



## Chronic villitis/intervillositis of unknown etiology: Clinical features and perinatal outcome

Munoz H, Solari C, Campanella C, Perez A, Vial MT, Munoz G, Germain A  
Universidad de Chile, Clinica Las Condes., Santiago, Chile

### Objective

The aim of this study is to describe the clinical behavior of pregnancies with placental histologic diagnosis of chronic villitis/intervillositis of unknown etiology (CVUE).

### Methods

Retrospective descriptive study of all CVUE cases occurring during a 13-year period in a tertiary care hospital. All cases of CVUE were diagnosed by placental histology by a single pathologist. We reviewed patient data, characterizing their clinical and ultrasound features, pregnancy associated diseases and perinatal outcomes. Continuous variables with abnormal distribution data are shown as mean and ranges. Categorical variables are shown as absolute value and proportion.

### Results

We analyzed 36 cases of CVUE. Mean maternal age was 33, 6 years (range 28-46 years). Among all placenta specimens, 63. 9% were classified as moderate/severe (multifocal) and 36. 1% as low (focal). Thirty-one (86, 1%) of patients exhibit a poor perinatal outcomes including fetal growth restriction (FGR), early or late spontaneous abortion, stillbirth, preterm birth and neonatal death; only five (13. 9%) were born without any complication. Collectively 92% of the focal and 82% of the multifocal CVUE had adverse perinatal outcomes. Seventeen pregnancies had FGR (47, 2%). The median gestational age at diagnosis was 31 weeks. Besides from four patients with thrombophilia and one with Hypothyroidism, none of the remaining patients from FGR group had maternal associated pathologies. Only three FGR pregnancies had increased uterine artery pulsatility index (PI) (3/17), four had increased umbilical artery PI (4/17), nine had cerebral vasodilatation (9/17) and one had ductus venosus reversed a-wave (1/17). As for maternal characteristics, 25% had history of recurrent miscarriage and 11% had history of FGR or stillbirth.

### Conclusion

CVUE is a rare placental disorder characterized by a chronic cellular inflammation of villous stroma and intervillous space. Patients with poor obstetric outcomes, FGR, fetal demise and preterm delivery are highly prevalent among these patients. High recurrence rate of CVUE in next pregnancy has been reported. Novel prevention strategies are urgently needed.