(87.5%)	
Headache	-	-			18	11	(61%)	
Visual disturbanc	es -	_			5	5	(100%)	
Vomiting	-	-			5	3	(60%)	

Table 9 shows incidence of thrombocytopenia in relation with serum creatinine, SGOT, and LDH. This table shows that the incidence of thrombocytopenia increased as the levels of serum creatinine, SGOT, and serum LDH increased.

Table 9: The incidence of thrombocytopenia in relation with serum creatinine, SGOT, and LDH.

Laboratory	Mil	d PIH (n=		Severe PIH (n=30)			
test	CASES	Thrombocy	P	No.	Thrombocy	P	
Creatinine (mg/dl)							
0.8-1.4	20	0 (0.0%)		10	7 (70%)		
1.5-2	10	6 (60%)	<0.001	20	17 (85%)	N.S	
SGOT (U/L)							
19-49	29	5 (17%)					
50-80 81-110	1	1 (100%) 	<0.05	24	18 (75%)		
111-141				6	6 (100%)	<0.05	
LDH (U/L)							
113-233	28	4 (14%)		2	2 (100%)		
234-354	2	2 (100%)	<0.01	10	5 (50%)		
355-475 476-596	,	<del></del>		11 7	10 (91%) 7 (100%)	N.S	
	~~						

## HELLP SYNDROME

This is a clinical syndrome characterized by: haemolysis (H), elevated liver enzymes (EL) and low platelet count(LP). We found four cases of HELLP syndrome in the group of severe PIH, the clinical and laboratory findings of which are shown in table 10.

Table 10 : clinical and laboratory findings in the 4 cases with HELLP syndrome.

Criteria	Case 1	Case 2	Case 3	Case 4
Age (years)	33	20	21	20
Nausea & vomiting	No	No	No	No
Visual disturbance	Yes	No	Yes	No
Epigastric pain	Yes	Yes	No	No
Headache	Yes	No	Yes	Yes
Ecchymosis	Yes	Yes	Yes	Yes
Platelet count(cu mm)	90,000	100,000	150,000	95,000
Oedema	+++	+++	+++	+++
Jaundice	Yes	Yes	Yes	Yes
Tender liver	No	Yes	No	No
Blood pressure	200/120	160/110	210/120	180/110
Albuminuria	+++	+++	+++	+++
S. Creatinine mg%	1.9	1.2	1.9	1.8
SGOT U/L	63	103	141	33
LDH U/L	442	478	460	560

By using the correlation coefficient we found that In mild cases with PIH, there was no significant correlation between thrombocytopenia and age, gestational age, and SGOT, but there was a significant correlation between thrombocytopenia, and systolic blood prssure, serum creatinine, and LDH. In cases with severe PIH, we found significant correlation between thrombocytopenia and age, gestational age, systolic blood pressure, serum creatinine and SGOT, while there was a significant correlation between thrombocytopenia and diastolic blood pressure, and LDH (Table 11).

Table 11 Correlation coefficient between thrombocytopenia, and age, gestational age, systolic blood pressure, diastolic blood pressure, serum creatinine, SGOT, and LDH in mild and severe PIH.

PIH	Gest.age age		Systolic B.P.	Diastolic B.P.	S.Creati- nine	SGOT	T LDH
Mild	r278	r089	r464	r079	ř573	r273	r377
	N.S	N.S	P<0.01	N.S	P<0.001	N.S	P<0.05
Severe	r183	r072	r283	r460	r167	r196	r466
	N.S	N.S	N.S	P<0.01	N.S	N.S	P<0.01

By using the correlation coefficient between thrombocytopenia and the clinical findings and laboratory invistigations in the 60 cases with mild and severe PIH. (table 12), we found no significant correlation between thrombocytopenia and age, and gestational age, but we found a significant correlation between thrombocytopenia and systolic blood pressure, diastolic blood pressure, serum creatinine, SGOT and LDH.

Table 12Correlation coefficient between thrombocytopenia and age, gestational age, systolic and diastolic blood pressure, and serum creatinine, SGOT, and LDH.

