



Preterm Premature Rupture of Membranes (PPROM)

What is it?

When a woman's water breaks is "rupture of membranes". Premature Rupture of Membranes is when a woman's water breaks before she goes into labor. It is called PROM for short. PPRM, (Preterm PROM) is when this happens when a pregnancy is less than 37 weeks.

Preterm PROM is a problem because labor often begins soon after it happens. Babies who are born before 37 weeks of pregnancy are premature. Premature babies can have health problems. PROM can also lead to problems in the mother, such as an infection in the uterus.

Tests

Your doctor may use a speculum to examine your cervix. They will look to see if amniotic fluid is leaking from your cervix. Your doctor may also do an ultrasound exam to check the amount of amniotic fluid around your baby.

How does this affect my baby?

That depends on many factors such as:

- How early your baby is born
- How developed his or her lungs are
- Whether he or she has an infection.
- Babies who are born very early are more likely to have health problems.
- Please talk with your doctor about your specific situation
- Ask your nurse or doctor about speaking with a NICU doctor

Treatment

All women with preterm PROM need to stay in the hospital until their baby is born. This is so your doctor can follow your pregnancy closely. In many cases, labor starts within 1 week of PROM. If your labor doesn't start on its own, your doctor may give you medicine to help start it. This is called inducing labor. Your doctor is more likely to induce labor if

- You are 34 or more weeks pregnant
- You are less than 34 weeks but there is a problem with your pregnancy or your baby's health. The most common problem that might happen is an infection of the uterus.

If your doctor doesn't deliver your baby right away, he/she might treat you with medicines including

- Medicines called "steroids" to help your baby breathe better when he or she is born. (These steroids are different from the ones athletes take to build muscle). It would be 2 separate shots 24 hours apart.
- A combination of IV and oral antibiotics to help prevent infection.

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Magnesium Sulfate for Neuroprotection

Neuroprotection is a term used to describe protection of the baby's brain for an early (preterm) delivery. Your doctor may choose to start magnesium sulfate if you are less than 34 weeks.

Your doctor will determine the amount of time the magnesium will be used.

What to expect when you're on Magnesium Sulfate

- Hourly checks by your nurse
- Recording your intake (drinks) and output (urine)
- Blood pressure cuff and pulse oximeter (finger probe) on at all times
- Bedside toileting
- Continuous fetal monitoring

Symptoms:

- Headache
- Blurry vision/visual changes
- Hot/sweating/flushed
- Nausea and/or vomiting
- Dry mouth/bad taste in your mouth
- Drowsiness/fatigue/muscle weakness

Information Use and Disclaimer:

This information is not specific medical advice and does not replace information you receive from your health care provider.

Source: Lexicomp Online: Patient Care-Preterm Premature Rupture of Membranes.