

## RECURRENT JAUNDICE DURING PREGNANCY

### (A Case Report)

by

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While Jaundice is found sporadically during pregnancy, recurrent jaundice in successive pregnancies is a rarity. This has prompted the authors to publish 1 case having jaundice during 3 consecutive pregnancies.

#### CASE REPORT

Mrs. G. A., aged 20 years, Gravida 3, para 0, was admitted on 22.12.77 in N.R.S. Medical College & Hospital with complaints of amenorrhoea for 28 weeks, itching all over the body for 1 month and yellowish discolouration of skin for 2 weeks.

#### Menstrual History:

She had previously normal cycles having her last menstrual period on 21.5.77.

#### Past Obstetric History:

She gave history of Jaundice in previous 2 pregnancies appearing between 20-24 weeks with same clinical symptoms. She had unaided and uneventful premature deliveries in both the pregnancies, the first baby weighing 1.1 Kg. expired 6 months after birth from rickets and the second weighing 1.5 Kg. born 2 years back is living and well. The symptoms of itching and yellow colouration in both pregnancies disappeared 4-6 weeks after confinement without any medical treatment.

There was no history of fever, pain in abdomen or taking drugs like chlorpromazine, antibiotic, hormones, oral contraceptives etc., prior to or during any pregnancy.

#### On Examination:

General condition was average. There was yellow colouration of conjunctivae and mucous membrane of under surface of tongue. Spleen and liver were not palpable.

**Abdominal Examination**—Height of uterus was 28 weeks, Presentation was vertex, position—R.O.A. Head was engaged, F.H.S.—136/mm and regular.

**Vaginal Examination**—Os 2 fingers dilated, cervix  $\frac{1}{2}$  taken up, membranes-present and pelvis adequate.

#### Investigations: Blood Examination

Hb-11.61 gm%, Differential count—poly-72%, lympho-24%, mono-2%, eosino-2%, Total count of WBC-9400, ESR-20 mm/1st hour, Platelet-1,75,000/cu mm.

**Liver Functions Tests:** Total Protein-6.2 gm%, Albumin-3.2 gm%, Globulin-3 gm%, Cholesterol-266 mg%, Thymol Turbidity-4.8 units, Vandenberg—Direct positive, SGPT-40 Units, Alkaline phosphatase-22 K.A. Units, Bilirubin-12.5 mg%.

#### Examination of Urine:

Both bile pigments and bile salts were present but urobilinogen was absent.

#### Examination of Stool:

Fat was in excess but sterco-bilinogen was absent.

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On the day of admission the patient confined normally a female baby weighing 1.4 Kg. Placenta and Membranes weighing 250 gms were expelled normally and completely and there was no marked abnormality on naked eye examination except yellowish tinge on membranes. The baby cried at birth and Apgar Score was 8 at birth. There was no postpartum haemorrhage.

The patient had received treatment with Vit. B-Complex and Cap. Neomycin. She was discharged 15 days after delivery with a healthy baby and without any complaints.

#### Discussion

The exact aetiology of jaundice during pregnancy is not clear more so the reasons for its recurrence in consecutive pregnancies. Various theories has been postulated. But the fact remains that they usually occur in the mid or last trimester without having too much adverse effects on pregnancy and labour and spontaneous remission is the rule after delivery.

The probable theories postulated are:

Mechanical compression of the extra-hepatic bile duct by the enlarged uterus pressing on a constipated transverse colon (Mayer, 1906).

Some ascribe such type of jaundice as hepato-cellular toxæmia of pregnancy or obstetric hepatitis or cholestatic jaundice of pregnancy.

Sevanborg and Ohherron (1954) have done histological examination of liver in recurrent jaundice and have found evidence of intra-hepatic cholestasis focal or irregular and located in central position of lobule. Explanation was given as inspiration of bile due to endocrine anomaly (Popper and Schaffner, 1954).

Sallomi and Belew (1965) ascribed it due to elevated level of progesterone in last trimester.

Thorling (1955), Sevanborg and Ohherron (1954) and Brown *et al* (1963) have reported jaundice appearing in last 4 weeks of pregnancy.

Mohini (1966) has reported a similar case occurring with 12-14 weeks of pregnancy. Laxami and Purandare (1967) have reported 2 cases occurring at 7th month of pregnancy; 1 was due to spherocytic anaemia; the etiology of other was unknown.

Singha and Arora (1974) reported a similar case—5th gravida with jaundice occurring at 8th month of pregnancy.

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