P.C	Varia- ble	Age	Gest. age	Syst. B.P	Diast. B.P	Creati nine	- SGOT	LDH
In both mild		r0349	r099	r710	r699	r593	r273	r765
and se	evere	N.S	N.S	P<0.001	P<0.001	P<0.001	P.O. 05	P<0.001
			Second and the second s					

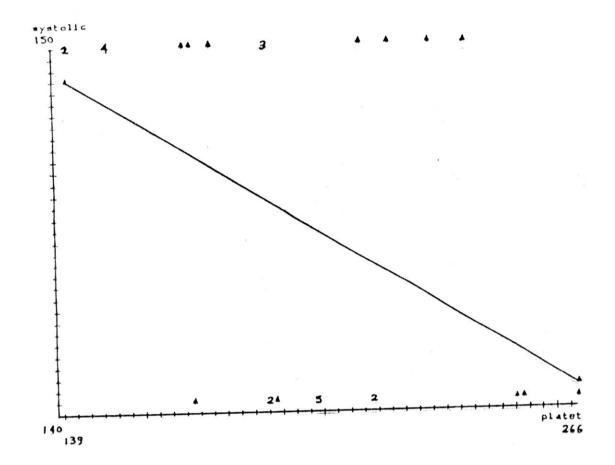


Figure (5): Shows the correlation between platelet count and systolic blood pressure in mild PIH. There was a significant inverse correlation between the level of systolic B.P and platelet count.

r = -.464

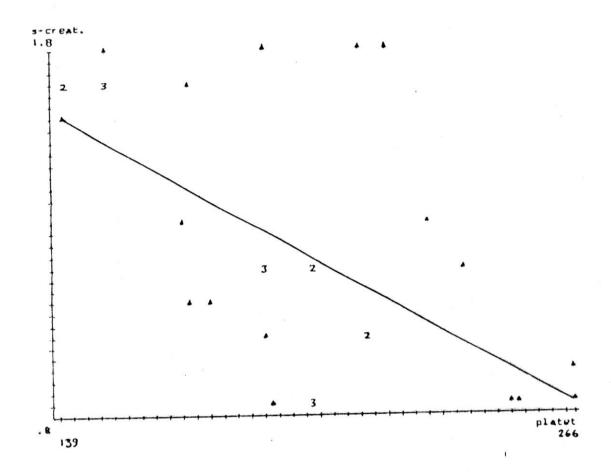


Figure (6): Shows the correlation between platelet count and serum creatinine in mild PIH. There was a significant, inverse correlation between level of serum creatinine and platelet count.

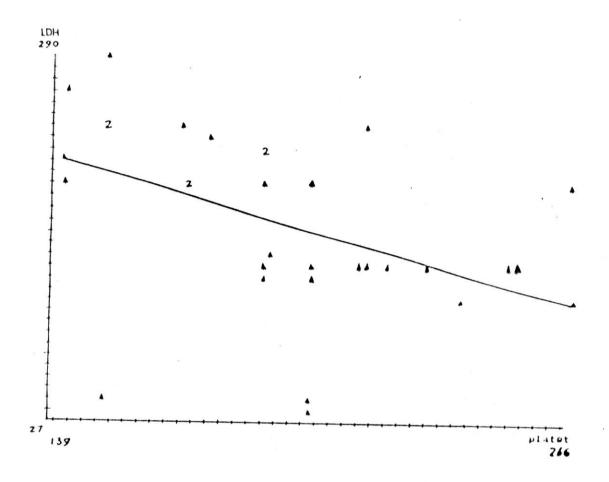


Figure (7): Shows the correlation between platelets count and LDH in mild PIH. There was a significant, inverse correlation between the level of LDH and platelet count.

