

PLACENTAL VASCULAR OBSTRUCTIVE LESIONS ASSOCIATED WITH INTRAUTERINE GROWTH RESTRICTION

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OBJECTIVE: The purpose of this study was to investigate the relationship between placental vascular obstructive lesions and intrauterine growth restriction (IUGR) in liveborn infants.

METHODS: Placentas from 270 liveborn, singleton, low-birth-weight infants without major congenital anomalies nor hematogenous infections signs during pregnancy were examined. Fetal thrombotic vasculopathy (FTV) comprising uniformly avascular villi, villous stromal-vascular karyorrhexis, occlusive thrombi, hemorrhagic endovasculitis and obliterated stem arteries were evaluated; villitis, endothelial cushions, mural thrombi, endothelial cushions and chorangiomas were also analysed.

RESULTS: One or more lesions were observed in 85 (31,5%) examined placentas. FTV was found in 38 (14,1%) placentas. Other placental vascular lesions were also found: 28 (10,4%) chorangiomas, 10 with FTV, 22 (8,2%) chronic villitis and 16 (6%) mural thrombi, 4 of them isolated. The most FTV frequent lesion was uniformly avascular villi (26 cases).

CONCLUSIONS: IUGR is a significant risk factor for adverse neurodevelopmental outcomes, so are severe vascular obstructive lesions in the placenta. Identification of these lesions in the placental fetal circulation identifies newborns at risk for prenatal injury caused by thrombi in the fetus or by reduced placental function. All placentas from newborn with IUGR should be carefully examined and the vascular lesions reported.

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