86 years, number of pregnancy 2.46 ± 1.89 , time of married 65.75 ± 55.16 month. Average Rosenbaum Learned Resourcefulness scale scores were 121.64 ± 17.33 on first three days in postpartum. In this scale is possible scores range from 36-180.

FCP89

THE EFFECT OF MINIDOSE BUPIVACAINE-FENTANYL SPINAL ANESTHESIA ON NAUSEA AND VOMITING IN CESAREAN SECTION

Seidhejazie M., Maderek E.O.S., Najati N., Tabriz University of Medical Sciences, Tabriz - Iran

Objective: Spinal anesthesia for cesarean section is associated with high incidence of nausea and vomiting . The synergism between intrathecal opioids and local anesthetics may make it possible to achieve reliable spinal anesthesia with minimal side effects.

Methods: 40 patients aged 17-35 which underwent cesarean section randomized into two groups. Half of them in group A received spinal anesthesia with Bupivacaine 6 miligram + Fentanyl 10 microgram and group b received only 12 miligram Bupivacaine. Hypotension was defined as a systolic pressure of less than 90 mmHg or 25% decrease in mean arterial pressure from baseline.

Results: All patients except one in group a had satisfactory anesthesia. The mean ratio of lowest systolic pressure to baseline systolic pressure was 0.75 for group A and 0.65 for group B. Nausea and vomiting was observed in 10% of group A and 20% of group B (P<0.05).

Conclusion: Minidose Bupivacaine-Fentanyl provides good spinal anesthesia for cesarean section with less hypotension, nausea and vomiting.

FCP90

THE ASSOCIATION BETWEEN INDUCED ABORTION AND LOW BIRTHWEIGHT IN THE FOLLOWING PREGNANCY

Tzemos T., Panagopoulos P., Eliades M., Kotsakos G., Chronopoulos P., Kanellopoulos N., Department of Ob/Gyn, "Tzaneio" General Hospital, Piraeus - Greece

Objective: Our purpose was to examine whether first trimester induced abortion increases the risk of low birthweight in subsequent singleton live births.

Methods: We studied all the women that gave birth in our department between July 1996 and June 2002, and we divided them in three groups: Group A consisted of 496 women that had at least one induced abortion before the live birth delivery, Group B consisted of 239 women that had at least one spontaneous abortion before the live birth delivery and Group C consisted of 682 women that had never had an abortion before the live birth delivery. All the women of the study gave birth after the 259th day of pregnancy (using both LMP date and ultrasound estimation before the 56th day of pregnancy).

Results: In Group A low birthweight (LBW, <2500 gr.) was found in 7,25% of term pregnancies [6% in first pregnancy (17), 8,3% in second pregnancy(16), 13,6% in third pregnancy(3)]. In Group B LBW was found in 5% of term pregnancies [3,7% in first pregnancy (4), 5,7% in second pregnancy (6), 7,1% in third pregnancy (2)]. In Group C LBW was found in 4,1% of term pregnancies [3,03% in first pregnancy (10), 4,96% in second pregnancy (14), 5,63% in third pregnancy (4)].

Conclusion: Our findings suggest that there is a possible relation between induced abortion and low birthweight in the subsequent singleton live births, but it is not statistically significant. Parity seems to be an independent factor for low birthweight.