

Adolescent Deliveries in Owo, Ondo State; its Prevalence and Obstetrics Outcome

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ABSTRACT

Background: Adolescent pregnancy is a pregnancy in a biologically, physically and psychologically developing girl child between the ages of 10 - 19 years. It is a public health and social problem worldwide. In recent years, there has been an increased interest in and concern about the problem of adolescent pregnancy and parenthood. Too young and too early parenthood can affect the obstetrics outcome and even future reproductive performance in a girl child.

Aim: To determine the prevalence and obstetric outcomes of teenage pregnancy carried to viability at Federal Medical Centre Owo, Ondo State, Nigeria.

Methods: A retrospective case review of all teenage pregnancies carried to viability seen at the Federal Medical Centre Owo between January 1, 2018, and December 31, 2023. Information was obtained from the hospital records. Data obtained was then coded, cleaned and analyzed using IBM SPSS version 21.0 software. Descriptive statistics such as frequency, means and percentages were used to summarize the data. Chi square test was used to establish whether there is any association between variables.

Result: Adolescent pregnancy was present in 2.0% of the 4,928 pregnancies and deliveries records that were reviewed. Obstetric outcomes of the adolescent pregnancies revealed 77 (78.6%) spontaneous vaginal births, 21 (21.4%) delivered by caesarean section and 2 (1.0%), instrumental deliveries. Foetal distress, cephalopelvic disproportion and pre-eclampsia were the most often seen problems among teenage pregnant women.

Conclusion: This study showed prevalence of adolescent pregnancy of 2.0 % which was less than national average, the obstetrics outcomes appear to increase the risks to the teenage mothers.

Keywords: Adolescent Delivery, Girl Child, Teenage Pregnancy, Adolescent Pregnancy

Introduction

Adolescent pregnancy is a global phenomenon with a predictable aetiology, adverse health outcomes and socioeconomic consequences. Globally, the adolescent birth rate (ABR) varies widely across regions [1]. There are also obvious variations in levels between and within countries. Adolescent pregnancy tends to be higher among those with less education or of low economic status. Child marriage and child sexual abuse place girls at increased risk of pregnancy, often unintended [1,2]. There are about 400,000 unplanned births occur annually in

Nigeria [3]. Half of these births, she noted were to single girls between the ages of 15 and 19 years [3]. In thirty-one countries where data were available, fertility rates among women aged 15 to 19 years were high with an average of 164 live births annually [4]. Among the teenage girls in Nigeria, pregnancies are a common problem. This might be because of high rate of premarital sexual activities among teenagers especially in mixed schools [1,5]. A retrospective study performed over a period of 4 years in Niger Delta University teaching hospital showed that out of 1341 deliveries during the study period, 6.2% (83) were teenagers [5]. The medical, social and economic cost of unplanned teenage pregnancies can be devastating to mothers and their children [4,6]. Teen mothers are more likely to have

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medical complications during pregnancy and prolonged labor. Their babies are more likely to be born prematurely and to have low birth weights. These are caused by inadequate prenatal care and poor nutrition often experienced by teenage mothers living in conditions of poverty [7]. Most of the previous studies considered all the teenage pregnancies without preference to those carried to age of viability. A large proportion of teenage pregnancies ended in miscarriages; both spontaneous and largely induced [4,5]. Teenage mothers were significantly more likely to be unbooked, unmarried, and had significantly more preterm labor and caesarian sections [1,2,5,6]. This study was done to determine the prevalence and obstetric outcomes of teenage pregnancy carried to viability at Federal Medical Centre Owo, Ondo State, Nigeria over a period of five years.

Methods

This was a retrospective study done at Federal Medical Centre (FMC) Owo, Ondo State to study the prevalence of teenage pregnancy in the study area from January 2018 to December 2023. FMC Owo serves as referral centre for most other health facilities within Ondo State as well as neighbouring State. The population of this study included all pregnant women who presented in labour after age of viability of 28 weeks. The total population of deliveries after age of viability in this study was obtained after careful observation of the labour ward register and where a total of 4928 deliveries between the period under review. Data extracted from the records also included age of pregnant women, mode of delivery and obstetrics outcome. Data was then coded, cleaned and analyzed using IBM SPSS version 21.0 software. Descriptive statistics such as frequency, means and percentages were used to summarize the data. Chi square test was used to establish whether there is any association between variables.

Results

Results of data obtained was presented and analyzed below.

Table 1: Demographic presentation of pregnant women between January 2018 and December 2023

Age	Number of pregnant women	Percentage (%)
<13	1	0.02
13-19	99	2.0
20-26	1675	34.0
27-33	1692	34.3
34-40	910	18.5
41-46	550	11.2
>47	1	0.02
Total	4928	100

From the results obtained, a total of 4,928 pregnant of which majority (34.3%) and (34.0%) were aged group 27-33 and 20-26 respectively. The prevalence of teenage pregnancy (13-19yrs) was 2.0%.

Mode of delivery among teenage pregnancy

From the Figure 1.0, majority of teenagers delivered via SVD (78%), while abdominal delivery was done for 21% of the teenagers.

