

4th International Conference on

GYNECOLOGY & OBSTETRICS

October 02-04, 2017 Barcelona, Spain

Assessment of uterine disorders in Tunisian women with recurrent pregnancy loss: A single center experience

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Recurrent pregnancy loss (RPL) is defined by ESHRE as three or more consecutive pregnancy losses and affects 1– 3% of women attempting to have a child. A variety of possible etiologies have been described. Often, anatomic disorders, both congenital and acquired; are a major cause of clinically recognized miscarriage (15%). Although the role of uterine malformations in RPL is debatable, assessment of uterine anatomy is widely recommended. Moreover clinical management of pregnancy-loss patients with uterine disorders is controversial, and there is no conclusive evidence that surgical treatment reduces the risk of pregnancy loss. The aim of this study was to assess the prevalence of uterine disorders in Tunisian women with history of recurrent pregnancy loss (RPL) and to delineate strategies for clinical management. The study included 158 couples with 2 and more pregnancy loss. In order to explore disorders of the uterine cavity, hysterosalpingography was performed. Of a total of 158 couples, 32 women had uterine abnormalities with an overall incidence of 20.3 %. We have found more acquired than congenital uterine disorders, mainly the intrauterine synechiae. Anatomic disorder is frequent in Tunisian Women with RPL with an overall frequency of 20.3%. Assessment of the uterine anatomy is recommended in women with 2 pregnancy losses, to elucidate the causes of RPL. While hysterosalpingography is useful as screening test, hysteroscopy remains the mainstay of diagnosis and treatment.

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