ANKYLOSING SPONDYLITIS (AS): BECOMING A MOTHER DESPITE HAVING A RHEUMATIC DISEASE?

Study of Infants and Young Children Shows that Offspring Develop Normally

Kilchberg, Switzerland: Women with ankylosing spondylitis (AS) can have children despite their rheumatic disease. But how do their children develop? A recent South Korean study has now come to the conclusion that the growth and development of infants and young children of mothers with AS are comparable to those of other mothers. Until now, several studies on the course of pregnancy in female AS patients had been conducted, but the development of their offspring had not been investigated. The study was presented at the European League Against Rheumatism (EULAR) 2020 Annual Congress.

Ankylosing spondylitis (AS) is a complex chronic inflammatory disease of the spine with involvement of the sacroiliac joints. Over the course of the disease, the joints and adjacent tissues ossify, which results in a partial or complete stiffening of the spine. Many patients complain of pain in the spine, lower back, buttocks and hips, which can be particularly severe in the morning. Pain in the second half of the night often wakes up AS patients and they need to do some exercise to relieve it. The disease most commonly presents in the twenties and thirties.

“Female patients with AS are therefore mostly of childbearing age and are sometimes uncertain as to whether they can make their desire to have children a reality, despite their chronic disease,” said EULAR President Professor Iain B. McInnes, Director of the Institute of Infection, Immunity and Inflammation at the University of Glasgow in Scotland.

A South Korean population-based case study investigated the question of whether AS in women could have an effect on the growth and development of their children in early childhood and what effect that might be. The team led by Sung Hae Chang from Soonchunhyang University College of Medicine Cheonan Hospital, Chungbuk National University Hospital and Korea University College of Medicine used two South Korean databases managed by the National Health Insurance Service (NHIS): the National Health Screening Program for Infants and Children (NHSIC) database, which records screening data of the growth and development of all children; and the NHIS database, which covers the entire population and includes comprehensive health claims data. The researchers enrolled all children born between 2008 and 2013, who were examined three times. The first examination took place at the age of four to six months, the second at nine to twelve months, and the third at either 54 to 65 months or 66 to 71 months.

“We analysed data on 794,544 children in total,” explained the lead author of the study, Sung Hae Chang from the Soonchunhyang University College of Medicine Cheonan Hospital. Among them were 369 children of mothers with AS. Of these, 124 women had already been diagnosed with AS before delivery, while in 245 the disease was only detected post-partum.

This showed that the growth and development of children of mothers with AS were comparable to those of offspring of other women. And while mothers with an existing AS diagnosis were significantly more likely to have an infant with a low birth weight than women diagnosed with AS post-partum, their offspring developed similarly overall over the observation period of up to 71 months after birth. “Therefore, having a chronic disease like AS should not hinder female patients from having healthy children,” said Professor John Isaacs, Newcastle University, UK, Chair of the
EULAR Scientific Programme Committee. “We advise women with AS who want to have children to plan their pregnancy and to discuss it beforehand with their treating rheumatologist.”

Reference:

Event information:
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