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Fetal liver cirrhosis due to gestational alloimmune liver disease in a primigravida female

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Statement of the Problem: Gestational alloimmune liver disease associated with neonatal hemochromatosis (GALD-NH) is a rare cause of fetal liver failure, presenting with antenatal cirrhosis. It should be considered in level II ultrasound scan. GALD-NH is often diagnosed late and patients are therefore referred late to specialized centers, delaying treatment. This case highlights the consequences of early diagnosis of GALD-NH and emphasizes the importance of a high grade of suspicion of this disease in order to refer the patient to a specialized center for the appropriate treatment.

Methodology & Theoretical Orientation: 24 year old primigravida came for routine level II scan to look for anomalies at Period of gestation-18 weeks. Patient was hemodynamically stable. Her routine investigations were within normal limits.

Findings: The ultrasound showed live intrauterine fetus, corresponding to gestation of 17 weeks 2 days. The fetal liver showed nodular architecture with coarse echotexture. Moderate ascites and scalp edema were present with minimal bilateral pleural effusion. Suspicious of fetal liver cirrhosis was raised. Termination of pregnancy was performed at 19 weeks after the counseling of the patient. The patient was subsequently discharged in stable condition on 5th day with follow up on regular basis. Autopsy was performed on the fetus. Histopathological examination revealed fetal liver cirrhosis. Immunostaining with C5b-9 antibody was positive. Hence, diagnosis of hemochromatosis due to Gestational alloimmune liver disease was confirmed.

Conclusion & Significance: GALD-NH should be suspected if there is evidence of fetal injury with no other definable cause. A high grade of suspicion is the key for the diagnosis of GALD-NH, and early use of IVIG should be initiated in order to allow longer survival of the liver. Recommendations are made for treatment centers to become well accustomed to this condition that would benefit the patient and the management.

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