



Renal Disorders in Pregnancy - A Case Series

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Introduction

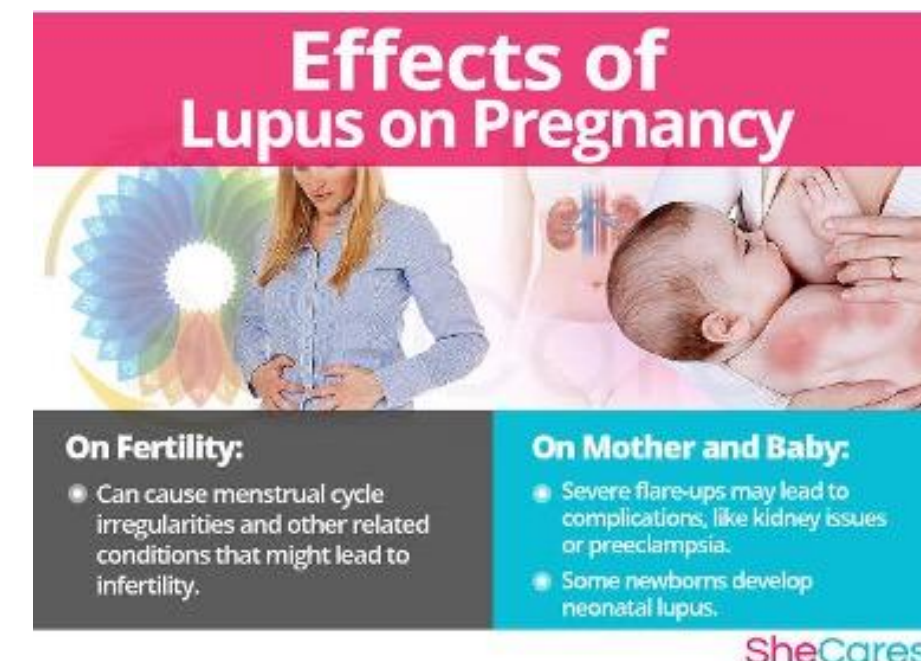
- Renal disorders in pregnancy is a topic with a dearth of studies available, although the incidence of renal disorders being on the rise owing to increasing maternal age, better diagnostic and treatment modalities.
- Diagnosis of renal disorders in pregnancy is challenge as Diagnostic criteria of non pregnant patients cannot be applied and kidney biopsy in pregnancy is tricky!

Objectives

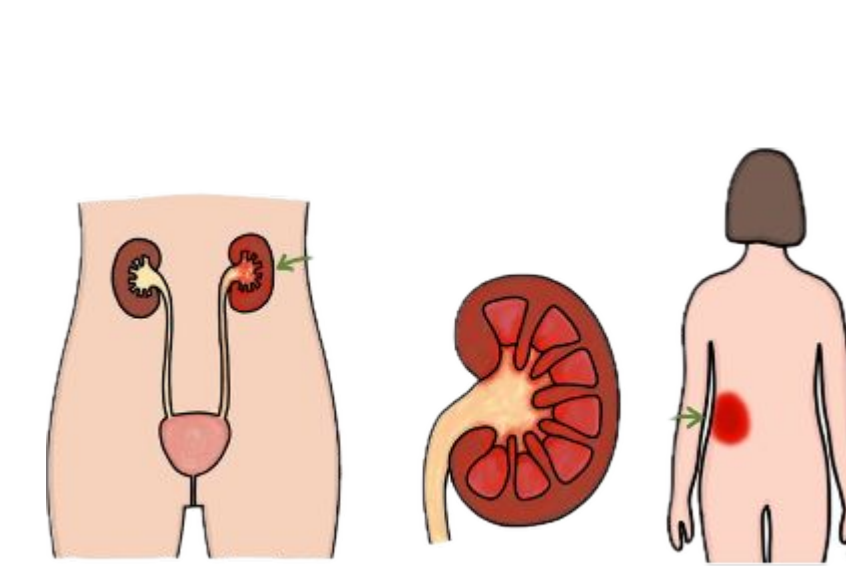
- To address the challenges faced in diagnosing renal disorders in pregnancy.
- To study the adverse maternal and fetal outcomes of a pregnancy complicated with renal disorders.
- Early identification and timely intervention of women who have renal disorders in pregnancy

