

Successful spontaneous pregnancy in a primary ovarian insufficiency patient after a failed ovulation induction

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ABSTRACT

Introduction: Primary ovarian insufficiency (POI) is defined as intermittent or permanent gonadal insufficiency before age of 40 years. The incidence is 1 in 1,000 women before the age of 30 and 1 in 100 women at 40 years. Women may present with amenorrhea or irregular menses, with highly elevated FSH above 25 IU/L. Anti-Mullerian hormone would be invariably low, with undetectable number of antral follicles on ultrasound. Although POI has many causes ranging from genetic, autoimmune, or infective, most causes are unknown. POI causes female infertility hence pregnancies are uncommon but not impossible. **Case Description:** We report a case of a POI woman who conceived spontaneously after a failed attempt at ovarian stimulation following many years on hormone replacement therapy (HRT). She had an unremarkable pregnancy and delivered a healthy baby. **Discussion:** To our knowledge, this is the first reported case of spontaneous conception in the immediate cycle after failed attempt at ovarian stimulation of ovarian activity and ovulation induction. Although unsuccessful, exogenous estrogen followed by gonadotrophins had likely exerted a significant ovarian priming activity thus increasing ovarian sensitivity to de-novo FSH and HRT to initiate follicular growth and ovulation. It is also crucial to advise patient about family planning since intermittent resumption of ovarian activities is possible yet unpredictable.

Spontaneous coronary artery dissection in pregnancy as a rare cause of maternal death: A case report and review of literature

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ABSTRACT

Introduction: Cardiac disease in pregnancy remains the commonest indirect cause of maternal mortality. Acute myocardial infarction is a rare event in women of childbearing age. However, the relative risk is 3 to 4 times higher in pregnancy. Spontaneous coronary-artery dissection (SCAD) accounts for less than 1% of acute myocardial infarctions. It is a foremost cause of heart attack among the pregnant women with high mortality rate. **Case Description:** A 34-year-old Gravida 2 who was admitted for pre-eclampsia developed a sudden onset of atypical central chest pain which spontaneously resolved. She was found collapsed 4 hours after the onset of symptoms and succumbed to death despite vigorous resuscitation which included a perimortem caesarean section from a multidiscipline team. A post-mortem revealed a histopathology finding of acute myocardial infarction secondary to coronary artery dissection. **Discussion:** The etiology of pregnancy associated SCAD is not fully understood. Some postulations include hormonal changes, haemodynamic stress, and changes in the autoimmune status. It has multiple risk factors and may appear with a wide spectrum of clinical presentation. We report a case of pregnancy associated SCAD, along with a comprehensive review of literature.