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Cord Prolapse

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Abstract

Cord prolapse is one of the life threatening obstetrical emergencies during child birth. The fetus is at the risk of developing anoxia due to acute placental insufficiency from the moment the cord is prolapsed. The incidence of cord prolapse is about 1 in 3 hundred deliveries. It occurs mostly in multiparous women. When diagnosis of cord prolapse is made the obstetrician and midwives calls for urgent assistance to prevent complications to the mother and the fetus. The health care professionals must also take judicious judgement and prompt treatment to save the life of mother and fetus.

Keywords: Cord prolapse, Occult Prolapse, Cord Presentation, Deceleration of fetal heart rate, fetal soufflé, vasospasm

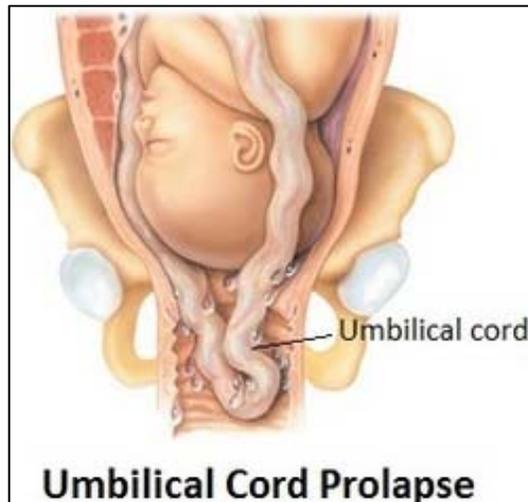
Introduction

Cord Prolapse

The cord prolapse is defined as the prolapse of umbilical cord which lies side or below the level of presenting part. The incidence of cord prolapse is about 1 in 300 deliveries. It is mostly confined to parouswomen. Incidence is reduced with the increased use of elective CS in noncephalic presentations.

Case study of Mrs. X

Mrs.x, 30 years old women presented with cord prolapse during first stage of labour after rupturing of membranes. The immediate first aid management like oxygen administration like face mask was provided, oxytocin drip was stoped and lifted the presenting part of the cord with gloved fingers and introduced into the vagina and the women was kept trendelenburg's position. Forceps delivery was done to avoid fetal complications.



Types

There are three clinical types of abnormal descent of the umbilical cord by the side of the presenting part. all these are placed under the heading cord prolapse.

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fetal mortality can be reduced to 5010%.

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