OOCYTE DONATION TO A 51-YEAR OLD WOMAN RESULTING IN HELLP SYNDROME

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Oocyte donation is an established treatment for premature ovarian failure and gonadal dysgenesis. Throughout the world the oocyte donation is legally regulated and may be performed upon patient's wish. Therefore, pregnant women older than 50 years are occasionally encountered. Pregnancy achieved in such a way contains an embryo that is completely immunologically foreign to the mother. Unfortunately, it is very difficult to design and control a large study of oocyte donation in older women; therefore data presented so far are conflicting and the studies sparse. It is very likely that those women have significantly higher risk of developing hypertensive disorders and gestational diabetes during pregnancy compared to their younger counterparts. As there are no tests to detect the propensity of older women to develop hypertension during pregnancy, it is not possible to recognize such women and advise them not to go through the procedure. We present a case of a 51-year old patient who had the IVF procedure with donated oocyte in Czech Republic, and conceived twins. Her pregnancy was extremely complicated as she developed HELLP syndrome and fetal hydrops of one of the twins.

A 51-year primigravida was referred to our center because of first trimester bleeding. The first ultrasound examination revealed bichorionic biamniotic twin pregnancy. At 21 weeks of pregnancy, ultrasound examination for evaluation of fetal morphology revealed ascites and hydropericard of one of the twins. Serologic tests for TORCH and Parvo B19 were negative. RDS prophylaxis was administered. At 27 weeks of gestation excessive polyhdramnios with anasarca of one of the twins was found at ultrasound, associated with maternal hypertension, pretibial edema, abdominal distension, anemia, hyperuricemia, elevated liver enzymes and the D-dimer value of 1048. Intensive compression on maternal diaphragm was present, so amnioreduction of amniotic fluid and fetal ascites of the hydropic twin was performed. Because of further deterioration of the HELLP syndrome caesarean section at 31 weeks of gestation was performed. Hydropic male neonatus 1950g/40 cm, Apgar score 2, 5, and healthy female neonatus 1240g/38cm, Apgar 7, 8, were born.

Conclusion:

We observed severe preeclampsia and HELLP syndrome with hydrops of one of the twins in a pregnancy achieved following oocyte donation to an older woman. Older women should be thoroughly informed about oocyte donation procedures and counseled about possible serious risks associated with such a pregnancy, both for the mother and for the fetus(es), before deciding to go through the procedure.

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