

Correspondence

Fetomaternal and neonatal outcome of triplet pregnancy. *Promising results*

To the Editor

It is of no doubt that multiple pregnancies (MP) are anticipated to continuously increase due to improvements in ovulating drugs and assisted reproduction technologies. The data addressed by Al-Sunaidi and Al-Shahrani¹ really supports other Saudi studies,^{2,3} that MP adversely affects maternal and neonatal outcomes. Although no recent data are yet present on the exact magnitude of MP in the Kingdom of Saudi Arabia (KSA), the available data has shown that triplet pregnancy has an incidence of one in 1,099 deliveries.² Since no information is yet available from randomized controlled trials to support the role of “specialized” antenatal clinics for women with MP compared with “standard” antenatal care in improving maternal and infant health outcomes,⁴ advocating that remains a worthy option in KSA to properly manage mothers with MP. Coinciding with that, efforts should be made to reduce the risk of MP through proper control and close monitoring of fertility drugs, limiting number of embryo transfer to maximum of 3 or only 2, improving the socioeconomic status of expectant mothers, reduce cigarette smoking, relieve maternal stress, restriction of maternal activity, frequent contact with healthcare personnel, and treatment of any obstetric or medical disorders.⁵

Mahmood D. Al-Mendalawi
Department of Pediatrics
Al-Kindy College of Medicine
Baghdad University
Baghdad, Iraq

Reply from the Author

No reply was received from the Author.

References

1. Al-Sunaidi M, Al-Shahrani MS. Fetomaternal and neonatal outcome of triplet pregnancy. Promising results. *Saudi Med J* 2011; 32: 685-688.
2. Al-Suleiman SA, Al-Jama FE, Rahman J, Rahman MS. Obstetric complications and perinatal outcome in triplet pregnancies. *Obstet Gynaecol* 2006; 26: 200-204.
3. Mansouri HA, Ghazawi AH. The maternal and neonatal outcome of high order gestation at King Abdulaziz University Hospital. *Arch Gynecol Obstet* 2007; 275: 89-92.
4. Dodd JM, Crowther CA. Specialized antenatal clinics for women with a multiple pregnancy to improve maternal and infant outcomes. *Cochrane Database Syst Rev* 2007; 2: CD005300.
5. Kurdi AM, Mesleh RA, Al-Hakeem MM, Khashoggi TY, Khalifa HM. Multiple pregnancy and preterm labor. *Saudi Med J* 2004; 25: 632-637.

Related topics

Mathew M, Gowri V. Sickle cell disease in a woman with triplet pregnancy. *Saudi Med J* 2005; 26: 1659-1661.

Ayesh SK, Nassar SM, Al-Sharef WA, Abu-Libdeh BY, Darwish HM. Genetic screening of familial Mediterranean fever mutations in the Palestinian population. *Saudi Med J* 2005; 26: 732-737.

Alsunaidi MI. An unexpected spontaneous triplet heterotopic pregnancy. *Saudi Med J* 2005; 26: 136-138.