

Association of autoimmune diseases and adverse pregnancy outcomes

An umbrella review

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Background

The prevalence of autoimmune conditions (AI) is twofold higher in women compared with men, especially during the reproductive years. Autoimmune conditions have been associated with a greater risk of adverse pregnancy outcomes, but this has not been examined before for a broad range of autoimmune conditions and pregnancy outcomes



Inclusion Criteria

- Population:** Pregnant women
- Exposure:** 15 Autoimmune conditions
- Comparator:** Presence of a control group without autoimmune conditions
- Outcome:** Adverse pregnancy outcomes

Medline, Embase and Cochrane library for systematic reviews
Inception-Sep.,2022

Methods

Synthesis methods: narrative & quantitative methods, pooled OR,RR
Quality assessment: AMSTAR2
Impact of overlap: corrected covered area method

Results

33 reviews included in this review

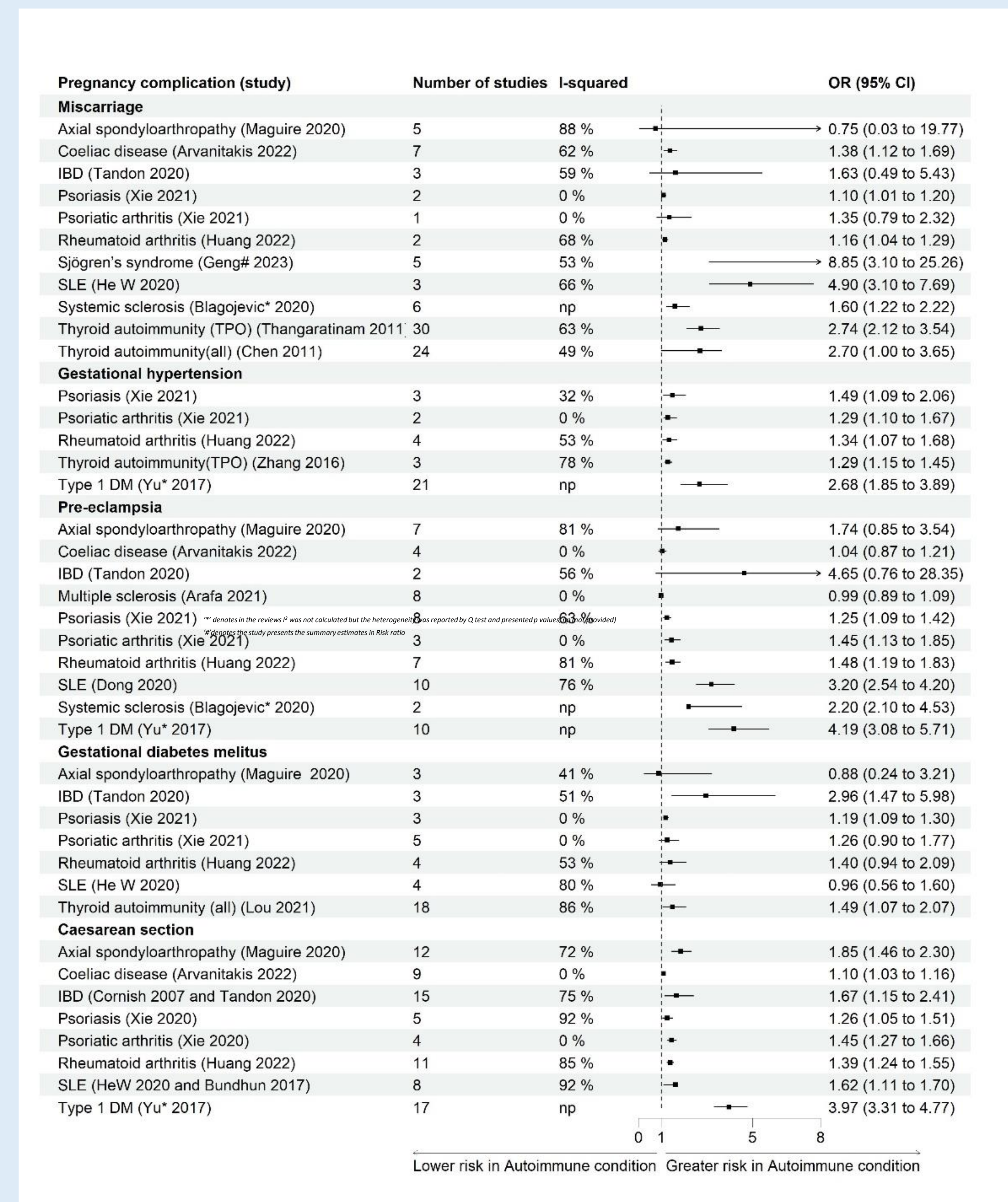
Maternal outcomes

- Miscarriage:** Sjögren's syndrome RR 8.85 (95% CI 3.10-25.26); SLE OR 4.90 (3.10-7.69); thyroid autoimmunity OR 2.70 (1.00-3.65); systemic sclerosis OR 1.60 (1.22-2.22); and coeliac disease OR 1.38 (1.12-1.69).
- Pre-eclampsia:** T1DM OR 4.19 (3.08-5.71); SLE OR 3.20 (2.54-4.20); systemic sclerosis OR 2.20 (2.10-4.53).
- GDM:** IBD OR 2.96 (1.47-5.98); thyroid autoimmunity OR 1.49 (1.07-2.07).
- CS:** T1DM OR 3.97(3.31-4.77); AxSPa OR 1.85(1.46-2.30)

Neonatal outcomes:

- Intrauterine growth restriction (IUGR):** systemic sclerosis OR 3.21 (2.21-4.54); coeliac disease OR 1.71 (1.36-2.14).
- Small-for-gestational age babies:** SLE OR 2.49 (1.88-3.31); and rheumatoid arthritis OR 1.49 (1.22-1.82).
- Stillbirth:** T1DM OR 3.97 (3.44-4.58); IBD OR 1.57(1.06-2.32), coeliac disease OR 1.57(1.17-2.10).

The association of autoimmune conditions and maternal outcomes



** denotes in the reviews I² was not calculated but the heterogeneity was reported by Q test and presented p values, np (not provided) # denotes the study presents the summary estimates in Risk ratio

Conclusion

Pregnant women with autoimmune conditions are at greater risk of developing adverse pregnancy outcomes. Further research is required to establish the pre-pregnancy protocols for counselling and screening to prevent or manage the complications of these conditions

