

RECURRENT INTRAHEPATIC CHOLESTATIC JAUNDICE OF PREGNANCY

(A Case Report)

by

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Although jaundice occurs not infrequently during pregnancy, recurrent intrahepatic jaundice of pregnancy is uncommon. In Indian literature, occasional case reports have been published. The present case of recurrent intrahepatic cholestatic jaundice of pregnancy occurred in 3 consecutive pregnancies.

Case Report

Mrs. S.L.K. aged 40 years, Gravida 3, para 2 was admitted on 5-2-1981, for itching all over body and yellow discoloration of eyes of 1 months duration. She had amenorrhoea for 36 weeks. She gave history of jaundice in previous 2 pregnancies appearing between 24-28 weeks with similar complaints. She had full term normal deliveries in both the pregnancies. Both male offsprings aged 9 and 6 years are living and well. The jaundice and itching disappeared in 2-4 weeks following previous 2 deliveries without any medical treatment. There was no history of fever, abdominal pain or

taking hepatotoxic drugs like chlorpromazine or 'pill' prior to or during any pregnancy.

Clinical examination revealed an averagely built pregnant female having icterus. No other signs of hepatocellular failure like flapping tremors, spider naevi, palmer erythema or loss of pubic and axillary hairs were evident. Liver and spleen were not palpable on abdominal examination. There were no signs of free fluid in the peritoneum. Height of uterus was 36 weeks. Presentation was vertex with ROA position. Head was engaged. FHS were regular with the rate of 140/min. On per vaginal examination, os was two fingers dilated, membranes were present and pelvis was adequate.

Investigations

Blood examination: Hb-8.5 gm%. Total count of WBC-8600/cmm. Differential count-poly .70%, lympho. .28%, eosino. .2%, mono. 0%, baso. .0%. Platelet count-2,00,000/cmc. ESR-25 mm/1st hour.

Liver function tests: Bilirubin-conjugated: 3.5 mg%, unconjugated: 2 mg%. Total proteins: 6 gms%, albumin: 3.1 gms%, globulin: 2.9 gms%. Serum cholesterol: 230 mg/100 ml. Alkaline phosphatase: 29.5 K.A. Units. SGOT: 22 IU/L (Normal-below 18 IU/L), SGPT: 16 IU/L (Normal-below 18 IU/L). Van den Bergs reaction-Direct positive.

Urine: Bile salts and bile pigments were present but urobilinogen was absent.

Stool: No abnormality was detected.

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Australia Antigen was not detected.

Patient delivered normally on 28-2-1981. The female child cried immediately after birth. Apgar score was 9. Baby weighed 2.4 Kg. Placenta and membranes weighing 500 gms. were expelled completely within 5 minutes. There was no postpartum haemorrhage. Baby did not have jaundice and was normal.

Liver biopsy taken prior to delivery revealed liver tissue with well preserved architecture. The hepatocytes showed irregular cholestasis (Fig. 1), occasional bile thrombi were seen in

the dilated canaliculi. The hepatocytes also showed mild to moderate focal swelling and vacuolization. The portal tracts were unremarkable. In view of the clinical history and results of other investigations the diagnosis of recurrent intrahepatic cholestatic jaundice was made.

The follow up examination, on 10th day of delivery, showed that the jaundice had disappeared and patient had no pruritus. The repeat. Liver biopsy was requested but it was refused by the patient.

See Fig. on Art Paper III