



الجمعية اللبنانية للتوليد والأمراض النسائية

Lebanese Society of **Obstetrics & Gynecology**
Société Libanaise d'**Obstétrique & de Gynécologie**



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RECURRENT PREGNANCY LOSS (RPL) POTENTIAL GUIDELINES

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STEP #1

After 2nd
Negative
FHR

SCREEN and ADDRESS:

- WEIGHT EXTREMES
- SMOKING
- ALCOHOL

If 2nd Trimester Loss and Incompetent Cervix Suspected,

For next pregnancy:

- ⇒ Serial Transvaginal U/S for Cervical Length
- ⇒ Consider Cerclage (only for singleton)
- ⇒ Consider Vaginal Progesterone

START WORK-UP with:

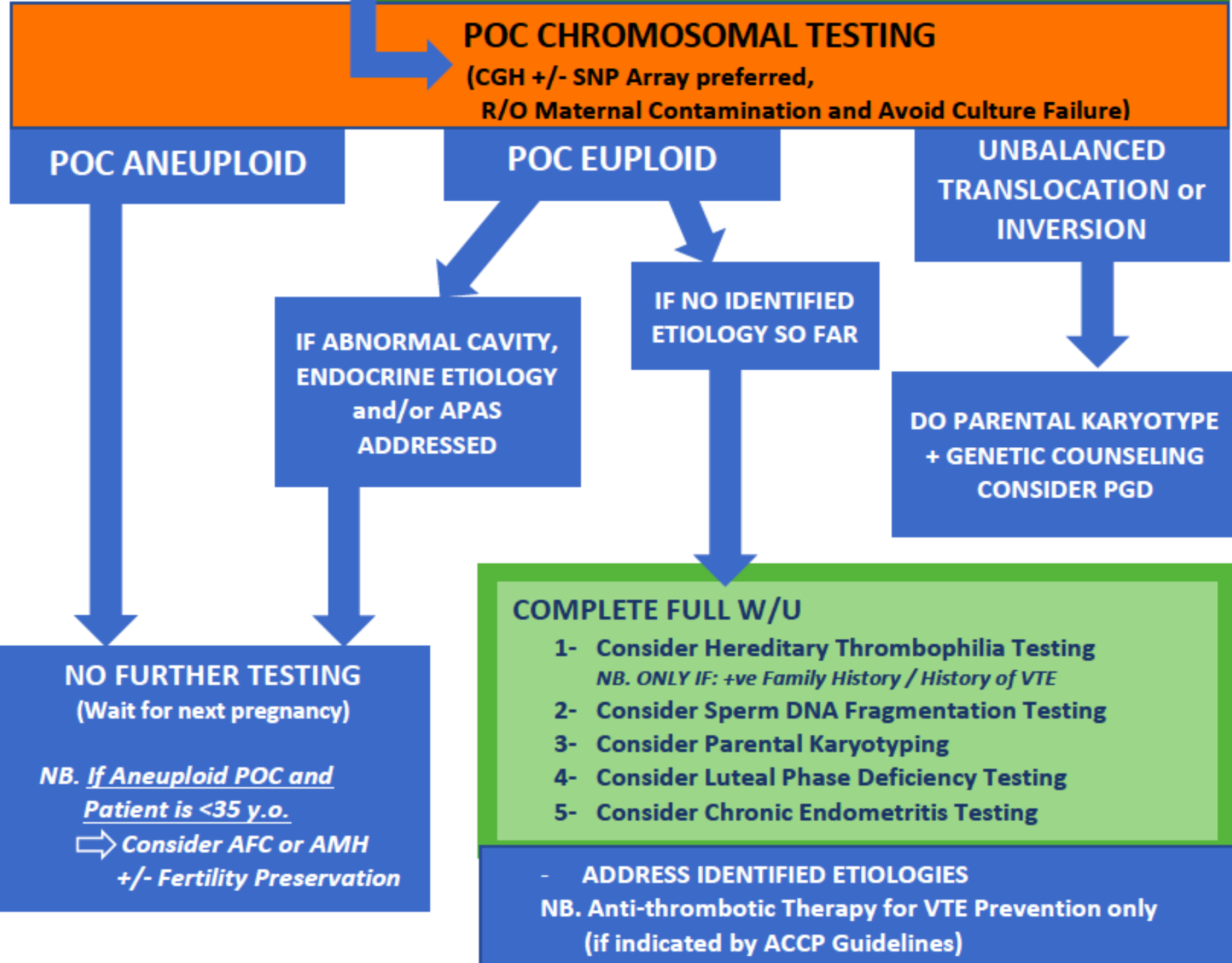
- 1- POC Chromosomal Testing (CGH Array)
- 2- Cavity Check (3D U/S recommended modality)
- 3- Screen for APAS (Lupus and Anti-Cardiolipin IgG & IgM)
- 4- Endocrine Testing (TSH and TPO for all, PCOS assessment and FBS (?) not recommended, Prolactin level if oligo/amenorrhea)

- ⇒ Manage abnormalities in 2-, 3- and 4- accordingly
- ⇒ Consider Prophylactic Vit. D Supplementation for all

POC CHROMOSOMAL TESTING

(CGH +/- SNP Array preferred,
R/O Maternal Contamination and Avoid Culture Failure)

STEP #2



STEP #3

**After 3rd
RPL**



- **If no testing has been done so far: Investigate and Manage according to above algorithm**
- **If above algorithm has been followed in previous miscarriage: Repeat POC Chromosomal Testing and Complete the full W/U if not already done**
- **If all possible known etiologies have been addressed and POC aneuploidy is repetitive, consider PGS**

