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Outcomes of Adenomyosis in Pregnancy

The prevalence of hypertensive disorders of pregnancy, retained placenta or failure of labor progression is higher in women with a histopathologic diagnosis of adenomyosis compared to women without histologic adenomyosis. They were also more likely to have fetal growth restriction. These findings from the ADENO (ADenomyosis and its Effect on Neonatal and Obstetric outcomes) study were published in the July 2023 issue of the *American Journal of Obstetrics and Gynecology*¹.

This retrospective study compared the pregnancy outcomes from 1995 to 2018 in 7,925 Dutch women with a histopathologically confirmed diagnosis of adenomyosis with that in 4,615,803 women in the general population without adenomyosis. The national perinatal registry and pathology databank were used to obtain data for the study.

After adjusting for multiple confounding variables such as maternal age, parity, ethnicity, year of registered birth, induction of labor, hypertensive disorders in previous pregnancies, multiple gestation and low socioeconomic status, women with adenomyosis were found to be at higher risk of adverse maternal and neonatal outcomes. They were at a higher risk of developing hypertensive disorders with an adjusted odds ratio (aOR) of 1.37 or

pre-eclampsia (aOR 1.37). They were also more likely to have small-for-gestational-age infants (aOR 1.15), retained placenta (aOR 1.29), postpartum hemorrhage (aOR 1.23) or undergo emergency cesarean birth (aOR 1.54). The aOR for failure to progress was 1.24 among women in the adenomyosis group. No such association was found for HELLP (Hemolysis, Elevated Liver enzymes, Low Platelet count) syndrome, placental abruption, need for oxytocin stimulation or operative vaginal delivery.

This study draws attention to the high risk of adverse pregnancy outcomes in women with adenomyosis, a benign gynecologic condition, suggesting that "uterine (contractile) function in labor and during pregnancy is impaired" in these women. They highlight the consideration of high-risk obstetrical management of these patients, including more frequent monitoring of fetal growth.

REFERENCE

1. Rees CO, van Vliet H, Siebers A, Bulten J, Huppelschoten A, Westerhuis M, et al. The ADENO study: ADenomyosis and its Effect on Neonatal and Obstetric outcomes: a retrospective population-based study. *Am J Obstet Gynecol.* 2023;229(1):49.e1-49.e12.

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