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Two Cases of ACEi/ARB fetopathy

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Case Study: Drugs interfere with the renin-angiotensin system, such as Angiotensin-converting enzyme inhibitors(ACEIs) and angiotensin receptor blockers(ARBs) are commonly used in children and adults in the treatment of hypertension. Using these drugs after first trimester of pregnancy associated with fetal and neonatal morbidity and mortality.

Cases

First case is a newborn, who was consulted for evaluation of renal function. Her mother had been taking ARB until 30 weeks (presumed) when pregnancy was first noticed. She stopped taking this drug because of her gynecologist detected progressive oligohydramnios. Performed ultrasonography of kidneys after birth showed relatively small kidneys with poor corticomedullary differentiation and a small cyst of about 0.3 cm which are usually seen in dysplastic kidney. Examination MRI brain was shown no remarkable abnormal finding. Currently (8 months) her renal function maintains normal despite of poor imaging findings.

Second case was 4yr-old boy. He visited hospital for treatment of chronic kidney disease for unknown cause. The kidney biopsy in other hospital revealed chronic thrombotic microangiopathy with severe tubulointerstitial change. There were no systemic features related to TMA. On past history, he underwent peritoneal dialysis for 1~2 months after birth, but was not followed-up. Initially, he was hypertensive and had the stage 4 of CKD. We found that his mother had taken ACEi to control sudden hypertension during 3rd trimester of pregnancy and after use of that drug, oligohydramnios developed. So, we could make a diagnosis of ACEi fetopathy. Now he is on CAPD waiting for transplantation.

Conclusion:

Presented two cases showed developing of mild to severe renal dysfunction after intake of ACE inhibitors of mothers during pregnancy. This is most particularly pertinent in the care of pregnant women where the sharing of care may take place between LMC, GPs and hospital specialists. Physicians should be well acquainted with possible complications of ACE inhibitors.