An Insider's Job - A case of Systemic Lupus Erythematosus

- A 25yr Primigravida, 24 weeks of gestation came with **Multiple fever episodes, joint pain, alopecia, oral ulcers, malar rash**
- BP of 146/98 mmHg.**
- ANA +++ speckled pattern; C3 C4 reduced , Raised CRP;**
- Serum Creat 1.4mg/dl



The Urinary Inertia - A Case of Acute Pyelonephritis



- A 22 year. Primigravida at 32 weeks with
- Right flank pain, fever with chills, pain during micturition since 3 days**
- Urine Analysis - pus cells 15-20/ HPF RBC 12/HPF Bacteria ++**
- Urine Culture Sensitivity Klebsiella pneumoniae sensitive to Piperacillin**
- USG KUB s/o **3mm calculus in right pelvicalyceal system** and f/s/o cystitis

A Friend Turned Foe - A Case of Magnesium-sulphate Poisoning

- A 33 year G3P2L2, previous NVDs, referred at 34 weeks with
 - Severe Pre- eclampsia and
 - USG suggestive of Intrauterine Fetal Death
- Patient was administered magnesium sulfate by Pritchard regimen.
- Pulse 42 bpm, BP 160/110 mmHg; Bilateral Pedal edema Grade II and Absent Bilateral Patellar reflex.**
- Serum magnesium Levels 8.9 mEq/L**
- USG abdomen s/o Bilateral medico-renal disease grade 3**



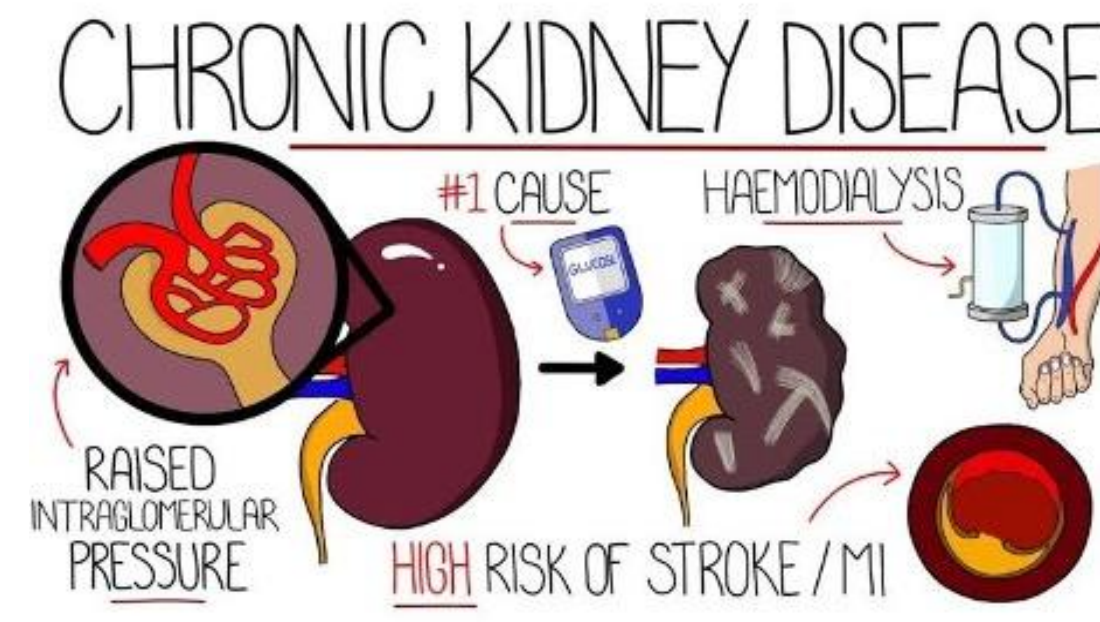
The Uncoupled Kidney -•A Case of Solitary Kidney



- A 22 year primigravida Referred at 24 weeks in view of
 - Maternal USG s/o absent right kidney**
 - USG Pelvis and MRI pelvis had no e/o mullerian anomalies.**
- Patient was closely followed up with home bp monitoring and regular Kidney function test along with urine routine.
- Antenatal period was uneventful and patient went into spontaneous labour at 38 weeks of gestation.

