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Preconceptional Care: Five Years Experience of a Teratology Information Service

Marco De Santis, Elena Cesari



Telefono Rosso- TIS

Department of Obstetrics and Gynecology

Catholic University- Rome





Teratology Information Services





TISes focus on advising pregnant women, women planning pregnancy, breast feeding women and their families and health care providers on the reproductive safety or risk of prenatal exposure

TISes interpret information
regarding known and potential
reproductive risks into risk
assessments that are communicated
to individuals of reproductive age
and health care providers

www.otispregnancy.org

Hancock RL 2007



Telefono Rosso Teratology Information Service



Telefono Rosso is an ENTIS member







Telefono Rosso answers 8000 calls per year





Telefono Rosso Teratology Information Service

It was founded at the Catholic University in 1988.

It was conceived in order to give a skilled, simple and quick counselling by phone about:

- Exposure to drugs , chemicals or infectious agents during pregnancy and breastfeeding
- Preconceptional care



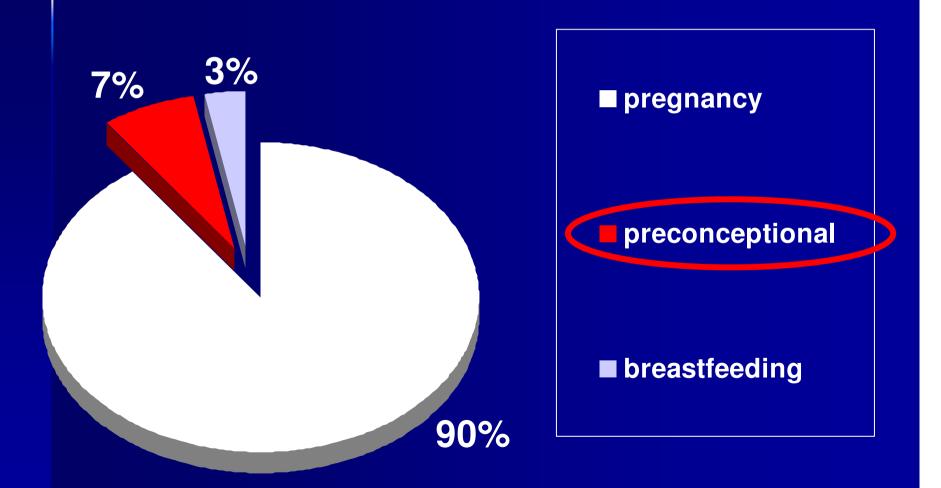
Telefono Rosso Teratology Information Service

- The information provided is based on current scientific data (TERIS, REPROTOX, TOXLINE, MEDLINE), which is collected and analyzed by TIS staff.
- All operators are gynecologists with expertise in teratology, prenatal diagnosis and fetal medicine
- It is open to health care providers and to general public
- It is free of charge and works from 9 a.m. to 1 p.m. for five days a week













Study design

Objective

To evaluate the main reasons of awareness in preconceptional period, the prevalence of chronic maternal diseases and the attitude to acid folic supplementation in a population calling to an Italian Teratology Information Service.

Method

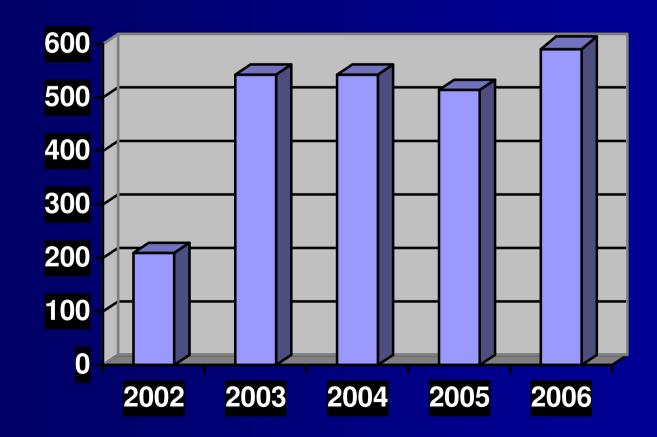
A descriptive study on 2405 callers asking for preconceptional care between 2002 and 2006.





