

Thrombophilia

Thrombophilia is a disorder of blood coagulation factors that may lead to an increased tendency of blood coagulation and appearance. Thrombophilia is not a disease. In most cases, somebody may have thrombophilia, but even suffer from thrombosis. What is more, it is also possible that someone can suffer from thrombosis without having been diagnosed for thrombophilia. Thrombophilia, merely, increases the likelihood of thrombosis, compared with the general population.

Thrombophilia is divided in two categories:

- Hereditary and
- Acquired thrombophilia.

By the term hereditary thrombophilia, we mean the existence of variants of a gene, believed to be involved in the increased predisposition to thrombosis. These genes are controlled with blood tests. The key is the factor V Leiden, the G20210A prothrombin variant and the homocysteine gene (MTHFR).

Acquired thrombophilia is caused by different types of diseases (smoking, obesity, diabetes) or by the abnormal presence of substances in the body, creating an increased thrombosis tendency, since they are directly involved in the clotting mechanism. Thus, we essentially refer to the pathologic presence of "lupus anticoagulant," as well as the presence of antibodies against cardiolipin and beta 2 glycoprotein.

Thrombophilia and pregnancy

The role of blood clotting throughout pregnancy is crucial. During a pregnancy, blood coagulation plays a crucial role, since the proper flow of blood (and hence oxygen and nutrients) assists in the implantation, growth and maturation of the fertilized ovum. Later, the uninterrupted supply of the placenta depends on the good blood supply it will get.

During pregnancy, the pressure the swollen matrix causes in the vessels of the abdomen and along with the possible presence of thrombophilia, can lead to hypercoagulability of the blood in the pregnant woman. This, automatically, increasing the risk for thrombosis and occlusion of blood vessels in the placenta; a situation that can lead to premature aging, in fetal growth inhibition syndrome, preeclampsia (maternal pressure increase) or preterm labor and fetal death.

In cases where a woman is diagnosed with thrombophilia, this does not mean that it will be necessarily a problematic pregnancy, but you will simply need to follow a specific anticoagulation therapy indicated by your doctor, depending on the results of your blood test investigations.