

Spontaneous Abortion

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- 1. Occurs before 20 weeks' gestation or when fetus weighs <500 g
- 2. Etiology: chromosomal (50–80%), remainder are immunologic mechanisms, maternal infections, endocrine abnormalities (e.g. poorly controlled DM), uterine anomalies, incompetent cervix, debilitating maternal disease, trauma, and possibly environmental exposures (e.g. irradiation, smoking, certain drugs)
- 3. Threatened abortion: uterine bleeding without cervical dilation <20 weeks gestation
- 4. Inevitable abortion: cervical dilation or rupture of membranes without expulsion of fetus or placenta
- 5. Complete abortion: total, spontaneous rupture of fetus and placenta
- 6. Incomplete abortion: partial expulsion of uterine contents
- 7. Rh negative mothers must receive Rho(D) immune globulin to prevent Rh sensitization