Preconceptional counselling

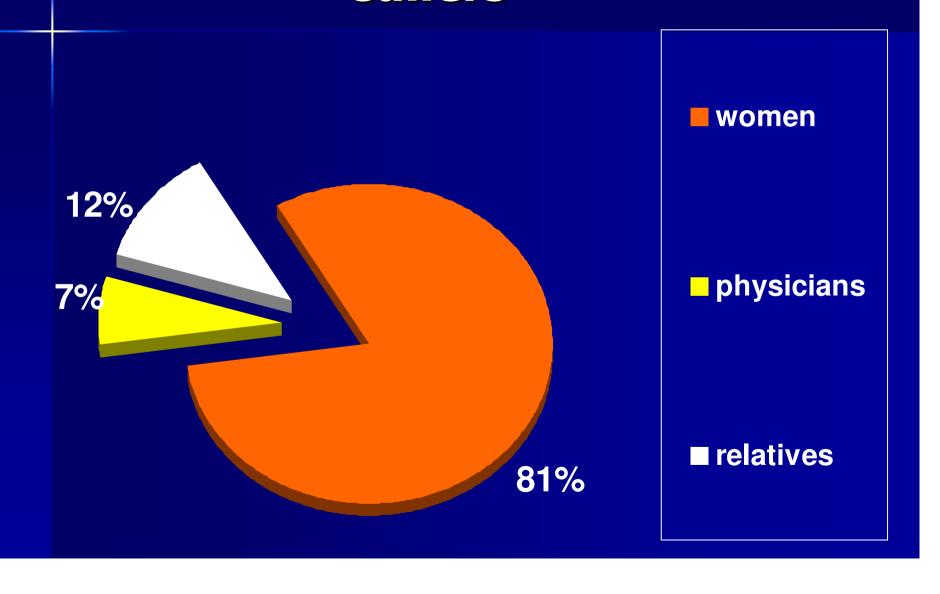
2405 calls from 2002 to 2006







Callers







Study population

- mean age 33+/-6.7 years
- 76% nulliparae
- 24% multiparae:

58% just one pregnancy before

42% more than one



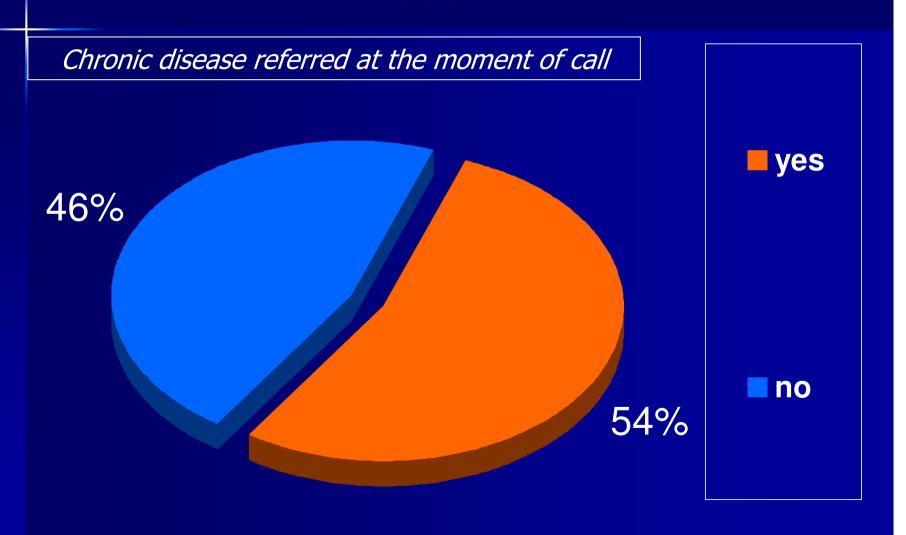




Chronic diseases



Preconceptional Care:
Five Years Experience of a Teratology Information Service
Results

