

Ascending Infection

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Introduction

Ascending infection of the intra-amniotic space is a complex problem. Although we have associated intact membranes as an absolute barrier to ascending bacteria from the lower genital tract, there are a number of studies to suggest that this is not always the case. NAEYE has shown that intrauterine infection is a frequent etiologic factor in premature labor and delivery, while BOBITT and LEDGER have shown that heavy bacterial contamination is present in the amniotic fluid of women in premature labor with membranes intact. At the other extreme, although we are justifiably concerned about the relationship of prolonged rupture of membranes to both maternal and fetal infection, the evidence is strong that both of these events occur infrequently in the patient with prolonged rupture of membranes. Recent studies at the University of Southern California suggest that patients at high risk for the development of infection can be identified by the use of transabdominal amniocentesis and microscopic evaluation of the amniotic fluid. The best management of the patient with chorioamnionitis is not apparent as yet. Recent data suggests that close monitoring of the fetus and mother during labor precludes the necessity for immediate delivery in these patients. Our panel of distinguished speakers today will now evaluate individual aspects of the microbiology of ascending infection, as well as the measures of prevention and treatment.

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