

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

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Introduction

Recent advances in the management of thalassemia have significantly improved life expectancy and quality of life of patients with thalassemia with a consequent increase in their reproductive potential and desire to have children. Endocrine complication due to haemosiderosis are present in a significant number of thalassemia patients and often became barriers in their desire for parenthood.

Method

We investigated all of our adult patients for endocrinological disease and causes of infertility. All patients have been tested in Endocrinological Clinic of Elias Hospital for LH, FSH, estradiol in women and testosterone in men, free T4, TSH, ACTH and cortisol stimulation in order to investigate hypothalamo-hypophysis axis and prolactin levels in women with amenorrhea. Transvaginal ultrasound has been made in order to estimate number and dimensions of ovarian follicle. Iron overload was determined by serum ferritin levels every 3 months and for few patients by MRI T2* or ferriscan.

Results

Although hypogonadism was frequently found in thalassaemia patients, there are patients with children: three of male (age 24-36 years) with 2 children each and 2 female, one age 35 with twins and the other age 20 with 2 children from different pregnancies.

Conclusions

Fertility problems can be overcome and pregnancy may be possible and safe for patients with thalassemia major in terms of transfusion and chelation optimal treatment and supervision of multidisciplinary teams of specialists.