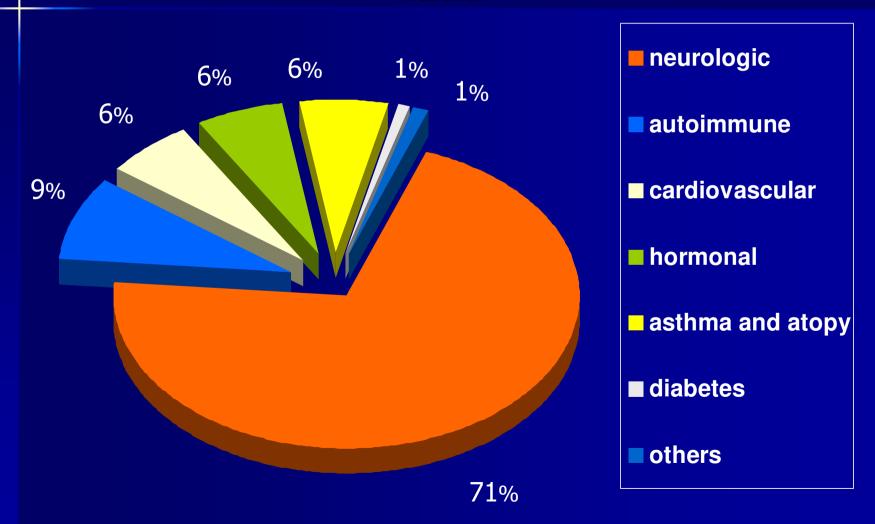




Chronic diseases



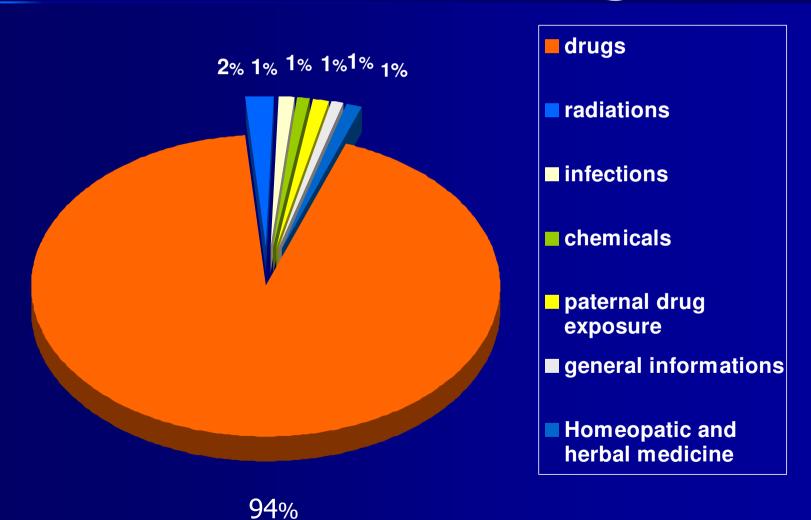
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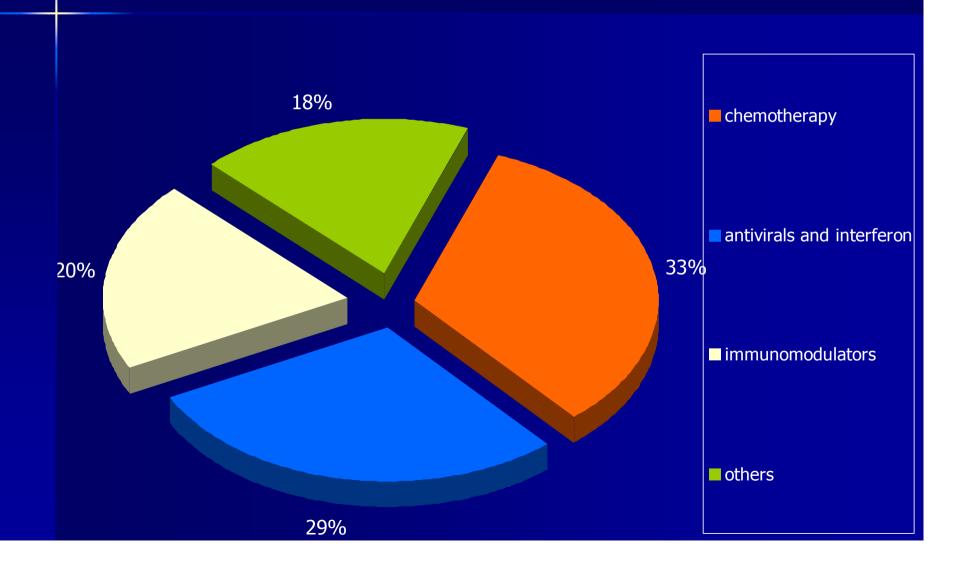
Reason for calling







