

SLE and pregnancy

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Objective

INTRODUCTION Systemic lupus erythematosus is a systematic autoimmune disease, i. e. , it is an autoimmune disease of the connective tissue characterized by the creation of immune complexes and numerous antibodies that cause damage to different organs and organ systems. Its aetiology is unknown. The genetics play a big role. It occurs more often in women of reproductive age - ULPGA hormone. **THE GOAL** The main goal of the paper is analysis of the course and outcome of pregnancy in patients suffering from SLE, manner and termination of pregnancy, with reference to neonatal outcome at the Clinic of gynaecology and obstetrics (KGA)of UKC RS in the period from 1st January 2016 to 31st March 2022.

Methods

At the KGA Banja Luka UKC RS in the period from 1st January 2016 to 31st March 2022 a retrospective study was concluded on the outcome of pregnancy in pregnant women with SLE, which included 11 pregnant women who suffered from SLE. The data was collected from the birth protocol for the six-year period and available histories of the disease, as well as from the Information centre of UKC RS.

Results

In the mentioned six-year period at KGA BL, 11 pregnant women were hospitalized. Variables that were followed were: age of the pregnant woman, gestation, parity, presence of hypertension, of preeclampsia, antiphospholipid syndrome, thrombophilia, manner of completion of pregnancy, the number of spontaneous miscarriages, pregnancy therapy, ultrasound of the heart on the anomalies of the heart. On the basis of the results obtained, the greatest number of them were term pregnancies, women of age 31-35 years, multiracial women whose newborns were APGAR score over 8. 23.7% of pregnant women with SLE gave birth vaginally-per vias naturalis and 72.7% surgically. A larger number of pregnant women were on corticosteroid therapy throughout the pregnancy.

Conclusion

Based on the conducted research and the obtained results, it can be concluded that there is no statistically significant impact of SLE activity during the pregnancy, on the very outcome and manner of termination of pregnancy.

Table 1. Pregnancy outcome in subjects with SLE.

Outcome	N	%
Term delivery	6	54.6%
Preterm delivery	5	45.4%
Total	11	100.0%

Table 3. The presence of risk factors in SLE subjects.

Risk factors	N	%
HTA	1	10.0%
Preeclampsia	1	10.0%
Antifosfolipid sy	2	20.0%
Trombophilia	6	60.0%
Total	10	100.0%

Table 3. Age of respondents with Dg SLE.

Age	N	%
25-30	3	27.3%
31-35	5	45.5%
36-40	1	9.1%
> 41	2	18.2%
Total	11	100.0%

		Caesaren section	Vaginal delivery	Total
Th. Pronison	No	5	0	5
	Yes	3	3	6
Total		8	3	11