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[Am J Reprod Immunol. 2005 Dec;54\(6\):390-6.](#)

## Update on treatment of immunologic abortion with low-dose intravenous immunoglobulin.

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Comment in:

[Am J Reprod Immunol. 2005 Dec;54\(6\):321.](#)

### Abstract

**PROBLEM:** Recurrent spontaneous abortion associated with immunologic abnormalities has been termed immunologic abortion. Previously we showed that treatment with low-dose intravenous immunoglobulin (IVIG) appears to be beneficial for older women with immunologic abortion. We now report the results of IVIG treatment in a larger group of women with this disorder. **METHOD OF STUDY:** A total of 99 women were prospectively evaluated for immunologic abortion, which was defined as three or more miscarriages and the presence of specific immunologic abnormalities. Prior to the next conception, patients were treated with IVIG at a dose of 0.2 g/kg. Once conception was achieved, IVIG treatment was continued on a monthly basis through 26-30 weeks of pregnancy. **RESULTS:** The average age of the women was 37 years (range: 28-49), and the average number of miscarriages was 3.8 (range: 3-12). Of the 99 women, 72 received initial IVIG treatment, and 50 subsequently became pregnant. Of these women, 42 (84%) had a successful term pregnancy. Of the 27 women who refused IVIG therapy, 20 became pregnant and 18 (90%) miscarried. The difference in pregnancy success rate between the IVIG-treated and untreated groups was significant ( $P = 0.001$ ). Four women had mild allergic reactions during IVIG infusion, and these reactions resolved when the IVIG brand was changed. Fetal abnormalities were not observed. **CONCLUSION:** We conclude that low-dose IVIG therapy is safe and effective for older women with immunologic abortion.

PMID: 16305665 [PubMed - indexed for MEDLINE]

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