



Current clinical practice of prenatal dexamethasone treatment in at risk pregnancies for classic 21-hydroxylase deficiency in Europe

Hanna Nowotny¹, Uta Neumann², Véronique Tardy-Guidollet³, S. Faisal Ahmed⁴, Federico Baronio⁵, Tadej Battelino⁶, Jérôme Bertherat⁷, Oliver Blankenstein², Marco Bonomi^{8,9}, Claire Bouvattier¹⁰, Aude Brac de la Perrière¹¹, Sara Brucker¹², Marco Cappa¹³, Philippe Chanson¹⁴, Hedi L. Claahsen-van der Grinten¹⁵, Annamaria Colao¹⁶, Martine Cools¹⁷, Justin H. Davies¹⁸, Helmut-Günther Dörr¹⁹, Wiebke K. Fenske²⁰, Ezio Ghigo²¹, Roberta Giordano²¹, Claus H. Gravholt²², Angela Huebner²³, Eystein Sverre Husebye²⁴, Rebecca Igboekwe²⁵, Anders Juul^{26,27}, Florian W. Kiefer²⁸, Juliane Léger²⁹, Rita Menassa³, Gesine Meyer³⁰, Vassos Neocleous^{31,32}, Leonidas A. Phylactou^{31,32}, Julia Rohayem³³, Gianni Russo³⁴, Carla Scaroni³⁵, Philippe Touraine³⁶, Nicole Unger³⁷, Jarmila Vojtková³⁸, Diego Yeste^{39,40,41}, Svetlana Lajic^{42*}, Nicole Reisch^{1*}

¹Medizinische Klinik und Poliklinik IV, Klinikum der Universität München, LMU München, ²Charité Universitätsmedizin Berlin, ³University of Glasgow, ⁴Birmingham Women's Hospital NHS Foundation Trust, ⁵S.Orsola-Malpighi University Hospital, Bologna, ⁶University Medical Centre Ljubljana, ⁷Hôpitaux Universitaires Paris-Centre, Assistance Publique – Hôpitaux de Paris, ⁸University of Milan, ⁹IRCSS Istituto Auxologico Italiano, Milan, ¹⁰Fédération d'endocrinologie, de diabétologie et des maladies métaboliques, Hospices Civils des Lyon, ¹¹Laboratoire de Biochimie et Biologie Moléculaire, Hospices Civils de Lyon, ¹²University Women's Hospital, University of Tübingen, ¹³Bambino Gesù Children's Hospital, Rome, Italy, ¹⁴Assistance Publique-Hôpitaux de Paris, ¹⁵GHU Paris-Sud, Hôpital de Bicêtre, ¹⁶Universita' Federico II di Napoli, Naples, ¹⁷Ghent University Hospital, ¹⁸University Hospital Southampton NHS Foundation Trust, ¹⁹University Hospital Bonn, ²⁰Department of Internal Medicine, University of Turin, ²¹Aarhus University Hospital, ²²Universitätsklinikum Dresden, ²³University of Bergen, ²⁴Rigshospitalet, University Hospital of Copenhagen, ²⁵Medical University of Vienna, ²⁶AP-HP Paris Nord Université de Paris, CHU Robert-Debre, Paris, ²⁷Goethe University Frankfurt Faculty 16 Medicine, ²⁸The Cyprus Institute of Neurology and Genetics, Nicosia, ²⁹Clinical and Operative Andrology, University of Münster, ³⁰Scientific Institute San Raffaele, Milan, ³¹Università di Padova, Padova, ³²Sorbonne Université, Assistance Publique Hopitaux de Paris, ³³University Hospital Essen, ³⁴Radboud University Nijmegen Medical Centre, ³⁵University Hospital in Martin, ³⁶Hospital Vall d'Hebron, Universidad Autónoma de Barcelona, ³⁷Universitätsklinikum Erlangen, ³⁸Karolinska University Hospital, Stockholm

OBJECTIVE

Analysis of the current medical practice regarding prenatal dexamethasone treatment (Pdex) in female fetuses at risk of classic congenital adrenal hyperplasia (CAH) due to 21-hydroxylase deficiency (21OHD) in Europe.

