Unit IV – Problem 9 – Genetics: Cytogenetic Abnormalities Related to Abortion

Cytogenetic Abnormalities (70% of spontaneous losses, 0.7% of newborns)

	Cytogenetic	Abnormanues (70% of spont				
Autosomal Trisomies	Monosomy X	Triploidy (three copies of		idy (four copies of	Unbalanced Structural	
		chromosome)		chromosome)	Chromosomal Abnormalities	
 Detected in 50% of abnormal fetuses. Causing loss of pregnancy in 1st trimester. Represented by: trisomies 16, 15 & 22. 	abnormal fetuses. 2. Causing loss of pregnancy in the 1 st trimester.	 Detected in 15% of abnorm Causing loss of pregnar trimester. Due to: dispermy, diploid diploid ovum. Causes hydatidiform overgrowth of placenta embryonic tissues. It can be partial: there are trophoblastic hyperpassociation with triploidy. Complete: there is thyperplasia and association malignancy; but no fet there is diploidy. 	fetuses. 2. Causing in 1 st tri 3. Due to : concept will star e: fetal parts; plasia; no malignancy; rophoblastic ciation with	d in 5% of abnormal g loss of pregnancy mester. failure of post-ual cell cleavage (it y as 4n). les: XXXX-XXYY	Detected in 2 % of abnormal fetuses.	
Recurrent Abortion (1-2% of couples experience ≥ 3 consecutive spontaneous pregnancy losses)						
Lutael Phasa Dafficiancy Anatomical Dafacts in Parantal Chromosomal Lindarlying Maternal						
(LPD)	The Mother	Abnormalities	Disease	G	Genetic Factors	
 A heterogenous disease with a multifactorial causes (can be from hypothalamus/pituitary; ovaries or endometrium). Luteal phase < 12 days with normal progesterone level. Normal luteal phase with abnormal progesterone levels. 	 Uterine anomalies being the most common: Didelphus. Arcuate uterus. Uterus bicornis. Uterus dicornis unicollis. Cervical atresia. Vaginal atresia. 	 Reciporcal or robertsonian balanced rearrangement with recurrence risk of 21:21 robertsonian translocation of 100%. Chromosomal inversion (9 & 2): very rare. Sex chromosome mosaicism: rare. 	 Hypertension Diabetes SLE And others 	90% of the same 3. Autoimmune d antibodies whic thrombotic even	mosome inactivation (more than a parental chromosome). isorders (ex. Antiphospholipid h lead to a higher incidence of ts). ncy (of factors V & XII).	
Other Causes of Pregnancy Loss						
Exogenous Factors	2 nd & 3 rd Trimesters Fetal Loss		Multiple Pregnancies		.1	
1. Teratogens (drugsetc).	Hypertension, renal	1. Oligohydramnios (less	-			

amniotic fluid).

(excessive amniotic

2. Polyhydramnios

fluid).

2. Maternal infections

(measles, mumps,

rubella, syphilis)

disease... etc.

