

Special Issue

Recurrent Pregnancy Loss: Etiology, Diagnosis, and Therapy

Message from the Guest Editor

Recurrent pregnancy loss, defined as a minimum of 2 or 3 consecutive miscarriages or biochemical losses, affects 1%–3% of women in fertile age, and the incidence may be increasing. The psychological impact in the affected women is substantial. Very few proven causal factors exist, whereas many risk factors have been reported; these risk factors probably act together in a multifactorial way to cause recurrent pregnancy loss. Plenty of studies have documented that recurrent pregnancy loss patients have an increased risk of various obstetrical and perinatal complications, such as low birth weight, preterm delivery, and placental abruption in ongoing pregnancies, suggesting that early- and late-pregnancy complications associated with placental dysfunction have overlapping etiologies.

No treatment of recurrent pregnancy loss is well-documented. In order to optimize management of recurrent pregnancy loss patients, monitoring of results of individual clinics on the national or international level should be implemented.

Guest Editor

Prof. Dr. Ole Bjarne Christiansen

Department of Obstetrics and Gynecology, Aalborg University Hospital, Reberbansgade, DK-9000 Aalborg, Denmark

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Journal of Clinical Medicine
Editorial Office
MDPI, Grosspeteranlage 5
4052 Basel, Switzerland
Tel: +41 61 683 77 34
jcm@mdpi.com

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