METHODS

Design, Setting, and Participants:

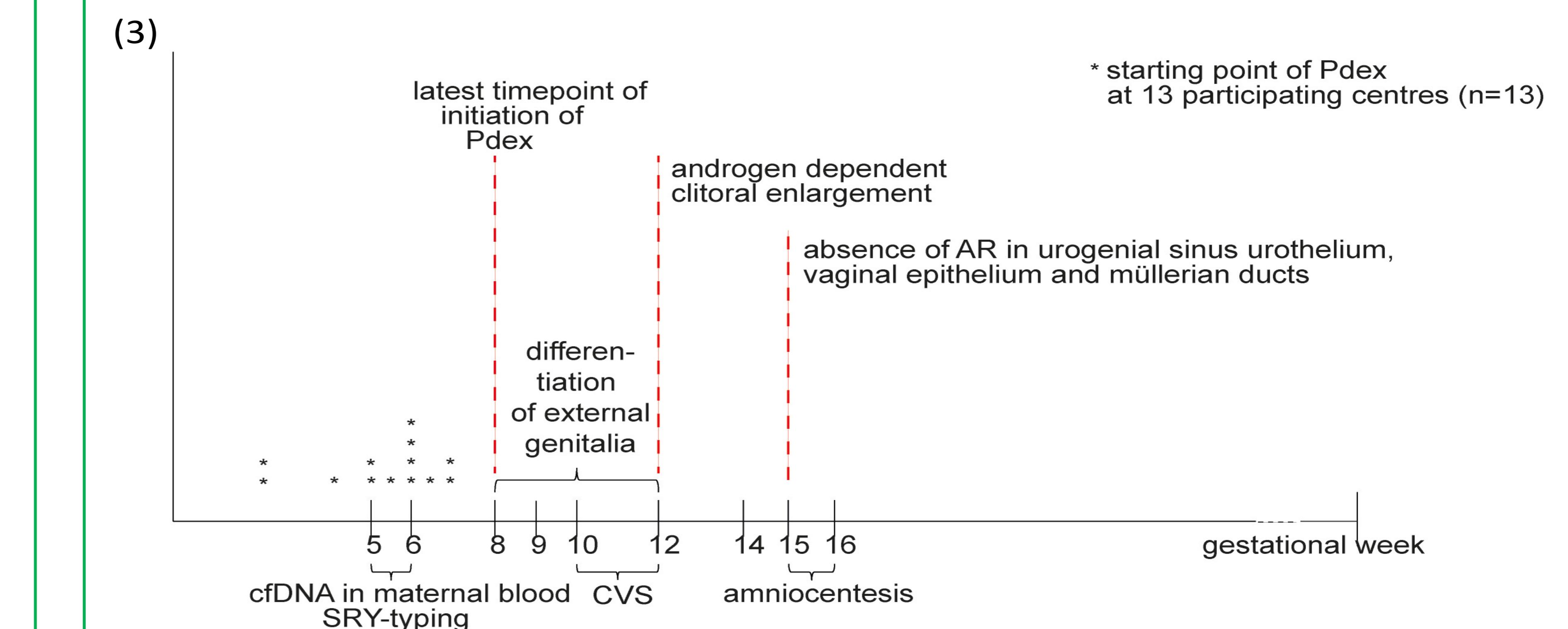
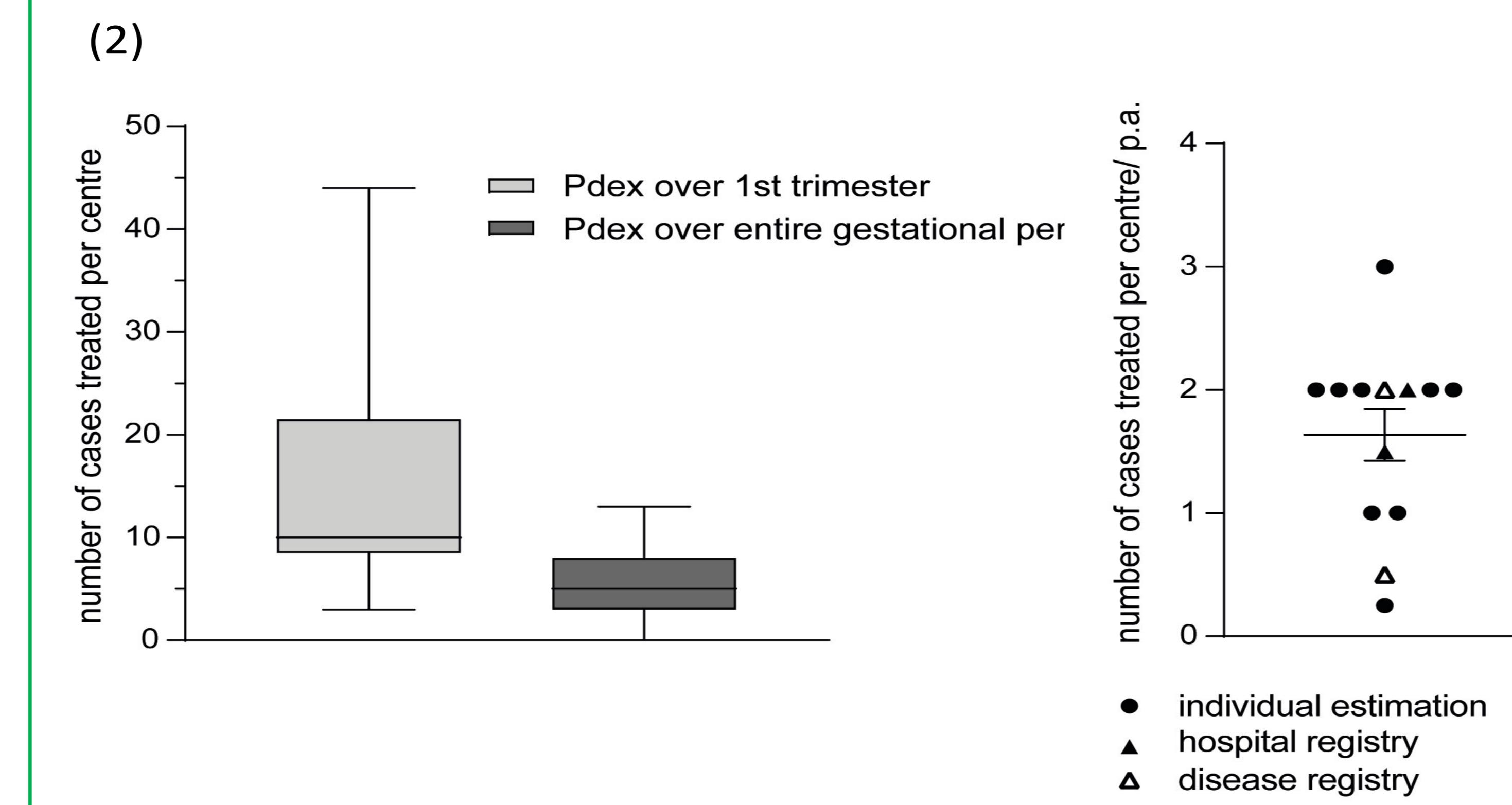
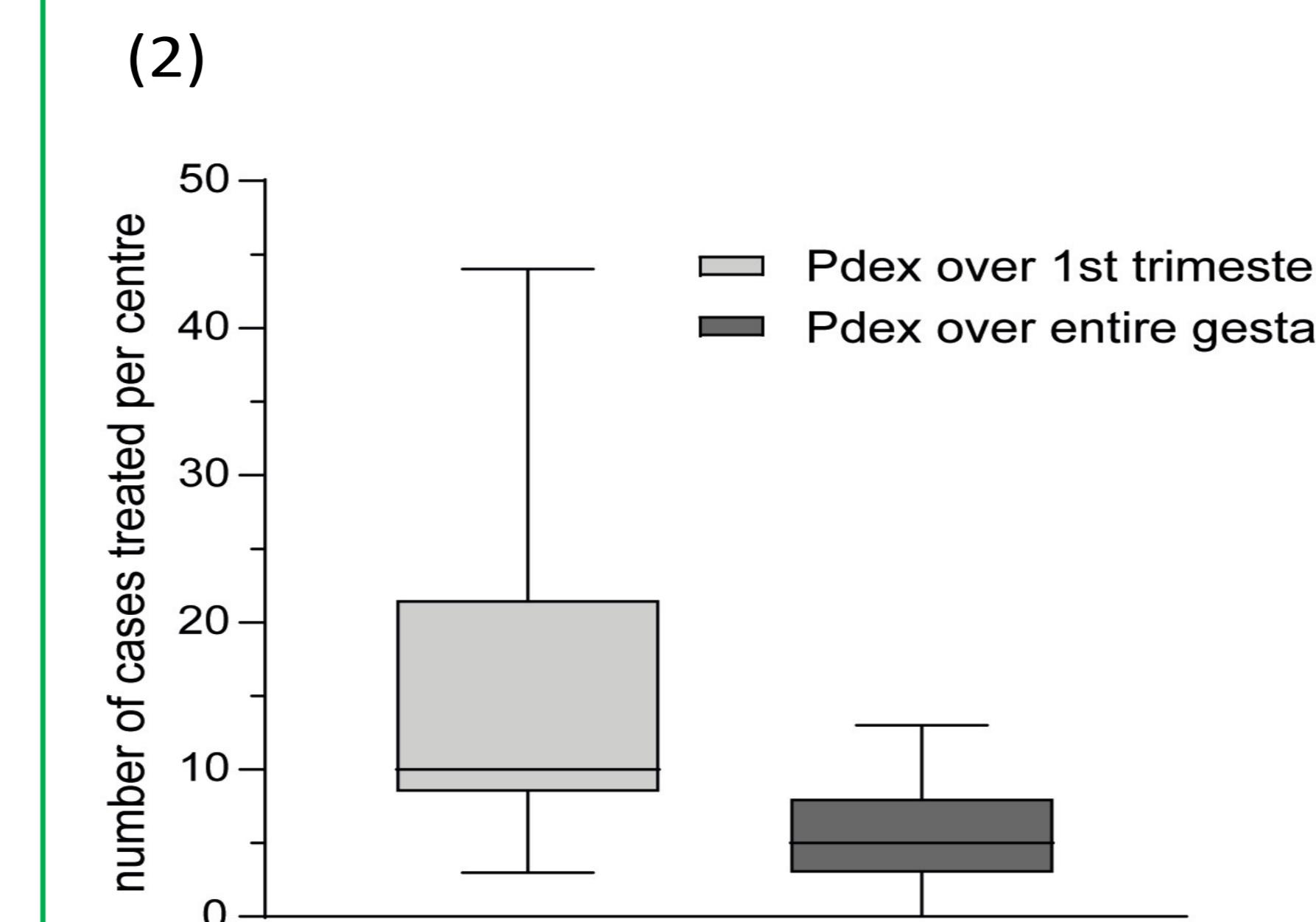
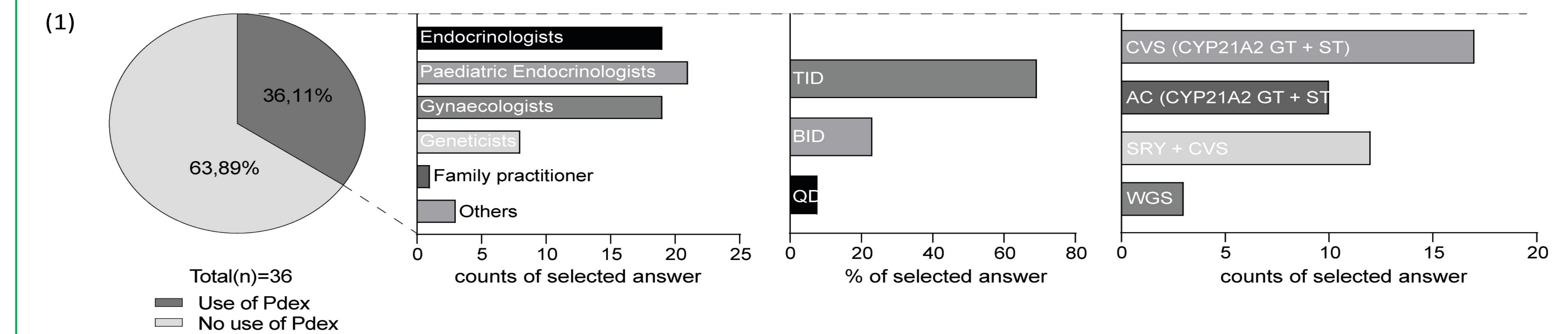
Questionnaire; 36 medical centres from 14 European countries (28/36 are reference centres of the European Reference Network on Rare Endocrine Conditions, EndoERN).



no. of centers using Pdex

- = center using Pdex
- = center not using Pdex
- = 1/2 centers using Pdex

RESULTS



* starting point of Pdex at 13 participating centres (n=13)

CONCLUSION

- High international variability and discrepancy on the use of Pdex across Europe
- Strong need to establish evidence-based guidelines on prenatal diagnostics, treatment and follow-up of pregnancies at risk for CAH
- Need for detailed evaluation of outcome and long-term health of already treated cases across Europe