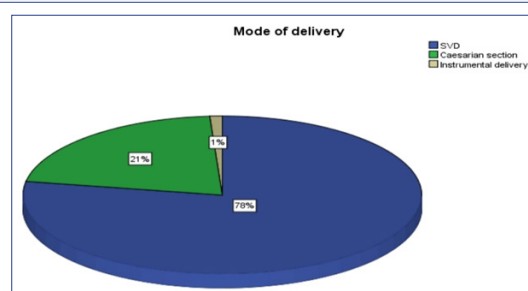


Figure 1: Mode of delivery among pregnant teenagers

Peripartum complications encountered

From the chart above, majority of women (47/99) had no complications at delivery, however fetal distress and preeclampsia were the commonest complications accounting for 15/99 and 10/99 respectively.

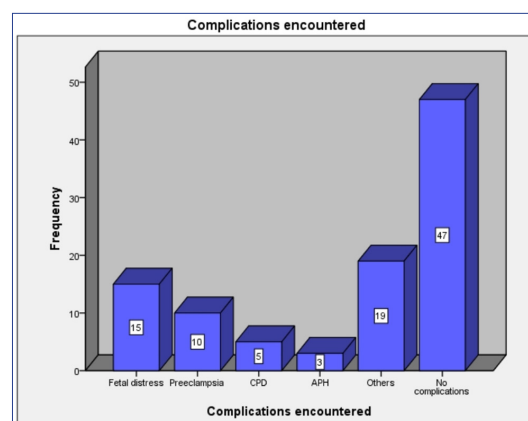


Figure 2: Peripartum complications encountered with teenage pregnancies

Discussions

Over this five-year period of review, a total of 4,928 pregnant women delivered of which majority (68.3%) were aged group 20-33 years. Pregnant teenagers were 99 women of the total parturients reviewed. The study showed that the prevalence of teenage pregnancy over a period of 5 years amongst the study population was approximately 2.0%. This is lower than that of study conducted by Rojas in a general hospital in Columbia in 2020 where prevalence of teenage pregnancy was 31.9% and also lower than Nigeria survey of 218 with 18.7% [6,7]. The disparity here could possibly be due to the difference in urbanization of the study area which possibly may have an effect on the prevalence or the duration under study. Other factors that may have contributed includes socioeconomic status of individuals in the community, home deliveries of teenagers to cover shame and access to family planning services [7,8]. However more studies is required to determine the relationship between these variables and the prevalence of teenage pregnancy. This prevalence is also lower than that reported by Akanbi et al in 2021 however, most of the study considered all pregnancy irrespective of outcome or carried to age of viability compared to the 2.0% in this current study where only teenage pregnancies carried to age of viability and hospital delivery were studied [9]. Mayor believed that teenage pregnancy is a delinquent behavior resulting from stress, dislike, malice, boredom and unhappiness experienced by a teenage girl within her home environment [10]. Other predisposing factors include alcoholism, drug addiction, and sexual promiscuity [10-15]. According to Kinby, victims

of teenage pregnancy lacked information or probably were not adequately educated on safe-sex either by their parents, schools or development agencies that could have enabled them deal with friends who lure them into sex prematurely. He stressed further that children of single parents are more vulnerable to teenage pregnancy [15]. In the same vein exposure to sexual content on television, sexuality in the media, pornographic and sex chat rooms by teenagers, could most likely tune them to engage in sexual activities [7,11-14]. Acceptance of gift for sex and some adult deliberately taking advantage of poor teenagers, encouraging them into having sex were also noted as factors responsible for teenage pregnancy [3,6,14,15]. Yampolslaaya, Brown and Greenbaum (2002) posited that approximately 60% of adolescent mothers live in poverty at the time of the birth of their babies and “approximately 73% go on welfare within 5 years of giving birth”, its associated motherhood are characterized with shame, disgrace, and school dropout sometimes end up the individual’s dreams of achieving higher pursuits [16]. This prevalence however is also lower than that of a retrospective study performed over a period of 4 years in Niger Delta University teaching hospital showed that out of 1341 deliveries during the study period, 6.2% (83) were teenagers [5]. In addition to the individual level factors of education, attitude, analyzed number, countries profiles, and accomplishments in pregnancy and early motherhood might affect the overall burden of teenage pregnancy [5,11,12]. Majority of teenagers under review delivered via SVD (78%), while abdominal delivery was done for 21% of the teenagers. Also, significant number of women 47.5% had no complications at delivery, however fetal distress and preeclampsia were the commonest complications encountered at 15.2% and 10.1% respectively. This is similar to that of a retrospective study performed over a period of 4 years in Niger Delta University teaching hospital where teenage mothers were significantly more likely to be unbooked, unmarried, and had significantly more preterm labor and caesarian sections [5].

Conclusion

Teenage pregnancy has a detrimental effect on the education and future plans of teenagers. This is because the teenage mothers attend school irregularly and sometimes drop out of school. Teenage pregnancy is a social as well as an economic issue as it portends low education and employment, high rate of poverty and the psycho-social stigma it carries more so when it is out of wedlock. The correlation between earlier childbearing and failure to complete high elementary school reduces career opportunities for many young mothers.

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