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Poster Presentations

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Thrombophilic factor analysis of 234 followed-up couples with recurrent pregnancy loss

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Background: Recurrent pregnancy loss (PRL) is a common disorder that occurs in 5% of pregnancies and is defined as the loss of two or more consecutive pregnancies before 20 weeks of gestation. various causes such as thrombophilia might increase the risk of RPL.
Objective: This study aimed at testing the association between thrombophilic factors with anticoagulant treatment in Iranian women with RPL.
Materials and Methods: In this study thrombophilic factors of 234 couples were evaluated using strip assay and PCR sequencing for six important causes of hereditary thrombophilia including factor V Leiden (FVL), factor VR2, factor II, PAI-1, MTHFR 677C>T and 1298A>C in couples. Then we followed up females for two years. any evidences, medications and outcome of next pregnancies were registered by completing questionnaire. Finally, data was analyzed by SPSS software.
Results: The mean age of females was (29.32 ± 5.348). There were homozygote and heterozygote 20210G>A mutation of factor II in females 0.4%, 2.1% and male 0.9%, 0.9% respectively. Also the results in homozygote and heterozygote form for 1691G>A mutation of factor V Leiden were in females 0%, 3% and in males 0%, 1.3% and for 1299H>R mutation of factor VR2 were 1.7%, 15.8% and in males were 1.3%, 12.4% sequentially. The medication and percentages for treated women were as followed: Folic Acid alone was administered 22 cases, Folic Acid plus ASA 80 mg was administered for 32 cases, Folic Acid plus injection of anti-coagulant drugs was administered for 27 cases, the combination of Folic Acid, ASA 80 mg and injection of anti-coagulant drugs was administered for resulted in 105 cases, ASA 80 mg plus injection of anti-coagulant drugs was administered for 5 cases. Only 4 women of 43 women (9.3%) who never received medication achieved live birth. The best outcome was success in combination therapy (Folic Acid, ASA 80 mg and injection of anti-coagulant drugs) that 67 cases of those achieved live birth (63.8%).
Conclusion: This study showed genetic counseling followed by thrombophilic factors evaluation and finally proper medication may be effective in the treatment of women with RPL. Best pathway of treatment leading to the successful child delivery was combination therapy (Folic Acid, ASA 80 mg and injection of anti-coagulant drugs) and rate of success pregnancy were significant by using this treatment. (p = 0.00).
Key words: *Recurrent pregnancy loss, Thrombophilic factors, Follow up.*