

# Endometriosis and obstetric outcomes among nulliparous women: an unicentric retrospective cohort study

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Objective: The objective of this study was to evaluate the association of endometriosis and impaired obstetrics outcomes among nulliparous women.

Methods: This unicentric exposed/unexposed retrospective cohort study, included all nulliparous women with monofetal pregnancies delivering after 22 WG in the maternity unit of the Cochin-Port Royal hospital, Paris between January 2006 and December 2016. Exposed women –defined as the women presenting a history of endometriosis - were compared to unexposed women. Crude and adjusted odds ratios reflecting the association between endometriosis and preterm birth before 37 WG and other obstetric outcomes were assessed through univariate and multivariate logistic regression

Results: Among 24,343 nulliparous women inutile, 539 (2.21%) presented with endometriosis and 23804 women were unexposed. After adjusting for age, body mass index, geographic origin, and placenta praevia, the endometriosis was significantly associated with prematurity before 37 WG (aOR=1.33 95%CI [1.02 to 1.74], p = 0.034), threatened preterm labor (aOR=1.96 95%CI [1.37 to 2.80], p < 0.001), and preterm premature rupture of membranes (aOR=2.06 95%CI [1.27 to 3.34], p < 0.001). However, endometriosis was not associated with intrauterine growth restriction <10 perc (aOR=0.80 95%CI [0.59 to 1.10], p = 0.17), neither preeclampsia (aOR=1.13 95%CI [0.74 to 1.75]). Endometriosis was associated with increased risk of C-section (aOR=1.33 95%CI [1.14 to 1.55]).

Conclusion: Endometriosis is associated with the risk of premature birth before 37 WG, threatened preterm labor and preterm premature rupture of membranes. The unclear pathogenesis leading to these deleterious outcomes have to be more deeply studied.

Keywords : endometriosis pregnancy outcome preterm birth

Authors :

References : , , ,

## Authors

Louis Marcellin 1, Pietro Santulli 1, Aude Girault 1, Charles Chapron 1, François Goffinet 1,

1. Service de Gynécologie Obstétrique I, Maternité Port Royal, Assistance Publique-Hôpitaux de Paris, Sorbonne Paris Cité Université Paris Descartes, Paris, FRANCE

## Authors (raw format)

Marcellin Louis - email : louis.marcellin@aphp.fr Institution : Sorbonne Paris Cité Université Paris Descartes Department : Service de Gynécologie Obstétrique I, Maternité Port Royal, Assistance Publique-Hôpitaux de Paris City : Paris Country : FRANCE Speaker : Yes

Santulli Pietro - email : pietro.santulli@aphp.fr Institution : Sorbonne Paris Cité Université Paris Descartes Department : Service de Gynécologie Obstétrique I, Maternité Port Royal, Assistance Publique-Hôpitaux de Paris City : Paris Country : FRANCE Speaker : No

Girault Aude - email : aude.girault@aphp.fr Institution : Sorbonne Paris Cité Université Paris Descartes Department : Service de Gynécologie Obstétrique I, Maternité Port Royal, Assistance Publique-Hôpitaux de Paris City : Paris Country : FRANCE Speaker : No

Chapron Charles - email : charles.chapron@aphp.fr Institution : Sorbonne Paris Cité Université Paris Descartes Department : Service de Gynécologie Obstétrique I, Maternité Port Royal, Assistance Publique-Hôpitaux de Paris City : Paris Country : FRANCE Speaker : No

Goffinet François - email : francois.goffinet@aphp.fr Institution : Sorbonne Paris Cité Université Paris Descartes Department : Service de Gynécologie Obstétrique I, Maternité Port Royal, Assistance Publique-Hôpitaux de Paris City : Paris Country : FRANCE Speaker : No

