LIPID PEROXIDATION IN CORD BLOOD AT BIRTH: THE EFFECTS OF BREECH DELIVERY

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ABSTRACT

OBJECTIVE: The purpose of this study was to determine oxygen free radical activity in breech presentation at birth and relate it to umbilical cord blood acid-base status.

DESIGN: A series of 63 singleton deliveries (28 cephalic deliveries (controls), 23 breech deliveries with normoacidemia, and 12 breech deliveries with mild acidemia) had determination of malondialdehyde and acid-base parameters.

SETTING: Delivery suite in the Department of Obstetrics and Gynaecology at Süleyman Demirel University, Isparta, Turkey.

POPULATION: 63 singleton term deliveries, spontaneous or induced labour and initially normal fetal heart rate tracing.

METHODS: After delivery, umbilical cord arterial and venous blood samples were collected for determination of malondialdehyde. Oxygen saturation, PO₂, PCO₂, pH, and base excess (BE) were also measured.

MAIN OUTCOME MEASURES: Umbilical cord arterial and venous bloods gases and malondialdehyde levels.

RESULTS: There was a significant correlation between umbilical arterial and venous levels of malondialdehyde and all acid-base parameters (p<0.001). It has been found that there were negative correlations between malondialdehyde and pH, PO₂ and bicarbonate while there was a positive correlation between malondialdehyde and PCO₂. A positive correlation between malondialdehyde and base excess was present in the control group and total breech group (n=35). The malondialdehyde levels in the total breech group, nonacidemic breech group (n=23) and mildacidemic breech group (n=12) were significantly higher than those in the control group (p<0.0001). However, acid-base parameters in the nonacidemic breech group were not statistically different from those in the control group.

CONCLUSION: Lipid peroxidation products (malondialdehyde) were found to exist to some extent in the umbilical cords of newborns with normal acid-base parameters in breech delivery. Our data support the contention that lipid peroxide may be a more appropriate outcome measure than acid-base balance.