

RENAL DISEASE AFFECTING PREGNANCY COMPLICATED BY LUPUS

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Systemic Lupus Erythematosus (SLE) is an autoimmune disease with deleterious effects on many organ systems. Renal dysfunction and long term impairment are significant hazards from SLE. The purpose of this study was to evaluate renal complications in pregnancies with a diagnosis of SLE at a large urban hospital. We reviewed the charts of gravida who had a diagnosis of SLE, seeking to describe the frequency of renal complications including hypertensive disease in these patients, as well as describe the clinical characteristics of this population.

Sixty-eight pregnancies with a diagnosis of SLE were studied retrospectively. Of the patients identified with SLE, 30 patients presented with hypertensive disease and 38 SLE patients were normotensive. The average maternal age of the SLE pregnant patients presenting with a hypertensive disorder was 24 years, compared to the normotensive SLE pregnant patients of 26 years. Creatinine levels in patients with hypertensive disorders were elevated compared to creatinine levels in SLE patients without, 1.059mg/dL and 0.677mg/dL, respectively, reflecting a dual insult on renal function. Platelet counts in pregnant patients with SLE and hypertensive disease were similar compared to platelets of normotensive patients with SLE, 199.8/L and 199.7/L, respectively.

It is common for patients with SLE to have concomitant hypertensive disease. Recognition can prompt therapies to reduce the decline in renal function in pregnant women with SLE at risk.

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