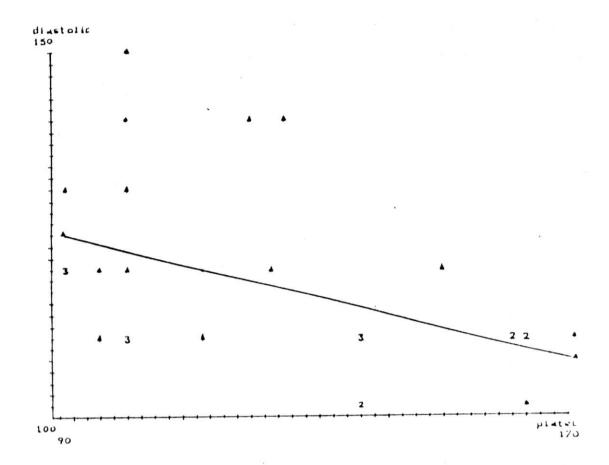


Figure (8): Shows the correlation between platelet count and diastolic blood pressure. There was significant, inverse correlation between level of diastolic blood pressure and platelet count.

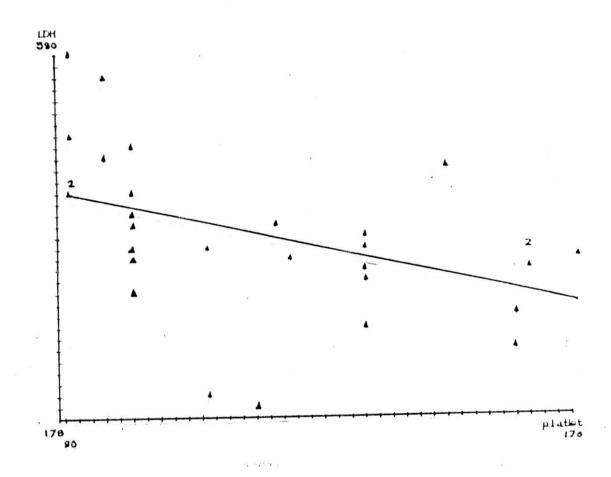


Figure (9): Shows the correlation between platelet count and serum LDH in severe PIH. There was significant, inverse correlation between level of LDH and platelet count.

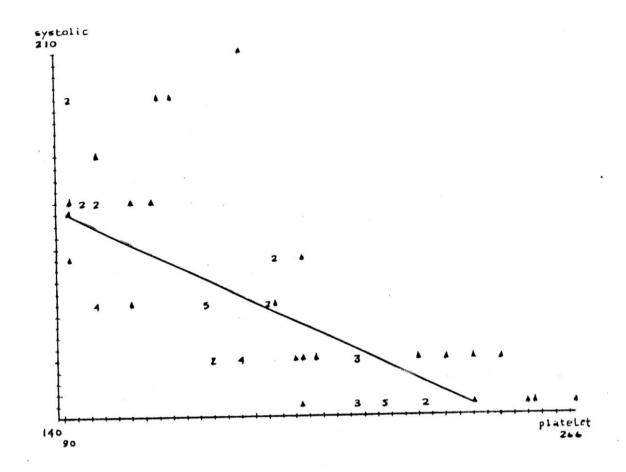


Figure (10): Shows the correlation between platelet count and systolic blood pressure in the 60 cases of both mild and severe PIH. There was significant, inverse correlation between systolic Bl.p and platelet count.

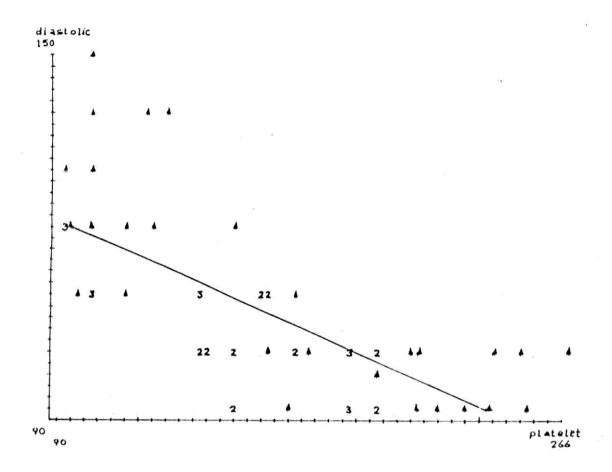


Figure (11): Shows the correlation between platelet count and diastolic blood pressure in the 60 cases of both mild and severe PIH. There was significant, inverse correlation between diastolic Bl.P. and platelet count.

