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Diagnosis and intrauterine treatment of fetuses infected by parvovirus B19

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Objective: To correlate epidemiological contact with parvovirus B19 in pregnant women and the incidence of seroconversion and to evaluate sonographic follow-up, treatment and perinatal results in fetuses that showed signs of affectation.

Method: Prospective observational study involving pregnant women who consulted the Prenatal Diagnosis Unit of the Vall d'Hebron Hospital referring possible contact with parvovirus B19 (PB19) between 2002 and 2016. Serology was performed for maternal infection diagnosis. Serial ultrasound follow up were carried out when maternal infection was confirmed measuring MCA (Medical Cerebral Artery) maximum velocity. PCR in amniotic fluid or fetal blood sample was performed upon signs of fetal affectation. Fetal transfusions were carried out when severe anemia was diagnosed and a third trimester magnetic resonance performed in treated fetuses to evaluate SNC (Central Nervous System) development.

Results: Of the 65 patients total who consulted in the unit, in 35 a risk contact history was identified and 26 seroconverted. Only 12 of them presented exanthem symptoms. In 13 patients signs of fetal affectation were recorded, 10 fetuses with values of maximum systolic velocity of MCA corresponding to anemia and 3 deaths at the time of diagnosis. Fetal blood transfusions were performed in 7 patients, obtaining in 5 of them resolution of fetal anemia and newborns without signs of neurological affectation.

Conclusion: The seroconversion rate and incidence of fetal anemia makes recommendable, the serological study of pregnant women with contact notion with PB19. Fetuses that develop hydrops or early signs of affectation present a poor prognosis even with immediate treatment. Intrauterine transfusion has a high success rate in fetuses affected if they are not hydropic.

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