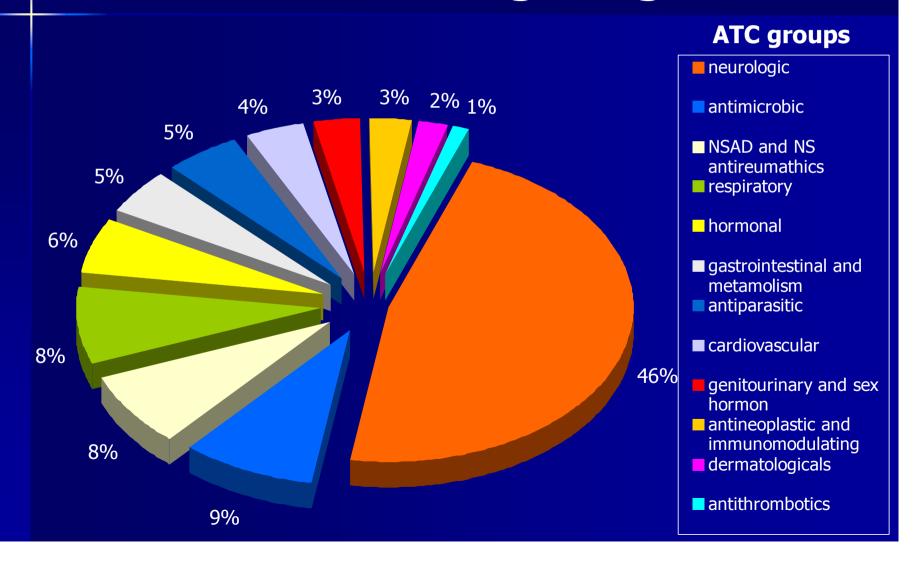
Reason for calling:paternal drug exposure







