Objective
Identify the risk factors of intrapartal fetal death in a tertiary hospital in Yaoundé.

Methods
It was a case-control study comparing 53 women who delivered with intrapartal fetal death to 106 women who delivered without intrapartal fetal death, carried out at the Yaoundé Gyneco-Obstetric and Pediatric Hospital, Cameroon.

Results
The risk factors of intrapartal fetal death identified at bivariate analysis were: maternal age < 20 years (P=0.021; OR=3.1; CI=1.1-8.3), absence of regular income (P=0.008; OR=2.4; CI=1.2-4.7), single marital status (P=0.002; OR=2.9; CI=1.5-5.7), illiteracy and primary level of education (P<0.001; OR=4.7; CI=1.9-11.5), referral (P<0.001; OR=5.0; CI=2.5-9.9), parity 0 and 1 (P=0.014; OR=2.3; CI=1.1-4.5), no antenatal care (P=0.002; OR=9.2; CI=2.4-35.6), number of antenatal visits < 4 (P=0.001; OR=4.2; CI=2.1-8.6), antenatal care in a health center (P<0.001; OR=3.8; CI=1.9-7.5), antenatal care by a midwife (P=0.006; OR=2.5; CI=1.3-4.9) or a nurse (P=0.016; OR=5.2; CI=1.4-18.7), absence of malaria prophylaxis (P<0.001; OR=10.6; CI=2.9-39.5), absence of obstetrical ultrasound (P<0.001; OR=4.7; CI=1.9-10.9), prematurity (P=0.002; OR=3.4; CI=1.5-7.3), abnormal presentation (P=0.024; OR=2.6; CI=1.1-5.9), ruptured membranes at admission (P=0.004; OR=2.7; CI=1.3-5.4), ruptured membranes >12 hours at admission (P<0.001; OR=5.1; CI=2.5-10.3), stained amniotic fluid (P<0.001; OR=4.8; CI=2.4-9.7), labor lasting more than 12 hours (P<0.001; OR=18.1; CI=8.0-41.0), presence of maternal complications (P<0.001; OR=4.7; CI=2.2-10.3), and presence of fetal complications (P<0.001; OR=48.6; CI=18.3-129), particularly acute fetal distress (P<0.001; OR=52.3; CI=14.6-186), cord prolapse (P<0.001; OR=12.1; CI=3.3-43.4), and birth weight <2500g (P=0.019; OR=2.8; CI=1.2-6.6).

Conclusion
Close attention should be paid to pregnant women, so as to identify these risk factors and promptly provide an appropriate management.