Two cases of trisomy 13 and pre-eclampsia

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Objective
We report two cases of fetuses with trisomy 13/Patau Syndrome (PS) whose gestations evolved with pre-eclampsia.

Methods
The description of these two cases was performed, with gestational and postnatal findings, along with a brief review of the literature.

Results
The first case was a 30-year-old woman in her fifth pregnancy, including one miscarriage. In the current pregnancy there were no prenatal ultrasound finding reported and the pregnancy was complicated by late preeclampsia. At birth, the neonate was weighing 2,550 g, presenting Apgar score of 3 and 9 at first and fifth minute, respectively. On clinical examination, microcephaly, aplasia cutis on the scalp, cleft lip, micrognathia and hypertonia were observed. Karyotype revealed a mosaic for PS (47, XX, +13/46, XX). The newborn’s clinical condition worsened and died 26 days after birth. The second case was a 27-year-old woman in her second pregnancy. She evolved with vaginal bleeding at 13 weeks and had an episode of urinary infection and pre-eclampsia. Because of the last one, an induced vaginal delivery was performed. All ultrasounds carried out during prenatal care were normal. The child was born with 37 weeks of gestation, weighing 2,445 g, presenting Apgar scores of 6 and 8 at first and fifth minute, respectively. On clinical examination, trigonocephaly, aplasia cutis on the scalp, microptalmus, micrognathia, micropenis with empty scrotum and hands and feet polydactyly were observed. Karyotype was compatible with PS (47, XY, +13). The newborn died at 12 days of life.

Conclusion
PS is considered a chromosomal disorder characterized by multiple malformations and limited survival. Our report aims to call attention to the increased risk of pre-eclampsia in pregnant women carrying fetuses with PS, an association already described in the literature. This may have important implications over the management of these patients.