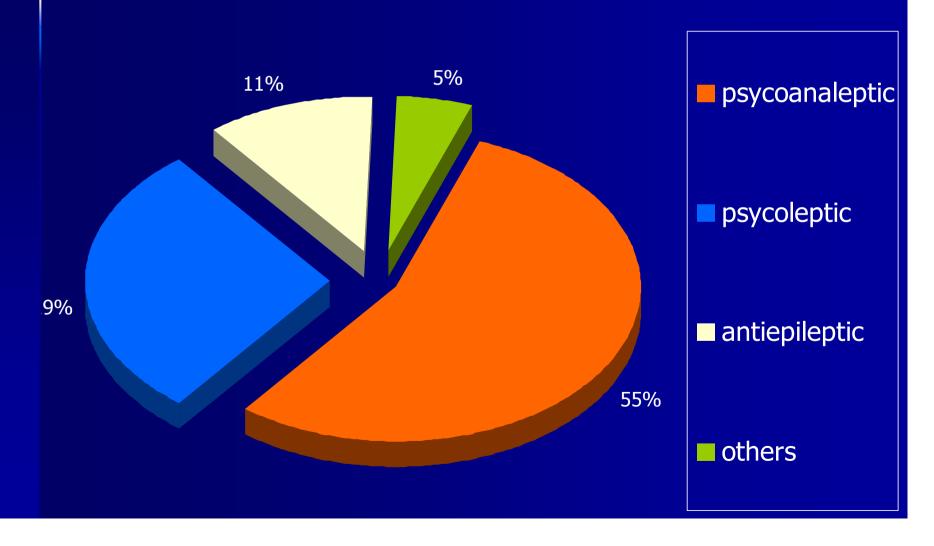
Reason for calling: drugs







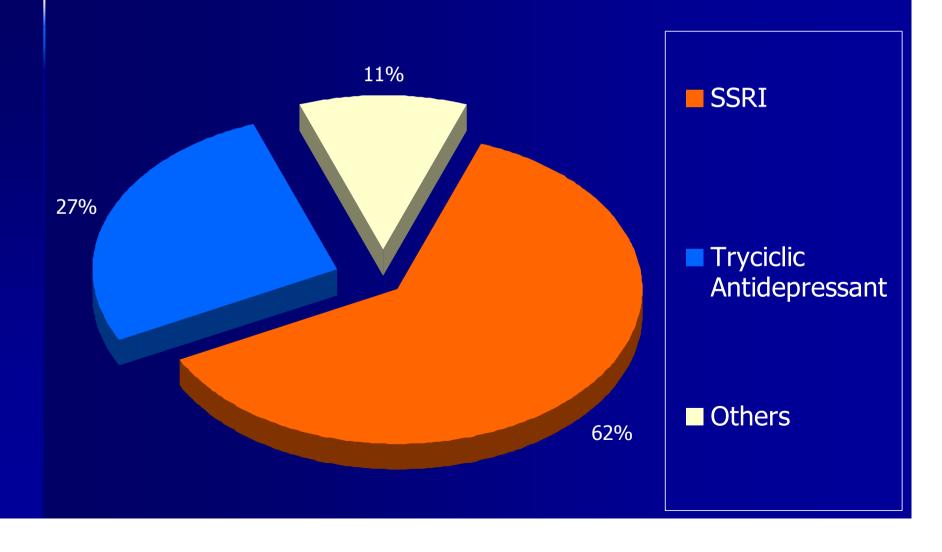
Neurological drugs







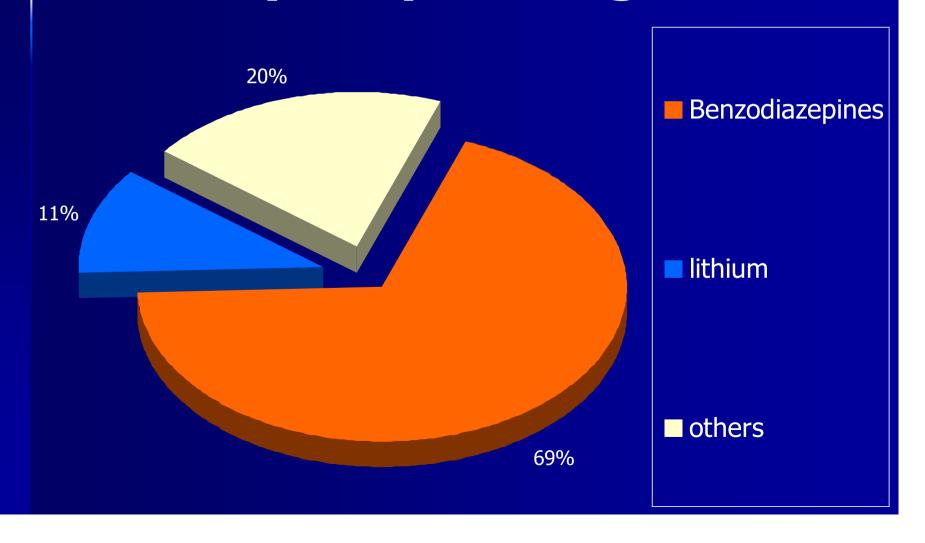
Psycoanaleptic drugs







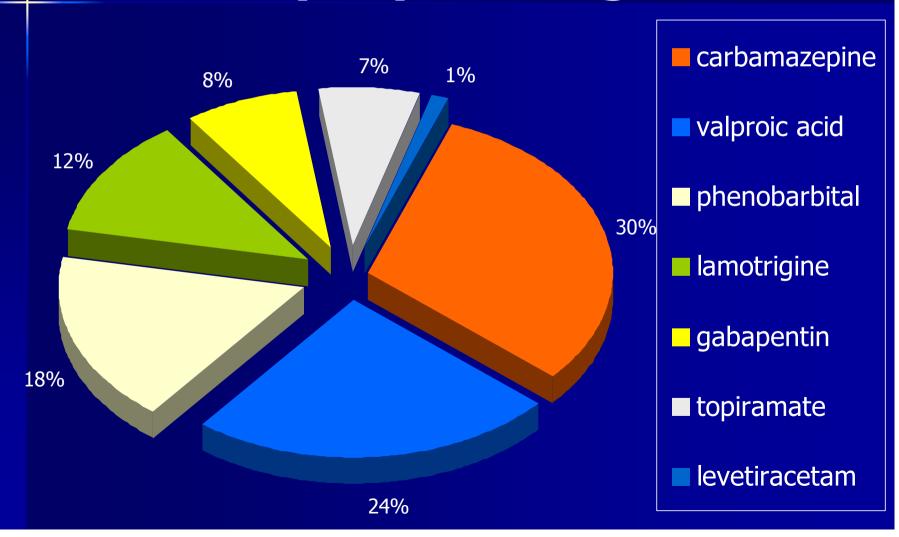
Psycoleptic drugs







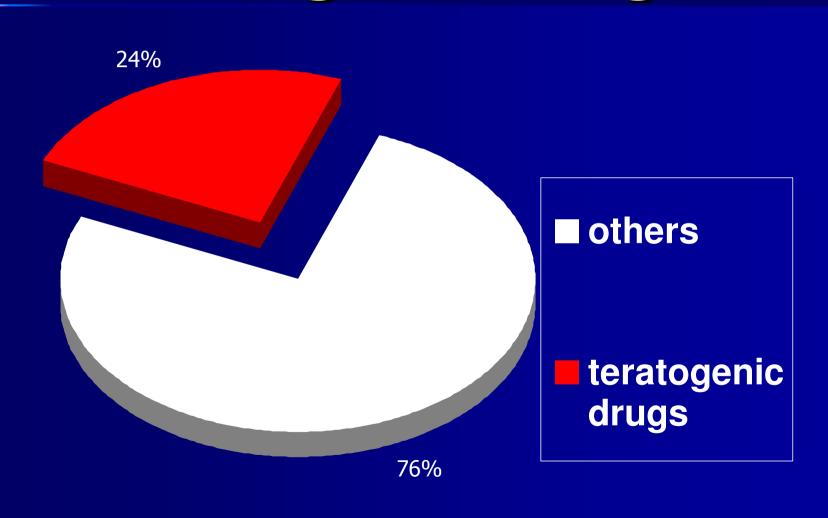
Antiepileptic drugs







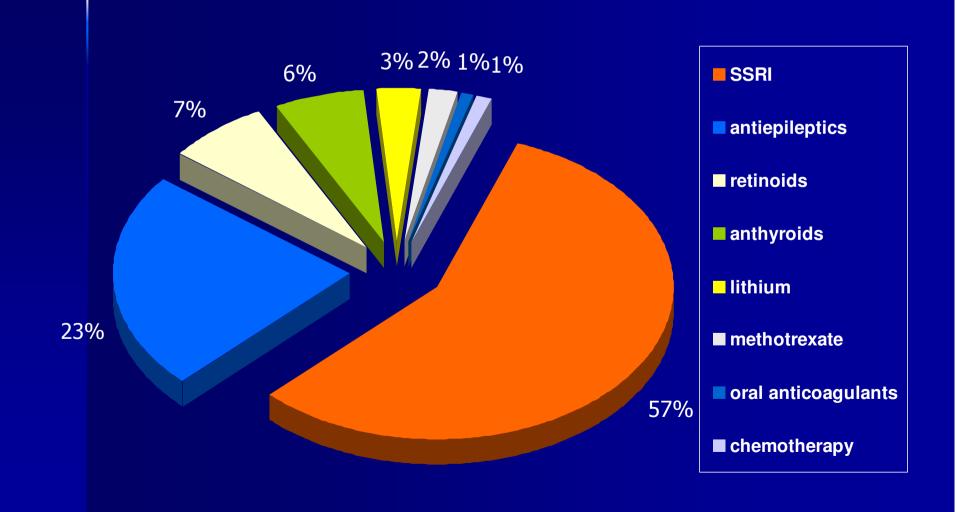
Teratogenic drugs







Teratogenic drugs

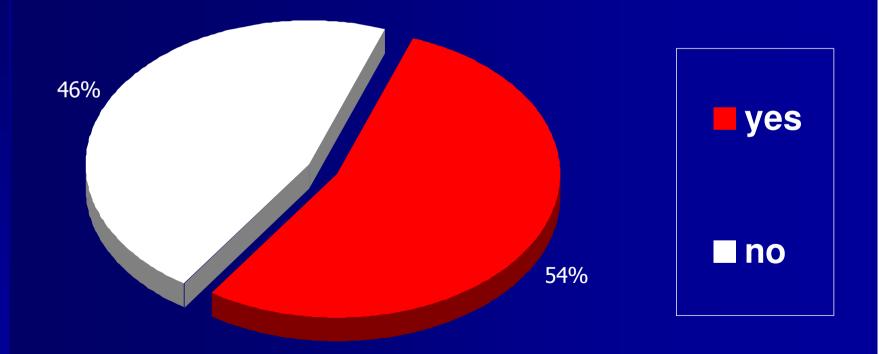






Folic acid supplementation

Assumption of folic acid at moment of call

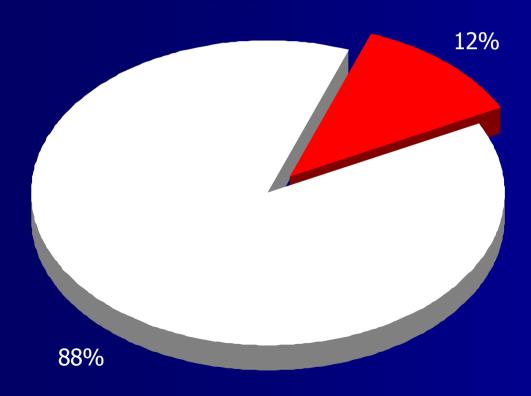


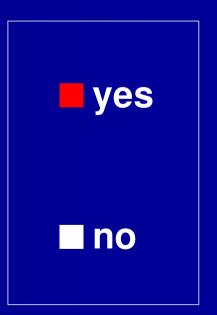




Folic acid supplementation

Assumption of folic acid at the moment of call in epileptic women









