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Abbreviations

- IL-6 - interleukin-6
- TNF- α - tumor necrosis factor- α
- PROM - premature rupture of membranes
- FIRS - fetal inflammatory response syndrome
- ELISA - the enzyme-linked immunosorbent assay

Background

- Preterm PROM occurs in 3 percent of all pregnancies and is associated with intrauterine infection.
- FIRS is the heaviest fetal damage due to intrauterine infection.
- The choice of preterm PROM management requires balancing the benefits of pregnancy prolongation and the risk of FIRS.
- Most of the tests to predict FIRS are an invasive procedures or tests of maternal serum that have moderate prognostic value.

Objectives of the study

1. To determine the cut-off and prognostic value of IL-6 in vaginally obtained amniotic fluid for FIRS in patients with preterm PROM.
2. To determine the cut-off and prognostic value of TNF- α in vaginally obtained amniotic fluid for FIRS in patients with preterm PROM.

Methods

- A prospective case-control study
- Participants: 40 women with preterm PROM and their neonates

Vaginal collection of amniotic fluid (less than 24 hours before delivery)

The measurement of IL-6 and TNF- α levels by the ELISA

Groups of participants

Control group

Patients, whose neonates had FIRS

Case group

Patients, whose neonates did not have FIRS

Statistical analysis to compare IL-6 and TNF- α levels between groups and to compute the cut-off value for FIRS

Results

Characteristics	Median \pm SE	
	Control group (N=23)	Case group (N=17)
Age (years)	30 \pm 1.7	30 \pm 1.5
Gravity	2.0 \pm 0.3	2.0 \pm 0.5
Parity	2 \pm 0.2	1.0 \pm 0.3
Gestation (weeks)	33.0 \pm 0.4	32 \pm 0.7
PROM to delivery interval (mins.)	2438 \pm 771	686 \pm 1428.3
White blood cells ($\times 10^7/L$)	12.4 \pm 0.8	11.5 \pm 1.2
C-reactive protein (mg/l)	3.3 \pm 4.1	11.9 \pm 4.7
Neonatal birth weight (grams)	2070 \pm 102.6	1510 \pm 141.8
Apgar score after 1 min.	8 \pm 0.1	7 \pm 0.5
Apgar score after 5 min.	9 \pm 0.2	9 \pm 0.5
pH of umbilical artery	7.35 \pm 0.01	7.37 \pm 0.02

Table 1. Maternal and neonatal characteristics

	Control group	Case group	p-value
IL-6 (pg/mL)	633,5	1562,5	0,02
TNF- α (pg/mL)	9,7	74,9	0,002

Table 2. Median concentrations of amniotic fluid IL-6 and TNF- α

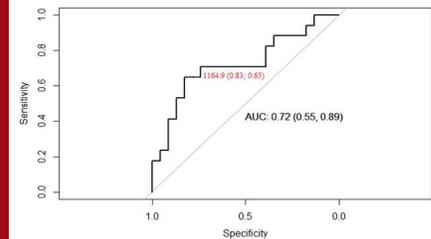


Figure 1. ROC curve and the cut-off value of IL-6

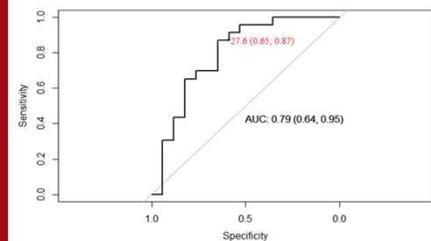


Figure 2. ROC curve and the cut-off value of TNF- α

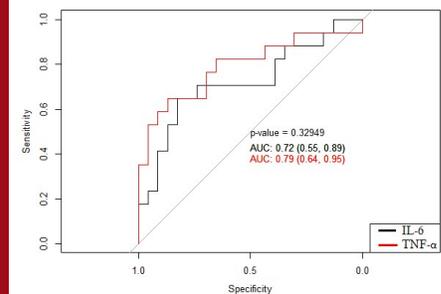


Figure 3. Comparison of the ROC curves of IL-6 and TNF- α

Conclusions

1. The cut-off value of 1164.9 pg/mL for IL-6 and 27.6 pg/mL for TNF- α in vaginally obtained amniotic fluid seems to be a good predictive factor for FIRS.

2. The non-invasive collection and analysis of amniotic fluid could be an alternative for diagnostic amniocentesis.