

Recurrent pregnancy loss and Unexplained recurrent pregnancy loss.

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Description

Recurrent Pregnancy Loss (RPL) is an important reproductive health issue affecting 1% of women of reproductive age and has a significant psychological effect on couples. RPL is defined as 3 or more consecutive pregnancy losses at or before 20 weeks of gestational age. (American Society of Reproductive Health defines as 2 or more losses). The established causes are uterine anomalies, antiphospholipid syndrome, hormonal and metabolic disorders, cytogenetic abnormalities.

The proposed etiological factors are chronic endometritis and other infection, maternal ill health, environmental factors, unhealthy life style, inherited thrombophilias, Luteal phase defect, high sperm DNA fragmentation level. Evidence based treatments such as correction of uterine anomalies, Heparin and Aspirin for Antiphospholipid syndrome, genetic counselling, karyotyping of POC and of parents have improved pregnancy outcomes.

In some percentage of cases the cause remain unexplained (URPL) and are treated empirically with Progesterone supplementation, antibiotics, life style modification. For unbalanced chromosomal translocation or inversion; PGD is offered. IVF/PGD decreases the rate of miscarriage and shortens the time of first live birth. Varieties of immunomodulatory treatments such as Prednisolone, immunization using paternalleucocyte, 3rd party donor, products from early embryo, IVIG, TNF alpha antagonist, Intralipids, Granulocyte stimulating factor are being tried and are showing better result in URPL.

PGS is proposed as an option for couples with URPL, PGS is improving IVF efficacy. The standard protocol though helps in effective treatment but does not always guarantee a fruitful outcome, many efforts are being made to improve treatment and decrease the adverse outcome. Other than recommended protocols newer investigations and treatment efforts are implemented to improve a successful pregnancy specially in URPL.

Pregnancy and puerperium can present with a variety of mental health problems in women like postpartum depression, which is most commonly seen, delirium, de novo or as an exacerbation of psychosis or neurosis, conversion disorder like generalised

anxiety disorder, bipolar disorder, mania, seizure disorders, schizophrenia, dissociative identity, obsessive compulsive disorder, panic disorder, post-traumatic stress disorder. This disability causes sufficient personal, social and economic loss of the patient and their family. But the symptoms are commonly ignored, specially due low education and awareness among the people about such problems in the society. Most frequently these are attributed to demonic or spirit possession. The subject is less commonly studied because people shy away to divulge the information about the patients, even if they are aware of it. The pivotal aim of the study is to find out the incidence of such patients admitted in the department and assess their response to treatment

A hospital based prospective study was done and detailed history was taken using a predesigned proforma. Neither the patients nor their attendants fully understood the gravity of the situation. They were in a dilemah, some even refused further treatment and returned home. The patients were never able to express their grievances fully Some attendants fully supported their patients, but few failed to recognize their inner cries. Acceptance of awareness programmes is necessary from the layman to make the programme a success.

Allergies and low bone mineral density which is related to osteoporosis are diseases with a high prevalence in the general population and they both represent a major problem of public health. The close interaction of the two systems have the consequence that the disease of one affects the other. This possible interactions of immune and bone systems in the allergic-mediated diseases is currently an intriguing area of research.

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