



A case of maternal Hodgkin's disease

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Objective

Important treatment advances for HD have been achieved the last years , but some side effects can appear. Several abnormalities reported so far are: cardiac toxicity, pulmonary toxicity, endocrinal failure, malignancies and congenital malformations. Although several studies reported in the literature showed no or slightly increased risk of congenital neonatal abnormalities of women previously treated for Hodgkin's disease compared with the general population, abnormalities do occur and sometimes they are very odd and serious.

Methods

This is a case report.

Results

We report a case of a 25 years old woman presented with Hodgkin's disease, stage IIIA. The patient received chemotherapy, according to ABVD protocol, 6 cycles and mantle field radiation with 3600 cGy. She had regular follow ups for the next 36 months , when she got pregnant. Ultrasound confirmed a normal fetus and a healthy female baby was born at term. Clinical assessment in the follow-up period showed normal development. Also the mother was assessed regularly and was healthy. 87 months after being initially treated for HD , she got pregnant again. The 13 weeks scan revealed malformations and TOP was suggested. A male fetus with proboscis, cyclopia and omphalocele was confirmed. The autopsy report from the Institute of Pathology was: male fetus with malformations on the head like proboscis and cyclopia (one eye beneath proboscis), and omphalocele on the frontal abdominal wall containing liver and small bowel.

Conclusion

We consider this case report important to highlight the possibility of late side-effects (congenital abnormalities) in fetuses of women treated for HD, especially with combined modality treatment. Therefore, we should offer monitoring in fetal life, childhood and adulthood. Treatment with radiation therapy or both may have adverse effects on germ cell survival, fertility and health of offspring. Congenital abnormalities occur in 3-5% of all live births and the possibility of an increased risk of congenital abnormalities in newborns cannot be ignored.