

## Management of a high-risk pregnancy associating autoimmune diseases, chronic hypertension, prediabetes and inherited thrombophilia

Manuela Neagu <sup>1,\*</sup>, Natalia Patrascu <sup>2</sup>, Ioana Rosca <sup>1</sup>

<sup>1</sup>UMF Carol Davila Bucuresti, Bucharest, Romania.

<sup>2</sup>Medsana Clinic, Bucharest, Romania.

DOI: 10.36129/jog.2024.S102

We report the case of a 34 years old woman that came for preconceptional evaluation after 2 first trimester miscarriages. She was known with Graves' disease, chronic anaemia, vitiligo, hypertension, PCOS and overweight, both her parents had hypertension and ischemic heart disease. She was on treatment with L-thyroxine and ACE-inhibitor. She was referred to a haematologist that diagnosed Biermer anaemia and Factor V Leiden gene mutation; B12 therapy was started. Other preconceptional recommendations were diet, changing ACE-inhibitor to  $\alpha$  metil-dopa, low dose aspirin, metformin, folic acid. Her pregnancy was followed-up by a multidisciplinary team. Vitamin D, Mg, Ca and low-molecular-weight-heparin were added. She was twice admitted for threatened abortion thus natural micronized progesterone was started. At 35 weeks foetal growth restriction was diag-

nosed, foetal wellbeing was monitored by Doppler velocimetry until delivery at 39 weeks. The neonate, 2,570 g, needed no admission in the neonatal intensive care unit. Both were discharged after 4 days.

The pregnancy outcome was improved due to the compliance of the patient to all treatment options beginning with diet and ending with self-administered low-molecular-weight-heparin and due to the prenatal care offered by the multidisciplinary team. This pregnancy didn't complicate with abortion, preterm birth, acute foetal distress, preeclampsia, abruptio placentae or thromboembolic accidents. The only complication that could not be avoided was foetal growth restriction.

In such complex associations of diseases there might be a risk of overtreatment in order to minimised maternal, foetal and neonatal risks.