

**INTRODUCTION**

Sickle cell disease is the most common hereditary disorder worldwide with varying impacts on pregnancy outcomes. INDIA accounts for 14.5% of newborns with sickle cell disease. Sickle cell anaemia(HBSS) is associated with severe maternal & perinatal morbidity whereas sickle cell trait carries minimal risk.

**OBJECTIVE**

To analyse maternal and perinatal outcomes in pregnancies with sickle cell anaemia and trait focusing on complications & overall prognosis.

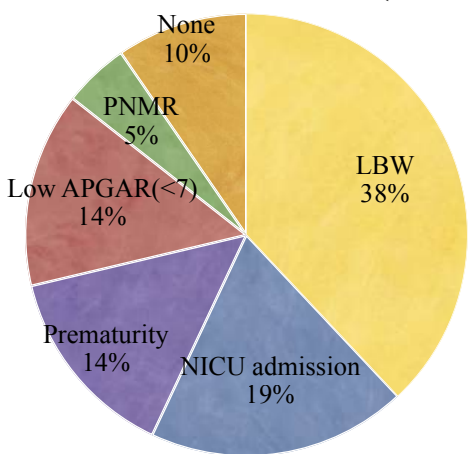
**MATERIAL & METHODS**

A retrospective observational study was conducted in department of OBGY at King George Hospital, Visakhapatnam with a sample size of 100 over 1 year(September 2023-August 2024). The details were collected from hospital records and analysed statistically.

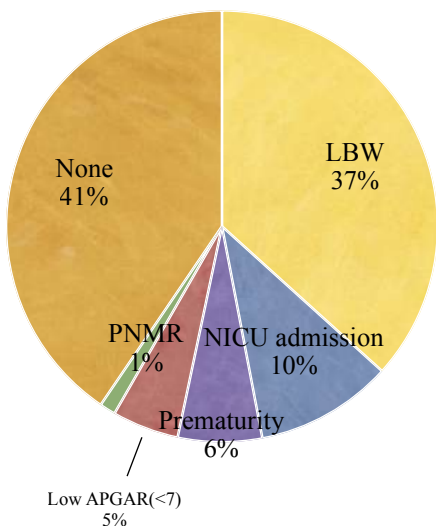
**RESULT** - Out of 100 cases, 21were homozygous sickle cell anaemia & 79 were sickle cell trait.

Maternal outcome	SCA (%)	SCT (%)
Anaemia	14    66	10    13
Vaso-occlusive crisis	4    19	0    0
Hemolytic crisis	1    5	0    0
Pneumonia	1    5	0    0
Oligohydramnios	4    19	4    5
Gestational HTN	4    19	9    11
Preeclampsia	2    10	4    5
Eclampsia	1    5	2    3
HELLP	1    5	0    0
Abruption	1    5	0    0
IUGR	5    23	10    13
GDM	2    10	8    10
Abortion	1    5	3    4
Preterm labor	2    10	5    6
Stillbirth	1    5	0    0
Vaginal delivery	12    57	56    71
Caesarean section	8    38	20    25
Mortality	1    5	0    0

**Fetal & neonatal outcomes(SCA-21)**



**Fetal & neonatal outcomes(SCT-79)**



**CONCLUSION**

There is a high risk of adverse outcomes for women with sickle cell anaemia compared to trait and non sickle cell disease. Tailored management strategies including pre-conceptional counselling, close monitoring and multidisciplinary care are crucial to improve outcomes in these pregnancies.

**REFERENCES**

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2. Colah RB, Mukherjee MB, Martin S, Ghosh K. Sickle cell disease in tribal populations in India. Indian J Med Res. 2015;141:121-7.