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INVESTIGATING PREGNANCY OUTCOMES IN WOMEN WITH RHEUMATIC DISEASE

Several abstracts released at EULAR improve understanding of pregnancy in RMDs

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An increased risk of adverse pregnancy and neonatal outcomes has been reported for pregnancies in women with several rheumatic and systemic autoimmune diseases including rheumatoid arthritis (RA), psoriatic arthritis (PsA), and systemic lupus erythematosus (SLE). New data presented at the 2022 EULAR Congress in Copenhagen show that foetal morbidity and severe maternal morbidity occur at a higher rate in women with SLE compared to those without. An increased risk of adverse pregnancy outcomes was also reported for women with spondyloarthritis (SpA), and shown to be associated with steroid use in women with RA. Taken together, this range of findings will help inform physicians in their management of patients with RMDs during pregnancy and planning.

SLE is an autoimmune disorder that typically affects women in their childbearing years. Evidence shows that foetal and maternal mortality have declined in SLE over the years, but little is known about morbidity. At the EULAR Congress, Dr Bella Mehta presented findings from a retrospective study in over 50,000 women with SLE and delivery-related hospital admissions.

The group's findings show patients with SLE had a higher risk of foetal morbidity than women without SLE. This included higher risk of intrauterine growth restriction and preterm delivery. SLE patients also faced a greater risk of blood transfusion, puerperal cerebrovascular disorders, acute renal failure, eclampsia or disseminated intravascular coagulation, cardiovascular and peripheral vascular disorders, and general medical issues than those without SLE. These important new insights will help inform the management of pregnancy in women with SLE.

In SpA, findings have not been uniform, with some studies reporting increased pregnancy risks while others have failed to identify any significant differences between women with and without SpA. Matilda Morin's abstract shared findings from a nationwide register-based study of singleton births between April 2007 and December 2019 in women diagnosed with ankylosing spondylitis (AS) or undifferentiated SpA.

Overall, women with SpA were found to be at increased risk of several adverse outcomes. In particular, there was an increased risk of gestational diabetes, elective and emergency Caesarean delivery, and preterm birth including spontaneous preterm birth. The risk estimate for preeclampsia was also increased, but failed to reach significance. Infants born to mothers with SpA were not more likely to be born small for gestational age (SGA), but there was a slightly increased risk estimate of infection during their first year of life.

The authors conclude that, while most pregnancies in women with SpA are uneventful, there is an increased risk for a number of adverse pregnancy outcomes.

The impact of RA and its treatment on pregnancy was also presented, in an abstract from Sabrina Hamroun and colleagues. A favourable pregnancy outcome was found in 56.5% of the 92 women in the cohort.

The most common unfavourable outcomes were premature birth and SGA, observed in 16.9% and 20.5%, respectively. The group also ran a multivariate model, which found an association between unfavourable pregnancy outcomes and first-time deliveries, age, and exposure to corticosteroids during pregnancy.

The issue of medication use during pregnancy was also covered by Dr Dina Zucchi and colleagues, in their work on adherence to medication during pregnancy in women with systemic autoimmune disease. Overall, pregnant patients had good adherence to prescribed medication – although 25% did not take therapies adequately despite close monitored in a dedicated clinic for high-risk pregnancies and having received adequate pregnancy counselling. The findings suggest that anxiety may be a key determinant of low adherence, both in pregnant and non-pregnant women.

Source

Mehta B, et al. The management of pregnancy in autoimmune rheumatic diseases: analysis of 758 pregnancies. Presented at EULAR 2022; abstract OP0124.

Morin M, et al. Are women with spondyloarthritis at increased risk of adverse maternal and infant outcomes? – A Swedish cohort study. Presented at EULAR 2022; abstract OP0126.

Hamroun S, et al. Unfavorable pregnancy outcome is significantly associated with corticosteroid exposure during pregnancy in women with rheumatoid arthritis. Presented at EULAR 2022; abstract OP0127.

Zucchi D, et al. Adherence to medications during pregnancy in systemic autoimmune disease. Presented at EULAR 2022; abstract OP0128.

About EULAR

EULAR – the European Alliance of Associations for Rheumatology – is the European umbrella organisation representing scientific societies, health professional associations and organisations for people with rheumatic and musculoskeletal diseases (RMDs). EULAR aims to reduce the burden of RMDs on individuals and society and to improve the treatment, prevention and rehabilitation of RMDs. To this end, EULAR fosters excellence in education and research in the field of rheumatology. It promotes the translation of research advances into daily care and fights for the recognition of the needs of people with RMDs by the EU institutions through advocacy action.

About the EULAR European Congress of Rheumatology

Since its introduction in 2000, the annual EULAR European Congress of Rheumatology has become the primary platform for exchange of scientific and clinical information in Europe. It is also a renowned forum for interaction between medical doctors, scientists, people with arthritis/rheumatism, health professionals and representatives of the pharmaceutical industry worldwide. The EULAR congress is usually held in June in one of the major cities in Europe.

The scientific programme covers a wide range of topics on clinical innovations, clinical, translational and basic science. Meetings set up by associations of people with arthritis/rheumatism, health professionals and the health care industry complement the programme. The poster sessions, offering lively interaction between presenters and participants, are regarded by many as the heart of the congress.

Over the years, the EULAR Congress has gained a reputation of being a most innovative platform for the practicing physician particularly with respect to the acquisition of information on novel clinical research. The congress attracts more than 18,000 delegates from more than 130 countries.

The aim of the EULAR European Congress of Rheumatology is to provide a forum of the highest standard for scientific, both clinical and basic, educational, and social exchange between professionals involved in rheumatology, liaising with patient organisations, in order to achieve progress in the clinical care of people with rheumatic diseases.

Contact

EULAR Communications, communications@eular.org, Tel. +41 44 716 30 30

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