

Premature Rupture of Membranes (PROM)/Preterm Premature Rupture of Membranes (PPROM)

What is premature rupture of membranes?

Premature rupture of membranes (PROM) is a rupture (breaking open) of the membranes (amniotic sac) before labor begins. If PROM occurs before 37 weeks of pregnancy, it is called preterm premature rupture of membranes (PPROM).

PROM occurs in about 8 to 10 percent of all pregnancies. PPRM (before 37 weeks) accounts for one fourth to one third of all preterm births.

What causes premature rupture of membranes?

Rupture of the membranes near the end of pregnancy (term) may be caused by a natural weakening of the membranes or from the force of contractions. Before term, PPRM is often due to an infection in the uterus. Other factors that may be linked to PROM include the following:

- Low socioeconomic conditions (as women in lower socioeconomic conditions are less likely to receive proper prenatal care)
- Sexually transmitted infections, such as chlamydia and gonorrhea
- Previous preterm birth
- Vaginal bleeding
- Cigarette smoking during pregnancy
- Unknown causes

Why is premature rupture of membranes a concern?

PROM is a complicating factor in as many as one third of premature births. A significant risk of PPRM is that the baby is very likely to be born within a few days of the membrane rupture. Another major risk of PROM is development of a serious infection of the placental tissues called chorioamnionitis, which can be very dangerous for mother and baby. Other complications that may occur with PROM include placental abruption (early detachment of the placenta from the uterus), compression of the umbilical cord, cesarean birth, and postpartum (after delivery) infection.

What are the symptoms of PROM?

The following are the most common symptoms of PROM. However, each woman may experience symptoms differently. Symptoms may include:

- Leaking or a gush of watery fluid from the vagina
- Constant wetness in underwear

If you notice any symptoms of PROM, be sure to call your doctor as soon as possible. The symptoms of PROM may resemble other medical conditions. Consult your doctor for a diagnosis.

How is premature rupture of membranes diagnosed?

In addition to a complete medical history and physical examination, PROM may be diagnosed in several ways, including the following:

- An examination of the cervix (may show fluid leaking from the cervical opening)
- Testing of the pH (acid or alkaline) of the fluid
- Looking at the dried fluid under a microscope (may show a characteristic fern-like pattern)
- Ultrasound. A diagnostic imaging technique that uses high-frequency sound waves and a computer to create images of blood vessels, tissues, and organs. Ultrasounds are used to view internal organs as they function, and to assess how much fluid is around the baby.

Treatment for premature rupture of membranes

Specific treatment for PROM will be determined by your doctor based on:

- Your pregnancy, overall health, and medical history

- Extent of the condition
- Your tolerance for specific medications, procedures, or therapies
- Expectations for the course of the condition
- Your opinion or preference

Treatment for premature rupture of membranes may include:

- Hospitalization
- Expectant management (in very few cases of PPRM, the membranes may seal over and the fluid may stop leaking without treatment, although this is uncommon unless PROM was from a procedure, such as amniocentesis, early in gestation)
- Monitoring for signs of infection, such as fever, pain, increased fetal heart rate, and/or laboratory tests.
- Giving the mother medications called corticosteroids that may help mature the lungs of the fetus (lung immaturity is a major problem of premature babies). However, corticosteroids may mask an infection in the uterus.
- Antibiotics (to prevent or treat infections)
- Tocolytics. Medications used to stop preterm labor.
- Women with PPRM usually deliver at 34 weeks if stable. If there are signs of abruption, chorioamnionitis, or fetal compromise, then early delivery would be necessary.)

Prevention of premature rupture of membranes

Unfortunately, there is no way to actively prevent PROM. However, this condition does have a strong link with cigarette smoking and mothers should stop smoking as soon as possible.

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