



SUST Journal of Natural and Medical Sciences



Journal homepage: http://journals.sustech.edu/

Detection of Lupus Anticoagulant Antibodies Among Sudanese Women With Habitual Abortion Mohamed H. Alim* and Fathelrahman M. Hassan

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Article history: Recieved: March 2015 Accepted: May 2015

ABSTRACT

This study is a cross- sectional study, conducted in Khartoum state during the period from December 2013 to July 2015 to determine lupus anticoagulant among Sudanese women with habitual abortion. Onehundred and Forty patients with three or more habitual abortion were enrolled in this study and sixty healthy pregnant women without history of abortion were selected as control group. The age was ranging between 17 -45 years. Patients and control group were screened for the presence of LA by using coagulometer (CoatronM2), ACA by using enzyme linked immunosorbent assay (ELISA). The results were analyzed by using the program Statistical Packages of Social Sciences version 21 (SPSS program) and express as means. The results showed that the means of LA, Fibrinogen level and ACA for patients were (61.4 ± 21.6) , (265.3 ± 118.9) and (242.5 ± 124.3) , respectively. compared to the mean of LA, Fibrinogen level and ACA for control group were (36.4 \pm 4.6),(255.1± 68.5) and (40.4± 4.5) respectively. Thirty seven of the patients (26.4 %) had lupus anticoagulant while the geographical distribution of the One hundred and Forty patientswere: 23 of them (16.4 %) from South Kurdfan. The study concluded that the presence of LA was significantly associated with habitual abortion.

KEYWORDS : Recurrent pregnancy loss, Lupus Anticoagulant, Anticardiolipin Antibodies

المستخلص

هذه الدراسة الوصفية أجريت في ولاية الخرطوم في الفترة من ديسمبر 2013 الي يوليو 2015م لتحديد مضاد التجلط لوبص في النساء السودانيات المصابات بإجهاض متكرر ، تم اختيار مائة وأربعون مريضة مصابة بالإجهاض المتكرر (ثلاث أو أكثر) . كما تم أخذ ستون عينة من نساء حوامل لا يعانين من مشاكل لها علاقة بفقدان الحمل كمجموعة ضبط تراوحت أعمارهن من 17 الي 45 سنة .تم اختيار كل النساء في الدراسة لمضاد التجلط لوبص باستخدام جهاز قياس التجلط ،(Coatron M2) مضاد الكارديوليبين باستعمال تقنية ELISA وتم تحليل النتائج بواسطة برنامج الحزم الاحصائية للعلوم الاجتماعية إصدارة 21 ، تم حساب المتوسط وكانت النتائج كالآتي : متوسط مضاد التجلط لوبص ، الفبرينوجين ومضاد كارديوليبين المتوسط وكانت النتائج كالآتي : متوسط مضاد التجلط لوبص ، الفبرينوجين ومضاد كارديوليبين التجلط لوبص ، الفبرينوجين ومضاد كارديوليبين التجلط لوبص ، الفبرينوجين ومضاد كارديوليبين في مجموعة الضبط (4.66 ± 4.6.4) ، (68.5±255.1) ، (68.5±255.1) ،

(40.4±40.4) على التوالي .وقد أظهرت الدراسة أن 37 من المريضات (26.4%) مصابات بهذا المضاد كما أظهرت الدراسة أن معظم المرضى من ولاية جنوب كردفان 23 (16.4%) خلصت هذه الدراسة إلى أن وجود مضاد التجلط لوبص له علاقة بالإجهاض المتكرر.

