

ACUTE FATTY LIVER OF PREGNANCY (AFLP), A CASE REPORT

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31 years old primigravida in the 38th gestational week, was seen at admission room because of poor wellbeing, pain in the upper right abdomen and minor dyspnoe. She was admitted to the hospital as an incorrect cardiotocography was registered. The emergency cesarean section was performed within first hour due to severe fetal distress. Operation was made under epidural anaesthesia. Male newborn weighting 3660g and 54cm long was delivered with Apgar score in first and fifth minute 7 and 8 points respectively. The course of operation was uneventful and the only abnormality concerned amniotic fluid; which was green, thick and smelly.

Abnormalities in blood coagulation system and liver function were detected in additional laboratory tests although no clinical features of DIC were observed. Initially general patients condition was good with correct arterial blood pressure values and insignificant tachycardia up to 100;. On the base of laboratory findings the differential diagnosis between HELLP syndrom and AFLP was made. Intensive treatment with FFA, L-ornithine, and vit.K was introduced and the patient was observed in intensive care ward. Approximately 18 hours after cesarean, peritoneums irritation symptoms, abdomen flatulence, pain in the middle and superior part of abdomen and deterioration of general state appeared. Jaundice, tachycardia up to 110, no bovel movements, , oedema of both lower extremities and hyperemia were found. Arterial blood pressure values were within norm. On the base of patients observation, changes in laboratory tests and after excluding acute pancreas inflammation, diagnosis of AFLP was made. Patient was transferred to Intensive Surgical Therapy Ward of VI Department of Liver and Transplant Surgery Warsaw Medical University where diagnosis of AFLP was confirmed.

Key words: AFLP, arterial blood pressure

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