

Successful Pregnancy and Child Birth of A 43- Year - Old Woman on Five Years Continuous Ambulatory Peritoneal Dialysis (CAPD)

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Introduction

Successful pregnancies and deliveries of healthy infants by dialyzed patients with chronic renal failure are very rare. We present a case of 43-year-old patient who experienced normal conception after 5 years of CAPD treatment the gestation period, delivery, and one year development of an infant and mother on CAPD.



Figure 1:



Figure 2:

Case report

A 43-year-old female patient was in the condition of terminal renal insufficiency due to chronic glomerulonephritis included in chronic peritoneal dialysis program (CAPD) 2003. Prior to pregnancy, she maintained diuresis at approximately 600 ml daily and did not have any peritonitis attack. In November 2007, she conceived spontaneously and wished to keep pregnancy. The dose of peritoneal dialysis using the CAPD method was adjusted to gestation periods so that she had 1500 ml CAPD exchange five times daily from the 4th month till the last two weeks, and then 1200 ml till the end of pregnancy. The patient is 160 cm tall and her weight at the onset of pregnancy was 52 kg, 60 kg immediately before childbirth, and 54 kg one week after delivery. Immediately before entering delivery room in her 38th gestation week + 4 days that followed spontaneous amniotic sac rupture, the child-bearing patient drained the CAPD dialysis fluid herself. She gave spontaneous birth to a 45 cm long female infant weighing 2250g. The infant was very vital immediately after birth (APGAR 10/10). Diuresis at 1300 ml daily was stimulated postpartum in the mother, and 1000 ml CAPD five times daily was initiated to the patient on

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the 2nd day post-birth. The quantity of dialysis solution inflow was gradually increased during one month, with concurrent reduction in exchange rate to 3 times per 2000 ml of dialysis solution daily. Lactation occurred in the patient on the 8th day postpartum. Physical and mental development of the infant during the first year was regular: height: 74 cm, weight: 9500g.



Figure 3:

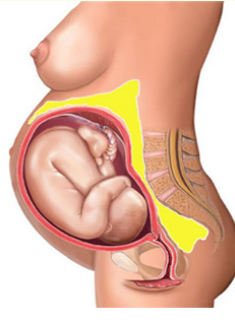


Figure 4:

Exchanges	from	4 x 2000 ml	to	5 x 1200 ml
Ultrafiltration	from	500 ml	to	1000 ml
Diuresis	from	54 kg	to	1000 ml
Weight	from	54 kg	to	61 kg
Glucosae	from	4.0 mmol/l	to	4.6 mmol/l
Urea	from	11.5 mmol/l	to	18.7 mmol/l
Creatinine	from	541 µmol/l	to	713 µmol/l

Conclusion

Positive attitude toward pregnancy and the wish to bear a child in a mentally strong woman supported by her family were crucial during the pregnancy, childbirth and postpartal period of the reported patient. Professional team support was also very important, particularly in managing dialysis in a manner to enable the patient's recovery for spontaneous pregnancy and delivery of a vital infant. Critical gynecologist's decision to prepare the patient for spontaneous childbirth allowed CAPD continuation postpartum. Five-year CAPD therapy allowed the patient's recovery to the extent that she spent her pregnancy, childbirth and postpartal course better than many healthy women in their 43rd year of life.



From left to right:
 Glavas Boras S., Nephrologist, CAPD pregnant patient, Zlopasa G., Obstretition.

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