

Conception intentions and pregnancy experiences amongst women of childbearing age on dialysis

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Introduction

Chronic kidney disease leads to a reduction in fertility that is most marked in women with end-stage kidney disease on dialysis. Although pregnancy rates are increasing in this group of patients, they remain low. The Australian and New Zealand Dialysis and Transplantation (ANZDATA) registry reported pregnancy rates of 0.54 per 1000 person years from 1976 to 1985, and 3.3 from 1996 to 2008¹. Where pregnancies do occur they are high risk, with increased rates of pregnancy loss, preterm birth, small for gestational age and pre-eclampsia. Our aim was to interrogate the intentions and experiences of women of childbearing age on dialysis to highlight issues we could address to improve patient satisfaction and clinical care.

Method

We performed a snapshot survey consisting of 15 questions in all women of childbearing age (18 to <50yrs) at a large tertiary renal centre with 9 satellite haemodialysis units.

Results

122 of 1584 dialysis patients were women of childbearing age on haemodialysis. We received 55/122 responses to our survey. Median time on dialysis was 30 months (IQR 12, 62), and 80% (44/55) were active on the transplant waiting list. 49% (27/55) had regular menses, with 18% (10/55) reporting that their dialysis consultant had discussed contraception with them. 22% (12/55) were using contraception, with 19% (5/27) of those with regular menses using contraception. 15% (8/55) had tried to conceive whilst on dialysis which led to 3 live births (from 1 woman) and 6 miscarriages (from 3 women). A further 1 live birth and 4 miscarriages were a result of unplanned pregnancies. 45% (25/55) still wanted more children when they initially commenced dialysis but 50% of these (12/25) changed their minds 'due to being on dialysis'. 42% (23/55) would still like more children. Only 20% (11/55) were aware of our obstetric-renal service that includes pre-pregnancy counselling and renal antenatal clinics, and just 9% (5/55) had attended this service.

Discussion

Amongst responders, we demonstrate a low incidence of pregnancy despite a high prevalence of women hoping to conceive. This survey highlights the importance of discussing contraception, and judicious use of pre-pregnancy counselling in women of childbearing age requiring dialysis. There is growing evidence that increasing prescription of haemodialysis may improve fertility and lead to fewer adverse pregnancy outcomes^{2 3 4}. With an increasing pregnancy rate in women with end-stage kidney disease, it is important to raise awareness in order to enhance patient experience and clinical outcomes.