

Pregnancy outcome: is there any difference depending on sexual gender?

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Several studies have suggested that pregnancies with male fetuses are associated with higher rates of labor dystocia, cord problems and fetal distress; on the contrary, few studies have focused on gender differences as a major topic. Higher rates of fetal distress, low Apgar scores and perinatal mortality among male infants have recently been found. Likewise, it has also been demonstrated that male infants are significantly more likely to require instrumental or caesarean deliveries than female infants. The present study aims at investigating complications and outcome of pregnancies according to fetal gender. Patients carrying male fetuses had higher rates of gestational diabetes mellitus, fetal macrosomia, failure to progress during the first and second stages of labor, cord prolapse, nuchal cord and true umbilical cord knots. Higher rates of caesarean section were found among male compared with female neonates. Using three multivariate logistic regression models and controlling for birth weight and gestational age, male gender was significantly associated with non-reassuring fetal heart rate patterns. Therefore, male gender results as an independent risk factor for adverse pregnancy outcome. However, we believe that this consideration should not lead to an alteration of the obstetric management simply based on fetal gender.