

Category: Health Professionals in Rheumatology Practice and Clinical Care

Ref: MRC2022-A-1041

Outcome of Pregnancy in Women with Rheumatological Diseases, Single Center Experience

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Abstract Title: Outcome of Pregnancy in Women with Rheumatological Diseases, Single Center Experience

Background:

Rheumatic diseases are a broad spectrum of disorders that involve many tissues; they are considered challenging during early stages as they present with nonspecific symptoms. The impact of these diseases on the pregnancy will add further burden on the patient, fetus, physician and healthcare system.

Method(s):

A retrospective cohort study was conducted in King Abdulaziz Medical City (KAMC) in Riyadh to compare the outcomes of pregnancy across three rheumatological diseases: Sjogren Syndrome (SS), Lupus Erythematosus (SLE), and Rheumatoid Arthritis (RA) from 2016 to 2021. A total of 128 pregnancies in 107 women with rheumatological diseases were included in this study.

Result(s):

There were 44 patients with SLE, 55 with RA, and 8 with primary SS. Most of the patients were in clinical remission before pregnancy. Anti-SSA was positive in 41 patients. Most of the patients in our study had no comorbidities 61 (47.66%). 8 (18.18%) out of SLE patients were found to have lupus nephritis, which was in remission before pregnancy. 63 patients had a previous abortion, and the majority 42 (64.62%) happened once. Vaginal delivery was the most common mode of delivery. On the other hand, C-sections were 38 (29.69%). Postpartum complications (e.g., infection, bleeding) were noted in 12 (9.38%) pregnancies, and complications during pregnancy were found in 29 (22.66%). Rheumatological disease flares occurred in 10 (7.87%) pregnancies.

Out of the 122 babies delivered, 52 were male newborns and 72 were female newborns. Preterm delivery occurred in 25 (20.83%) pregnancies, and 16 (13.22%) of the newborns needed NICU care.

Interestingly, congenital heart block (CHB) was found in 5 (12.2%) neonates out of 41 Anti-SSA positive mothers; one out of those five died from heart block. Eleven neonates were delivered with positive serology, and five of them were diagnosed as Infantile Lupus. Few flare-ups in RA patients were reported during pregnancy and/or postpartum; nonetheless, they were not statistically significant (P value=0.22).

Conclusion(s):

The outcome of pregnancy in patients with rheumatological disease is favorable. Multidisciplinary team approach and close clinical follow up is the cornerstone for such success. Small dose of prednisolone is safe and will not have a negative impact on maternal or fetal health. CHB is a concern for pregnant women with positive Anti-SSA.