

INCIDENCE AND CLINICAL ASPECTS OF PREGNANCY THROMBOCYTOPENIA – CASES OF THE NATIONAL TRANSFUSION HAEMATOLOGY INSTITUTE

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Purpose of the study: We intended to establish the yearly incidence of pregnancy thrombocytopenia in the National Transfusion Haematology Institute. We also studied clinical and therapeutical aspects related to the delivery movement in these special pregnant ladies.

Material and method: We have studied a number of 196 pregnant ladies, which were surveyed between 2013 and 2015 in the National Transfusion Haematology Institute. In these patients we have studied: complete blood cell count with blood film examination, in order to appreciate (or, eventually rectify) the platelet number; complete clotting tests; antiplatelet autoantibodies, anti-phospholipidic antibodies; occasionally – osmotic fragility test, screening test for thrombophilia and genetic mutations for thrombophilia. The patients were surveyed each 6 to 8 weeks.

Results: Out of the 196 pregnant patients we studied, 29 patients (representing approximate 15 per cent) had thrombocytopenia, with a number of platelets between 49.000 and 141.000 per μ l. (when examining the blood film, we had values between 60.000 and 152.000 per μ l.); we mention that 5 patients had, when examining the blood film borderline – normal values – “false thrombocytopenia”). We also mention that were of the patients surveyed during this period (2013 - 2015) had thrombocytopenia purpura (ITP); we have not notice in any of our pregnant ladies very low platelet values and we admit platelet sequestration in the placenta as the main mechanism of thrombocytopenia. Five of the patients associated pregnancy anaemia (iron and folic acid deficiency); four of them were diagnosed with hereditary spherocytosis and three – with thrombophilia.

As for therapy – the thrombocytopenia pregnant ladies received vitamin C supplements – 500 mg. daily; we avoided large doses, in order not to affect foetus metabolism; they also received folic acid, iron supplements and multivitamins.

In cases in which obstetrical conditions allowed physiological delivery, antiplatelet antibodies were tested and were absent. Both in cases that and needed Caesarean section and in cases with normal delivery, we advised and administered packed platelets.

Conclusions: Pregnancy thrombocytopenia is a relatively frequent medical condition, that needs haematological survey during pregnancy and also packed platelets supplements at the delivery moment.