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Early Pyelonephritis Tied To Lack of Prenatal Care

BY KATE JOHNSON

MONTREAL — Women who have not yet established prenatal care have a significantly higher rate of acute pyelonephritis before 12 weeks of gestation compared with women who already have an obstetric provider by 12 weeks, based on results of a retrospective study.

“Many providers do not see patients early in the first trimester, because they often like to ensure there is an established pregnancy. But we would encourage them to have patients present as early as possible, at least for labs and urine screening,” said Dr. Mollie Ann McDonnold, who presented her findings at the annual meeting of the Infectious Diseases Society for Obstetrics and Gynecology (IDSOG).

Her retrospective study examined 254 consecutive hospital admissions for acute pyelonephritis in pregnancy between January 2004 and June 2007. Overall, there were 29 cases (11%) occurring before 12 weeks’ gestation, and 60 cases (24%) before 16 weeks’ gestation.

Among women who had already established prenatal care (219), most infections occurred later in pregnancy, with only 5% of cases occurring before

‘This is a caution to see women earlier [in the first trimester of pregnancy] at least for urinalysis’ to prevent these early cases of acute pyelonephritis.

12 weeks, and 16% occurring prior to 16 weeks of gestation. However, among women without prenatal care (35), 51% of cases presented prior to 12 weeks and 74% occurred prior to 16 weeks of gestation.

“These results were expected as it is not common to establish prenatal care prior to 12 weeks,” said Dr. McDonnold of Brown University, Providence, R.I.

There were no differences in age, ethnicity, parity, length of hospital stay, presence or degree of fever, or heart rate at admission between women with or without established prenatal care.

However, there was a statistically significant difference in insurance between the groups. While 57% of women with no prenatal care had no insurance, only 1.6% of women with prenatal care were in this situation. And 24% of women with prenatal care had private insurance, compared with just 2.4% of women without prenatal care.

“I think this is an extremely important observation,” commented Dr. Michael Gravett, president of IDSOG and professor of obstetrics and gynecology at the University of Washington in Seattle.

“The trend in prenatal care is that since we now do a lot of prenatal diagnosis, we frequently defer initiation of care and labs until about 12 or 13 weeks. This is a reminder that common things occur more commonly and we tend to overlook them. This is a caution to see women earlier at least for urinalysis,” the physician said. ■



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