Antibiotic treatment of patients with term Premature Rupture Of Membranes: A randomized clinical trial



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Background/objective: Subclinical microbial invasion of the amniotic cavity in patients with premature rupture of membranes (PROM) at term occurs in 34% of cases and is a risk factor for puerperal endometritis. This study was conducted to determine whether antibiotic administration to women with PROM at term could reduce the rate of infection-related morbidity. Study design:

Between August 1990 and December 1993, patients with term PROM were randomly allocated to receive either cefuroxime-clindamicin or placebo. Results: Fifty-five patients received intravenous antibiotics and 50 patients received placebo. Patients allocated to the antibiotic group had a lower incidence of maternal infection-related morbidity (clinical chorioamnionitis and puerperal endometritis) than patients who received placebo (1.8% (1/55) vs. 16% (8/50), respectively, p < 0.05). No significant differences were found in other maternal and neonatal outcomes between the two groups. Conclusion: Administration of antib