



Joint Event on

International Conference on Palliative Care, Obstetrics and Gynecology

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International Conference on Stroke and Clinical Trials February 28-March 01, 2019 | Paris, France

Etiologies, treatment options and fertility after recurrent miscarriages

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Background: Recurrent pregnancy loss (RPL) which affects 1–2% of women is the loss of two or more consecutive pregnancies before or during the 20th week of gestation. The aim of this study is to determine the clinical characteristics, treatment options and fertility after recurrent miscarriages.

Methods: In this study, a total of 514 recurrent miscarriage cases that was diagnosed and treated between 2011 and 2017 were retrospectively evaluated. All the related information including the details of demographic characteristics, clinical symptoms and findings, diagnostic tools used, treatment options, risk factors for recurrent pregnancy loss, outcome of treatment as well as couples underwent cytogenetic studies, radiologic evaluation of the Müllerian system, and timed endometrial biopsy were obtained from hospital patient database and saved in structured data entry forms designed for this purpose.

Results: A total of 1680 deliveries with 532 RPL diagnoses recorded and 514 of them were eligible for study and the RPL was found 3.2%. Agreat majority of the patients who constituted the study group was between 25-34 years 62.4% (296/474) At baseline, median female age was 34.1 years, waiting time 3 years (1–17), number of previous miscarriages 2 (2–9), 147 women (20.4%) had conceived at least once in ART or AIH cycles. After a median follow-up of 33.7 (1.7–123.0) months, 5-year pregnancy and delivery rates were 86.1 and 64.5%.

Female age (29kg/m²), number of preceding miscarriages (> 4), late miscarriages, preclinical losses and smoking revealed non-significant negative trends. Mode of conception until baseline (spontaneously or ART/AIH) and classification into idiopathic and nonidiopathic RPL showed no prognostic relevance. Recurrent pregnancy wastage was found to be associated with genetic disorders in 25 couples, Müllerian anomalies in 15, endocrine anomalies in 23, and negative findings in 37. The subsequent reproductive performance of each group is reviewed

Conclusion: As to give patients opportunities for as best as possible chances to conceive a child greater emphasis should be laid on diagnosis and appropriate treatment. Factors associated with subfertility of couples have an important effect on outcome.

Speaker Biography

Hasan Çılgın is from Turkey. He was graduated from Medicine Faculty of Istanbul University in 2002. He completed his proficiency in obstetrics and gynecology at Medicine Faculty of Firat University in 2010 and have participated courses in endoscopy, IVF and research methodology in various countries when he was a student and an assistant at Medicine Faculties. After the training of assisted reproductive technology in Istanbul University, he started pursuing his career at the department of Reproductive Endocrinology and Infertility at Kafkas University since 2015. He has been working at Medicine Faculty of Kafkas University since 2015.

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