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I am an engineer by profession and my husband is a consultant. We have been married for 3 years. I got pregnant when I was 6 months into my marriage but the baby was diagnosed with classic case of IUGR as mentioned by doctors. The case resulted in a pre-term labour and my baby was still born. Now I am pregnant but I am told my baby is around 1 kg at 33 weeks with low amniotic fluid. I am very worried if my case history will repeat or whether the baby will not grow to the healthy weight by the time I am due.

–Neethu Panicker/ Mumbai

Dear Neethu,

Yes, indeed, the issue is IUGR – meaning Intra Uterine Growth Retardation. The present period the baby's weight should ideally be 1.4 to 1.5 kg. The problem of IUGR Intrauterine growth restriction (IUGR) refers to a condition in

which an unborn baby is smaller than it should be because it is not growing at a normal rate inside the womb.

IUGR has many possible causes. A common cause is a problem with the placenta. The placenta is the tissue that joins the mother and

foetus, carrying oxygen and nutrients to the baby and permitting the release of waste from the baby.

The condition can also occur as the result of certain health problems in the mother, such as advanced diabetes, high blood pressure or heart disease, infections such as rubella, cytomegalovirus, toxoplasmosis, and syphilis, kidney disease or lung disease etc.

Once you are diagnosed as having IUGR then the next most important things are to treat any causative factors contributing as I said earlier control of high BP or sugar etc. Do not worry you will definitely be able to have a healthy baby with God's grace and good care

Since you had an IUGR, and a mishap in the past, you should have taken some precautions before the next pregnancy,

like finding about the contributing factors if any and to correct (for eg) obesity, hypertension, diabetes, any blood disorders like APLA syndrome, PCOS etc. Once you are diagnosed with IUGR, then the best way is to take out the baby at a stage where its survival outside the maternal womb will be better than leaving it to grow inside a hostile uterine environment.

But for that you must be in a tertiary care maternity hospital with a strong and efficient team of Foetal Medicine Experts and an excellent Level 3 NICU. We have to monitor the blood flow to the liver and brain of the foetus very frequently, apart from feeding it with some extra nutrients, and take an appropriate decision to take out it say at 27 or 28 or 30 weeks according to the confidence of the neonatology team.

Wish you all the best. ■