INTRODUCTION

Recurrent pregnancy loss (RPL) is the loss of 3 or more spontaneous consecutive pregnancies (1). There are many causes, such as genetic, anatomic, hormonal, medical and immunologic causes (2). If properly screened the cause will be found in almost all women (1). The most common singular defect in women with recurrent miscarriage syndrome is a hemostatic defect and if athorough-antiphospholipid evaluation is performed. |The most common of these is found to be antiphospholipid syndrome (1). Antiphospholipid antibodies are acquired autoantibodies against phospholipid have been that associated with slow progressive thrombosis and infarction in the placenta (3). Lupus anticoagulants and anticardiolipin antibodies belong to a heterogeneous group of antibodies directed against negatively charged phospholipids. Although antiphospholipid antibodies are frequently found in otherwise healthy persons, they have been associated with thrombosis, thrombocytopenia, and fetal loss (4) as well as a variety of other clinical condition⁽⁵⁾. Extensive placental infarction in patients with spontaneous abortion or fetal loss and antiphospholipid antibodies has been reported in some studies ⁽⁶⁾ but not in others ⁽⁷⁾. An underlying pathophysi-ologic mechanism is still being sought for fetal loss thrombosis. Α number approaches have been therapeutic proposed to prevent pregnancy loss, (8) but their efficacy has not yet been evaluated in randomized clinical trials. Most studies suggesting an association between pregnancy loss and lupus anticardiolipin anticoagulant or antibodies involve a case series of patients .Thus ,antiphospgholipid antibodies have not been convincingly shown to be a risk factor for pregnancy loss. (9)

MATERIALS and METHODS

This study is a case- control study, conducted in Khartoum state during the period from 2013 to 2014 to determine lupus anticoagulant among Sudanese women with habitual abortion. 140 patients with three or more habitual abortion and 60 healthy pregnant women without history of abortion were selected as control group. The age was ranging between 17 -45 years. Patients and control groups were screened for presence of LA by using coagulometer (CoatronM2), ACA by using enzyme linked immunosorbent assay (ELISA). 4.5 ml of whole blood was collected from all patients and control group in 0.5 ml (3.8 %) Trisodium citrate as anticoagulant and proceed for plasma separation using centrifuge at 4000 RPM for 5 minutes. The obtained plasma was separated from the red blood cell using a plastic pipette, was placed it in a plastic test tube, was frozen at -70°C., and was stored until performing the tests. Lupus anticoagulant and fibrinogen were performed using coagulometer (CoatronM2), ACA was detected by an ELISA method. The collected data was analyzed to obtain the mean, standard deviation. Frequencies and probability (p- value) between patients and control using Statistical package of Social Sciences (SPSS version 21) computer program.

RESULTS

The result of the study showed that the most affected age ofpatient in range between (28-33) years comprising (27.9%) of the study group, another

affected age group was between (40-45) yearscomprising (5.0%) of the study group, seetable (1). In addition, the most affected populationwas from South Kurdfan, were 23 (16.4%)were affected.As forCentral Darfur only 1(0.7%) was affected, see table (2). The mean of LA was significantly increased in patients with habitual abortion compared with control group (p,value 0.00). Also the mean of ACA was significantly increased in women habitual abortion compared with control group (p,value 0.00). The mean of fibrinogen level was insignificantly increased in habitual abortion women compared with control group (p,value 0.449),see table (3). There was significant correlation between the presence of lupus anticoagulants (LA) and the age (p= 0.03) in women with habitual abortion.it is seen more in age group between 34-39 years, see table (4).

Table 1: Distribution of Study population's according to age group

Characterize	N(%	N(%)		
Ages/years	Number of Patient and	Control and %		
	%,			
16-21	19 (14)%	17(28)%		
22-27	37 (26)%	16(27)%		
28-33	39(28)%	20(33) %		
34-39	38(27)%	5(8)%		
40-45	7(5)%	2(3)%		
Total	140 100	60 100		