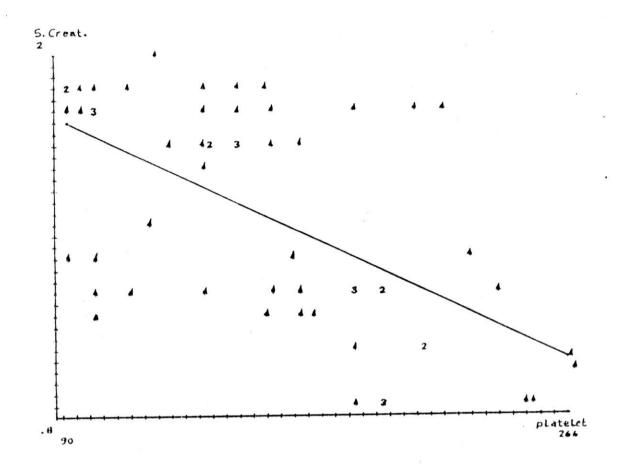


Figure (12): Shows the correlation between platelet count and serum creatinine in the 60 cases of both mild and severe PIH. There was a significant, inverse correlation between serum creatinine and platelet count.

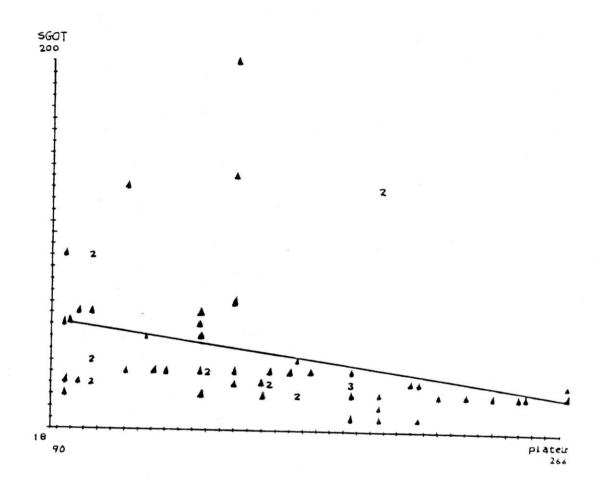


Figure (13): Shows the correlation between platelet count and serum SGOT in the 60 cases of both mild and severe PIH. There was a significant, inverse correlation between serum SGOT and platelet count.

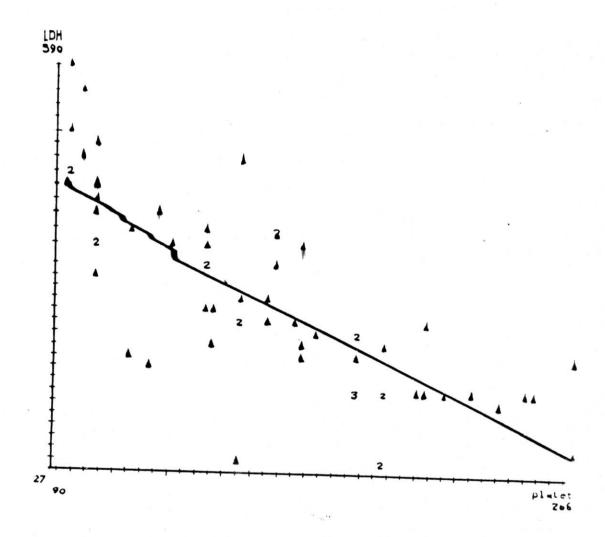


Figure (14): Shows the correlation between platelet count and serum LDH in the 60 cases of both mild and severe PIH. There was a significant, inverse correlation between serum LDH and platelet count.