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Stillbirth in Week 19 of Pregnancy Followed by Maternal Death as a Consequence of Refused Chemotherapy for Non-Hodgkin's Lymphoma -- Significance of Adjuvant Chemotherapy in Women of Reproductive Age

Abstract:

Background: Due to rising cure rates in cancer, the question of preserving fertility in young female patients becomes more important. Especially in lymphomas, incidence and long-time survival have increased. Hematologists and gynecologists have to treat more and more female patients who wish to become pregnant despite their disease and/or after finishing treatment. Case Report: We report on a 28-year-old patient with highly malignant non-Hodgkins lymphoma (peripheral T cell lymphoma, Ann Arbor stage IV) and main manifestation at the gastric antrum, with a distinct wish for becoming pregnant. Chemotherapy was strongly recommended to her, but she refused. After she had conceived, the disease recurred, followed by stillbirth in week 19 of gestation and death due to gastric perforation and septic shock. Conclusions: Facing the risk of sterility after chemotherapy should not induce patients to refuse chemotherapy and risk their lives. Treatment of young female cancer patients should therefore always include a thorough discussion about other ways of preserving fertility for the time after treatment. Such strategies exist, although their success is still limited and not every patient is eligible for them.