



Live Birth after IVF in a 55 Years Old Woman- A Case Report

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ABSTRACT

Owing to the tendency of women to delay childbearing because of career and other personal priorities, fertility specialists today are seeing more and more fertility related problems. In developing countries like India, infertile couples seek late care because they would have sought unorthodox treatment at homes of traditional care givers. There is a natural age related decline in fertility in women .Older age seems to have an adverse effects on different stages of ART. It is associated with reduced response to Controlled Ovarian Stimulation and higher percentage of aneuploidy and degenerative oocytes resulting in lower fertilization , cleavage and implantation rate. Here we report a rare case of successful Live Birth after IVF in a 55 years old woman.

INTRODUCTION

Owing to the tendency of women to delay childbearing because of career and other personal priorities, fertility specialists today are seeing more and more fertility related problems. In developing countries like India, infertile couples seek late care because they would have sought unorthodox treatment at homes of traditional care givers. Also due to ignorance and lack of awareness these infertile couples in rural areas reach to the appropriate facility late in advanced age. There is a natural age related decline in fertility in women .Older age seems to have an adverse effects on different stages of ART. It is associated with reduced response to Controlled Ovarian Stimulation and higher percentage of aneuploidy and degerative oocytes resulting in lower fertilisation, cleavage and implantation rate. Whenever such conception occurs finally, they have high failure rate resulting in abortions. Even

if these pregnancies advances to 2nd and 3rd trimester, maternal complications in terms of hypertension, GDM, placental abnormalities preterm labour set in eventually. Doctors handling pregnancies of such advanced ages and that too precious have to face various challenges.

CASE REPORT

Mrs. Motiya Bai, a 55yrs old nulliparous woman concieved in second cycle of IVF at Ajmer centre. Husband is a farmer of age 58yrs.pregnancy was diagnosed by Serum and urinary beta hcg levels. Patient was followed up with serial sonographies and routine antenatal investigations. At 32 weeks of gestation, patient got registered in j k lon mother and child hospital Kota. Her expected date of delivery was calculated to be 22.8.2016. An ultrasonography was done which gave both twins alive of 32 weeks, a monochorionic diamniotic placenta and adequate liquor blood sugar levels,

liver function test, kidney function test, thyroid levels were found to be normal. On examination patient was neither pale nor icteric, blood pressure was 130/90mmhg and pulse was 88/ min. Uterus was over distended with first twin in cephalic presentation and other in oblique lie. Patient was admitted in the hospital on 9.7.2016 with the complaints of difficulty in breathing with a blood pressure 140/90mmhg and severe pedal edema. Patient had developed severe abdominal edema, pedal edema and facial puffiness. There were basal crepts in bilateral chest and respiratory rate was increased. Patient managed with physician consultation and was started on anti hypertensives which she developed after admission. Patient was observed in the hospital and got relieved of breathing problem. But at 35 weeks of gestation her blood pressure remained uncontrolled even on 2 anti hypertensives and thus in favour of mother an elective caesarian section was done. Twin male babies delivered with the weights if 2.5 kg and 1.75kg respectively. Apgar scores of both babies were at 5 min was 9/10. Both babies cried immediately after birth and were transferred to Nursery for monitoring. Patient was discharged on 9th postoperative day with both babies feeding well.

DISCUSSION

There is a progressive decline in delivery rates in women of advanced conception. Moreover, the eggs are quite old and diminishing in quality & a viable pregnancy may be hard to come and even if these women conceive, chances of miscarriages are high. So, most of these women opting to get pregnant today are using eggs from younger women. When the ovaries may stop producing eggs, the rest of the reproductive system can be primed with estrogen and progesterone treatment. Chances of getting pregnant after menopause are not totally ruled out but are approximately 5%.

A century ago, when the life expectancy for a woman was approximately 50 yrs, a woman would be considered elderly by 35. However today better life standards, healthy lifestyle and

modern health care means that a women of this age is in her prime. Though, pregnancy in older woman is associated with more of complications like GDM, Pre eclampsia, Preterm labour, miscarriages but today these complications can be better dealt with than previously as a result of modern , high techniques and advanced detection and treatment facilities.

Then, in other ways these older mothers feel more settled and more ready in themselves to have a baby, possibly due to already having had career and leisure opportunities and are perhaps better able to cope with the emotional and financial aspects that having a child inevitably mean.

Hence there are case reports of pregnancies after IVF in women aged 40 yrs above but there are a very few reports of delivery of healthy babies after 47 yrs of age in India and worldwide so far. ART is increasingly been accepted as a modality for treatment in India after initial resistance.

Pregnancies in older women have been a subject of debate. Objections to pregnancies in older women is due to medical risks for the child and mother, the application of fertility treatments beyond natural reproductive age and the psychological consequences for the child. But in many countries there are no legal age restrictions for having a child as they feel that having a child is the fundamental right of a woman.