

Behçet's disease and pregnancy: 23 pregnancies in 10 women

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Introduction:

Behçet's disease is particularly common in Mediterranean countries and the Far East. Because it is predominantly male, the association with pregnancy is rarely reported in the literature. The conclusions of the few studies devoted to Behçet's disease, which vary widely depending on the series, remain controversial.

Materials and methods:

Retrospective descriptive study of 10 women with one or more pregnancies in a series of 25 cases of known female Behçet's disease followed for approximately 9 years in an internal medicine department, all meeting the classification criteria of the International Study Group of Behçet's Disease.

Results:

During the study period, we observed 23 pregnancies in 10 women, an average of 1.4 ± 0.72 pregnancies per woman (extremes 1 and 3 pregnancies/woman-median 1). In all cases, Behçet's disease was already known and treated, the mean time between diagnosis of the disease and the first pregnancy observed being $4 \text{ years} \pm 2.3$ extremes of 6 months and 5 years.

The mean age at the time of pregnancy was 31.9 ± 5.34 (extremes 22 and 39, median 32).

Among these women, 8 presented a minor or moderate form of the disease, cutaneous-mucosal, ocular and/or articular, and 2 a severe form of the disease, with vascular involvement such as thrombosis of the central retinal vein, and one presented a neuro-behçet's disease.

In 8 patients, the disease remained stable during 16 pregnancies. In 2 patients, pregnancy was marked by the occurrence of one or more flare-ups, sometimes disabling, of oral, cutaneous and/or genital aphthosis. 9 patients were treated before and during their pregnancies. These treatments included colchicine in all 10 cases, and maintenance corticosteroids in 4 cases.

All 23 pregnancies were carried to term, and all newborns showed no clinical symptoms reminiscent of the maternal disease.

Conclusion:

In this study, 23 pregnancies were carried to term in 10 patients with Behçet's disease. In line with the results of other series reported in the literature, pregnancy had no adverse effect on the disease, and the disease did not appear to interfere with the natural course of pregnancy.

However, as is recommended in internal medicine for any systemic disease, pregnancy in Behçet's disease requires close collaboration between internists and obstetricians and gynaecologists, so that pregnancies can be brought to term in the best possible conditions.

Bibliographie:

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