Conclusion

- Drug exposure is the main reason for calling
- Neurological compounds are the first drug group
- Twenty-four percent of drug are teratogenic
- Herbal and homeopatic products are under-represented, despite the lack of information on their effects on the pregnancy











Conclusion

 Prevalence of chronic pathologies and teratogenic exposure are high and could enhance the risk of adverse pregnancy outcome



 Prevalence of preconceptional folic acid supplementation is still low, especially in high risk population, such as epileptic women







Conclusion

Teratology Information Service supports preconceptional care

- Identifying teratogenicity of such exposure (i.e. lithium)
- Suggesting:
 - -possible preconceptional shift of drug therapies (propylthiouracil instead of methimazole),
 - -the waiting period before pregnancy (i.e. retinoids)
 - -to discontinue the treatment (i.e. epileptic therapy in selected women seizures free) or to fraction and lower the dosage
- Emphasizing the main preconceptional risk factors (smoke, obesity, alcohol, etc)
- Promoting vaccinations (rubella, varicella and B hepatitis) and folic acid supplementation





Conclusion



Teratology Information Service preconceptionally counseled *an high risk population*, thus it has the potential *to prevent a great number of birth defects or other adverse pregnancy outcomes*



www.policlinicogemelli.it/telefonorosso +39(0)63050077