

URINARY TRACT INFECTIONS DURING PREGNANCY IN WOMAN WITH VESICoureTERAL REFLUX

Aims of Study

To determine the risk factors for pregnancy morbidity in woman with a history of recurrent urinary tract infections (UTI) and vesicoureteral reflux (VUR).

Methods

Retrospective review of 92 patients diagnosed with VUR from 1960-1989 with subsequent pregnancy (n=188) at our institution. Charts were reviewed for UTI history, laterality, grade and management of VUR, renal function and scarring, and pregnancy outcomes including spontaneous abortion, gestational age at delivery, preterm labor, hypertension and preeclampsia.

Results

Of the 92 woman, 59% underwent ureteral reimplantation prior to pregnancy. There were 188 pregnancies with 13 spontaneous abortions (7%). Mean gestational age at delivery was 38 2/7 weeks. Patients with reimplantations had increased rates of pyelonephritis (17%) and cystitis or UTI (33%) compared to those without reimplantation (11% and 21%, respectively). Pre and post pregnancy mean creatinine was normal. Renal scarring was associated with hypertension and pyelonephritis during pregnancy. Hypertension, UTI, and ureteral reimplantation were not predictive for pre-term labor (<37 weeks gestational age).

Conclusions

Patients with a history of recurrent UTI and VUR with renal scarring are at an increased risk for hypertension and pyelonephritis during pregnancy. Renal imaging to detect scars prior to pregnancy is recommended. Patients identified may benefit from prophylactic antibiotics during pregnancy.