The Shrunken Kidneys with A Swollen BP - A case of AKI on CKD/?CKD

- A 28 year G3P2NND2, previous both preterm LSCS was referred with severe pre-eclampsia and Grade 2 FGR at 30 weeks.
- Termination of pregnancy done in view of impending eclampsia.
- Postoperatively patient continued to have raised blood pressure, albuminuria.and metabolic acidosis
- USG KUB s/o Bilateral Shrunken Kidneys.**



The Uterus Wept as The Kidney Wilted - A Case of Pre-Renal AKI



- A 25 years P1L1, referred on Day 1 of Emergency LSCS done in view of Deep Transverse Arrest with
 - Intraoperative Blood loss of 1.4L**
 - Urine output 30 cc in the last 5 hours**
 - Serum Creatinine - 2.9mg/dl**
 - Arterial Blood Gas Analysis s/o Metabolic Acidosis**

Discussion

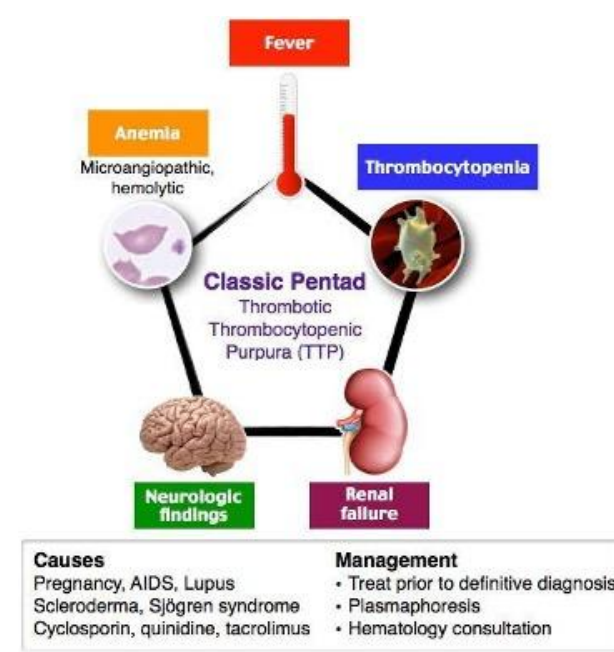
- In late pregnancy, the diagnosis of various renal pathologies becomes difficult.
- Physiologic changes in the renal system during pregnancy make the application of non-pregnant diagnostic criteria challenging
- The clinical implication of studying all these disorders lies in the fact that renal pathological conditions may lead to adverse fetal and maternal outcomes such as fetal growth restriction, preterm delivery, risk of venous thromboembolism, need for dialysis and prolonged hospital stay.

Ground, Kidney & The Grave - A Case of Paraquat Poisoning

- A 30 year G3P2L2, previous both NVD, referred at 25 weeks with
 - oral ulcers, fever, abdominal pain, multiple episodes of diarrhea and vomiting** with new onset Dyspnea grade III.
 - Patient was vitally unstable.
- Serum Creatinine was severely deranged despite multiple Hemodialysis.
- On Probing patient gave history of PICA, consumption of soil sprayed with a herbicide- PARAQUAT.



The Painful Pentad - A Case of TTP >> atypical HUS



- A 26 year P2L1IUFD1, previous both NVD, known case of HELLP syndrome
- Referred on Day 7 postnatally with 4 **episodes of Generalized Tonic Clonic Seizures on day 3 of delivery**; MRI brain s/o PRES and **Serum Creatinine 5.4mg/dl despite 5 cycles of hemodialysis**
- Patient had anaemia, thrombocytopenia and Serum LDH 2192 IU/L**
- Serum Haptoglobin <15

Conclusion

- Renal pathological conditions may lead to adverse maternal and fetal outcomes.
- Importance of early detection, prophylactically prescribing ecosprin, LMWH and multidisciplinary approach for management of such patients.
- While certain renal diseases like systemic lupus nephritis make conception difficult, others such as acute kidney injury complicate the postpartum period

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