

## AUDIT OF A MISCARRIAGE CLINIC (1992-1995)

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A Miscarriage Clinic was set-up in the department of Obstetrics and Gynaecology, in March, 1992 in order to provide a service for patients who have suffered at least two miscarriages.

The service provides the chance for counselling and support for these patients together with a thorough investigation into the possible causes of the abortion. The investigations start with a detailed abortion history, blood tests: CBC, U&E&C, LFT, 75gms OGTT, APTT, a TFT and a day 2 and a day 21 hormone profile, torch screen and an auto-antibody profile. Anatomical anomalies are screened by salpingography and ultrasound. A karyotype on both patients is also carried out.

By November 1995, 108 patients had been referred to the clinic the age range being 19 to 44 years. Of these 17 are currently still undergoing investigations and 12 have been lost to follow-up.

The incidence of the idiopathic group compares well with other reported results. There were 10 cases of Polycystic Ovary Syndrome none of which, however, conceived on a combination of clomiphene and HCG.

A group of miscellaneous conditions associated with recurrent abortion is described and this includes phaeochromocytoma, glomerulonephritis, adult polycystic

kidney disease, and protein C deficiency.

All cases found to be positive for anticardiolipin antibodies are treated by aspirin (75mgs) and prednisolone (15mgs) daily pre-conceptually.

The idiopathic group are being randomised into 2 groups; Group A: to have aspirin 75mgs daily only and Group B: as for positive autoantibody syndrome.

Twenty six pregnancies have been reported from our clinic to date. Five of these ended in abortion.

Of the twenty babies, 12 were delivered from the idiopathic group. They were divided equally from the aspirin and aspirin plus prednisolone group. 2 babies were delivered to patients suffering from luteal phase defects - conceived on clomiphene/HCG. There were 2 deliveries to patients with a bicornuate uterus - both by Caesarean Section.

A further two babies were delivered to patients with positive anticardiolipin antibodies while the last two were from a patient with Protein C deficiency and one found to be positive for CMV.

A patient with classical antiphospholipid antibody syndrome delivered a live healthy child following treatment with warfarin, prednisolone and aspirin.

Causes of Recurrent Miscarriages 1992 to 1995