Table 2: Sudanese States distribution of patients and controls

Sudan States	Patien	ts %	Cont	rol %
White Nile	12	(9) %	3	(5) %
Khartoum	13	(9) %	5	(8) %
Al Qadarif	5	(4) %	3	(5) %
Northern	17	(12) %	5	(8) %
River Nile	3	(2) %	4	(7) %
Sennar	8	(6) %	5	(8) %
North Darfur	8	(6) %	6	(10) %
West Darfur	6	(4) %	2	(3) %
South Darfur	2	(1) %	0	(0) %
East Darfur	4	(3) %	0	(0) %
South Kurdfan	23	(16) %	4	(7) %
North Kurdfan	16	(11) %	6	(10) %
West Kurdfan	2	(1) %	0	(0) %
Central Darfur	1	(7) %	0	(0) %
Kassala	5	(4) %	2	(3) %
Blue Nile	0	(0) %	3	(5) %
Red Sea	0	(0) %	3	(5) %
Al jazirah	10	(7) %	9	(15) %
Total	14	40 100		60 100

ISSN (Print): 1858-6805 e-ISSN (Online): 1858-6813

Table 3: The mean of LA, ACA and Fibrinogen levels in case compared to control group.

Parameters	$Mean \pm SD$		P.value
	Patients	Control	
Lupus Antibodies(LA)	61.4 ± 21.6	36.422 ± 4.6	0.00
AntiCardiolipin Antibodies	242.5 ± 124.3	40.4 ± 451	0.00
(ACA)			
Fibrinogen	265.28 ± 118.9	255.1 ± 68.5	0.449

P. value < 0.05 is significant

Table 4: Distribution of LA, ACA and fibrinogen levels according to age groups

	Mean ± SD		
Age groups/years	Lupus antibodies screening/ seconds	Anticardiolipin antibodies U/ml	Fibrinogen mg/ 100mL
16 – 21	60.3±10.3	226.8±108.9	260.2±130.9
22 - 27	57.0±15.0	241.3±121.4	278.9±109.0
28 - 33	61.4±26.4	259.9±138.9	275.4±134.6
34 - 39	66.2±25.6	239.5±121.1	236.9±96.4
40 - 45	61.5±20.2	210.9±131.5	304.9±156.3

DISCUSSION

The mean of LA was significantly inwomen with habitual increased abortion compared with control group (p<0.05). The mean of ACA was significantly increased in habitual abortion compared with control group (p<0.05). In the present study there was insignificant difference between the mean level of fibrinogen in study group of patients and control group (p > 0.05). The study is consistent with the study of Tagwawhich **Tagreet** and shows statistically significant difference of anticoagulant in recurrent miscarriage which compared between Sudanand other countries. The present study showed that 26.4 % of patients with habitual abortion had a positive result for LA, while 34.3 % had positive for ACA. These finding are consistent with studies, which has been done in Iraq, India and Nigeria. In Iraq study the frequencies of LA and ACA in of women with recurrent miscarriage were (LA 13.5 %, ACA 26.5 %) carried out by (12). In Indian the frequencies of ACA in sera of women with recurrent miscarriage was 40% carried out by (13). Another report by (14)

from Nigeria shown that the frequencies of LA were 4.8 %. The prevalence of ACA in patients with habitual abortion , as determined in this study is 34.3% and this is lower than the rate reported by (13) on the other hand, a much higher frequency of 40.3 % was reported from India. Also the results of the current study were confirmed by (10), the study showed that 4% of women with recurrent had LA, other result of study in Sudan donse by (11), which agreed with our result The variations noted in the rates of LA and ACA is related to patient selection, various pre-analytical variable, differing sensitivities of tests, isotypes tests and the population studies⁽¹⁶⁾. The use of variable types and numbers of tests with variable sensitivities methodologies, and differences in the numbers of cases included and the criteria of patient selection (17-18)

CONCLUSION

In conclusion, the presence of LA and ACA in sera of women with recurrent abortion were significantly associated with recurrent abortion and the age. It is there for advisable to routinely use the test (dRVVT) when screening for LA.

LA is a significant cause of recurrent fetal loss in Sudanese women. The dRVVT is the best screening test for LA. The detection of LA in the healthy pregnant Sudanese women without history of abortion is absent according to our study.

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