Methods: A prospective cross-sectional study was conducted on high-risk pregnant and lactating women who sought antenatal consults at the High Risk Clinic in a tertiary training hospital. Participants were asked to answer a validated questionnaire assessing their knowledge, attitudes, and practices on COVID-19 vaccine. They were also asked about their socio-demographic characteristics, co-morbidities, history of COVID-19 infection and vaccination status as well as the source of the information regarding the vaccine. Descriptive statistics was used to summarize in this study. In addition, frequency and proportion were used for nominal variables, median and range for ordinal variables, and mean and standard deviation for interval or ratio variables.

Results: A total of 323 high-risk pregnant and lactating women were enrolled in the study with an average age of 29 years old. Sociodemographic characteristics of the participants showed that they were high-school graduate, single, mostly financially disadvantaged and resides in CALABARZON area. Majority have diabetes mellitus as their co-morbidity, were not infected with COVID-19 and had already been vaccinated. The significant source of information of vaccine information was mainly from social media. The study presented that more than 90% were aware that COVID-19 vaccine was recommended by professional organizations however only 55-59% only agree that it is safe during pregnancy and breastfeeding. The result also conveyed a positive attitude towards vaccination as the pregnancy progresses as well as during lactation. As to practices, 80% of the participants were told by their healthcare providers to get vaccinated and 72% of them reported vaccine side effects. Furthermore, 58% of the participants would recommend vaccination during pregnancy while only 54% will recommend it while breastfeeding.

Conclusion: Assessment of knowledge, attitudes, and practices of COVID-19 vaccine among high-risk pregnant and lactating women gave an understanding on how a vulnerable population perceive vaccination. In general, this research study presented high percentage COVID-19 vaccine awareness and acceptance however it can also be seen that there is a mixed perception regarding vaccine safety during pregnancy and lactation. Strategies to improve health literacy which are evidenced based that can be carried out by a health care provider could be established to achieve maximum vaccination coverage among high-risk group of patients.

Keywords: COVID-19 vaccine, high-risk pregnant and lactating women

PP-026 Obstetrical and neonatal outcome of premature rupture of amniotic membranes before 28 weeks of gestatio

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Objective: Premature rupture of the membranes (PRM) is defined as a proven rupture of the amnion and chorion, including fissures.The frequency of PRM before 28 weeks' gestation (WG) varies between 0.1% and 0.7% of all deliveries, depending on the author. It affects between 7% and 51% of premature deliveries (30% on average). It can result in serious maternal and neonatal morbidity and mortality.

The objectives of this study were to describe the outcome of pregnancies after isolated preterm delivery before 28 weeks' gestation and to assess neonatal mortality and morbidity.

Methods: It was a prospective observational study including all pregnancies complicated by a PRM before 28 WG completed, of at least 24 hours, between January 2022 and March 2024 and admitted to the maternity unit of Farhat Hached Hospital Sousse, Tunisia.

Results: We enrolled 28 pregnancies, with an average maternal age of 31 years [21-44 years]. Therapeutic interruption of pregnancy was indicated in 9 cases, due to severe anamnios (5), chorioamniotitis (2) and early PRM at 17 WG (2). Armed expectative management was indicated in 19 cases, with weekly clinical, biological (infectious work-up) and ultrasound monitoring. The onset of PRM was at an average of 25 days [18-28 days]. Chorioamniotitis was noted in 3 cases, a urinary tract infection in 4 cases and a positive vaginal swab in 2 cases. Pulmonary maturation and antibiotic therapy were instituted in all patients. The average duration of PRM was 30 days [1-80 days]. Delivery was vaginal in 8 cases. All neonates were hospitalized in the NICU for neonatal respiratory distress, of variable severity, and suspected early onset neonatal sepsis, which was confirmed in 4 cases. The subsequent outcome was fatal in 4cases secondary to refractory septic shock. Survivors had an average hospital stay of 35 days, with only one patient being followed for bronchopulmonary dysplasia.

Conclusion: Early PRM is a serious complication of pregnancy, which can lead to serious complications for

the mother and, above all, for the fetus, which is exposed to the risks of prematurity and infection, and therefore to a high risk of mortality or morbidity, correlated with the duration of PRM.

Keywords: Preterm premature rupture of membranes, mortality, morbidity, neonatal outcome

PP-027 Obstetrical and neonatal outcome of premature rupture of amniotic membranes before 28 weeks of gestatio

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Objective: Children born from mothers with hypertensive disorders during pregnancy and experiencing fetal growth delay are at an increased risk of developing motor, neurological, cognitive, and learning disorders, as well as cerebral palsy. Delay in language development (DLD) is one of the common long-term outcomes of fetal neurodevelopmental disruption. DLD entails a delay in the timely development of skills related to sound reproduction and speech compared to established average statistical norms depending on age. Purpose. The main purpose of the study is to determine the frequency and assess the potential association between the presence of DLD in fetuses of women with hypertensive disorders during pregnancy and the development of perinatal complication.

Methods: A retrospective analysis of 1295 exchange cards of pregnant women and delivery records was conducted at the Odessa Regional Perinatal Center. Fetal growth delay was diagnosed in 130 (10.03%) cases of singleton pregnancies in women with hypertensive disorders. Additionally, a prospective study and analysis of neurodevelopmental data of children up to 3.5 (±3 months) years old were conducted by surveying parents of children from the selection group with hypertensive disorders.

Results: Delay in language development was noted in 43.24% of the selection group children. Depending on the severity degrees, they were distributed as follows: Grade I - 9 children (15.48%) had a complete absence of speech by the age of 3; Grade II - 8 children (13.76%); Grade III - 16 children (27.52%). Regarding the development of motor skills according to age, the following data were obtained: 18.92% of children had a delay in the development of the head fixation skill within an acceptable time frame; 32.68% had a delay in the skill of pulling up legs; 8.6% of children over 12 months old could not stand even with an additional support point fixation. It was established that the group with delayed neurodevelopment is under the supervision of a pediatric neurologist - 25 children (43.24%).

Conclusion: Thus, it was established that children born with fetal growth delay from mothers with hypertensive disorders are a high-risk group for the manifestation of long-term adverse perinatal outcomes. It was noted that the most significant deviations from age norms were found in children with DLD from mothers whose pregnancy was complicated by preeclampsia of moderate and severe degrees. The obtained results are consistent with global statistical data and once again confirm the need to prevent the development of this complication in the course of pregnancy.

Keywords: Hypertensive disorders, outcome, neurodevelopmental delay

PP-028 Obstetric brachial plexus paralysis: a case-control study on risk factors, epidemiological and clinical perspectives

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Objective: Brachial plexus palsy is a redoubtable neonatal complication that can compromise the functional prognosis of the upper limb. This study aims to investigate the epidemiological and clinical aspects of obstetric brachial plexus palsy and to identify the risk factors involved.

Methods: This is a retrospective case-control study conducted in the Department of resuscitation and neonatal medicine of Sousse in Tunisia. It includes a sample of newborns who presented with OBPP lesions over a seven-year period from 01/01/2013 to 31/12/2019. A control group of the same size was randomly selected from the department's records for the analytical study.

Results: Our study, conducted in the maternity ward of CHU Farhat Hached in Sousse, revealed an overall average incidence of Brachial Plexus Palsy (BPP) of 1.05‰ live births from January 1, 2016, to December 31, 2019. The parturients had a mean age of 30.66 years, with 41.1% being primiparous. However, only 37% of