

IGHG Obstetric care recommendations: Counseling and surveillance in pregnancy 2020

General recommendation

Health care providers should discuss the risk of adverse obstetric outcomes based on the specific cancer treatment exposures with all female CAYA cancer survivors of reproductive age.

Who needs preconception counseling?

Female CAYA cancer survivors and their health care providers should be aware that there is no evidence to support that survivors have an increased risk of giving birth to a child with <u>congenital</u> <u>anomalies</u> (high quality evidence).

Female CAYA cancer survivors treated with radiotherapy to volumes exposing the uterus and their health care providers should be aware of the risk of adverse obstetric outcomes including <u>miscarriage</u> (moderate quality evidence), <u>premature birth</u> (high quality evidence) and <u>low birth</u> <u>weight</u> (high quality evidence).

Who needs specific obstetric surveillance during pregnancy?

High risk obstetric surveillance is recommended for CAYA cancer survivors treated with radiotherapy to volumes exposing the uterus due to the risk of <u>premature birth</u> and <u>low birth</u> <u>weight</u> (high quality evidence).

Who needs specific cardiac surveillance during pregnancy?

Based on IGHG cardiomyopathy guideline

<u>Cardiomyopathy surveillance</u> is reasonable prior to pregnancy or in the first trimester for all female survivors treated with anthracyclines and/or chest radiation (moderate level recommendation, moderate quality evidence).

No recommendations can be formulated for the frequency of ongoing surveillance in pregnant survivors who have normal left ventricular systolic function immediately prior to or during the first trimester of pregnancy (moderate level recommendation, low quality evidence).

Publication

van der Kooi ALF, Mulder RL, Hudson MM, Kremer LCM, Skinner R, Constine LS, van Dorp W, van Dulmen-den Broeder E, Falck-Winther J, Wallace WH, Waugh J, Woodruff TK, Anderson RA, Armenian SH, Bloemenkamp KWM, Critchley HOD, Demoor-Goldschmidt C, Ehrhardt MJ, Green DM, Grobman WA, Iwahata Y, Krishna I, Laven JSE, Levitt G, Meacham LR, Miller ES, Mulders A, Polanco A, Ronckers CM, Samuel A, Walwyn T, Levine JM, van den Heuvel-Eibrink MM. Counseling and surveillance of obstetrical risks for female childhood, adolescent, and young adult cancer survivors: recommendations from the International Late Effects of Childhood Cancer Guideline Harmonization Group. American Journal of Obstetrics & Gynecology 2020:S0002-9378(20)30614-1.