Obstetric outcome of pregnancies complicated by anencephaly: a 25 year single hospital experience

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Objective
Anencephaly is a lethal type of neural tube defect. Early prenatal diagnosis is essential to provide parents with the option of pregnancy termination however this would not be applicable in our society in cases of late diagnosis or if the parents opt to continue with pregnancy. We aimed in our study to review the obstetric impact and natural history of anencephaly beyond the age of viability.

Methods
This is a retrospective chart review of all cases with prenatal diagnosis of anencephaly, who had antenatal follow-up and gave birth after 24 weeks gestation in the period of 1990 till 2014 inclusive in Women’s Hospital, HMC, Qatar.

Results
A total of 37 cases were identified and studied. The average maternal age was 28 years (range 20-42). Qatari women were 35% (13/37) and none-Qatari were 65% (24/37). Primigravidas were 24% (9/37). Maternal overt diabetes in 13% (5/37). The average gestational age at diagnosis was 21 weeks (range 12-41). Induction of labor in 54% (20/37). The average gestational age at birth was 34 weeks (range 25-44 weeks). Intrauterine fetal demise was documented in 57% (21/37) and livebirth in 43% (16/37). The average birth weight was 1505 grams +/- 740 grams. The rate of successful vaginal birth was 70% (26/37) The rate of primary caesarean section for failed induction or abnormal lie was 8% (3/37) and the rate of repeat caesarean section was 22% (8/37). There were no differences in achieving vaginal birth in the group who had induction of labor compared to spontaneous labor with a rate of caesarean section of 10% (2/20) compared to 11% (1/9) respectively. There was one case of shoulder dystocia and no reported cases of APH, PPH, complicated caesarean sections or uterine rupture.

Conclusion
Our study includes the largest series of anencephaly cases managed beyond the age of viability. Apart from the tendency for post-term pregnancies, the prenatal diagnosis of anencephaly poses no significant increased maternal risk. Our study provides a valuable tool for obstetricians with evidence-based counselling for parents of anencephalic fetuses who opt to continue the pregnancy beyond the age of viability.