



Zwangerschap en inflammatoire darmziekten

Auteur:

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Janneke van der Woude studeerde geneeskunde aan de Vrije Universiteit Amsterdam. Zij volgde de opleiding tot Maag-, Darm- en Leverarts (MDL-arts) in het Universitair Medisch Centrum Groningen (UMCG). Daar promoveerde zij in 2004 op het onderzoek apoptosis bij (pre)maligne afwijkingen van het maag-darmkanaal. Sinds 2001 is zij staflid en hoofd inflammatoire darmziekten van de MDL-afdeling in het Erasmus MC Rotterdam. Zij heeft speciale belangstelling voor zwangerschap en inflammatoire darmziekten.

Op 1 mei 2015 is **Alison de Lima** als AIOS MDL begonnen aan de vooropleiding interne geneeskunde in het Ikazia ziekenhuis te Rotterdam. Tot die tijd was ze verbonden aan de afdeling MDL van het Erasmus MC. Naar verwachting promoveert zij in december 2015. Het onderwerp van haar thesis is 'IBD en zwangerschap'.

Review:

dr. B. Oldenburg, MDL-arts, UMC Utrecht

Inhoud

Algemene cursusinformatie

Inleiding

Leerdoelen

Werkwijze

- Accreditatie

Inventarisatie

Diagnostiek

- Zwangerschapsuitkomsten
- Coloscopie en sedatie
- Trombose

Medicatie tijdens zwangerschap

- Aminosalicylaten
- Budesonide
- Corticosteroïden
- Thiopurines
- Methotrexaat
- Monoklonale antistoffen tegen TNF-alfa
- Metronidazol en ciprofloxacine

Adviezen

- Erfelijkheid
- Vruchtbaarheid
- Aangeboren afwijkingen
- Ziekteactiviteit tijdens de zwangerschap: wat dan?

- Indien medicatie niet meer aanslaat
- Modus partus
- Borstvoeding
- Corticosteroïden (prednison, prednisolon)
- Thiopurines
- Anti-TNF

Evaluatie

Referenties

Algemene cursusinformatie

Vrouwen met een bekende inflammatoire darmziekte (IBD) kunnen een zwangerschapswens hebben en een voor de zwangerschap rustige Crohn of colitis ulcerosa (CU) kan tijdens de zwangerschap actiever worden. Daarom is het belangrijk deze wensen op tijd met uw patiënt te bespreken, zodat hiermee rekening kan worden gehouden in de behandeling.

In het eerste deel van de cursus worden diagnostiek, behandeling en medicatie tijdens de zwangerschap besproken. Vervolgens komen erfelijkheid, vruchtbaarheid, de manier van bevallen en borstvoeding aan de orde.

Inleiding

De chronische darmziekten colitis ulcerosa (CU) en de ziekte van Crohn, kortweg inflammatoire darmziekten (IBD) genoemd, worden vaak gediagnosticeerd op de vruchtbare leeftijd. Tijdens een actieve fase van de IBD is de vruchtbaarheid afgenomen. De ziekten kunnen ook de uitkomst van een eventuele zwangerschap negatief beïnvloeden. Daarom is het voor de behandelaar van belang op de hoogte te zijn van een eventuele zwangerschapswens van de patiënt, zodat hier in de behandelstrategie rekening mee kan worden gehouden.

Vanuit de Europese Crohn- en Colitis-organisatie (ECCO) is in 2010 een consensus¹ verschenen over reproductie bij inflammatoire darmziekten en eind 2014 is hiervan een herziening verschenen. Ook zijn tijdens de najaarsvergadering (oktober, 2014) van de Nederlandse Vereniging van Gastro-enterologie (NVGE) de herziene CBO-richtlijnen Nederland besproken. In deze e-learning worden de laatste inzichten besproken met betrekking tot zwangerschap bij patiënten met een inflammatoire darmziekte.

Leerdoelen

Na deze e-learning:

- weet je wat tijdens een preconceptioneel consult aan de orde dient te komen met betrekking tot inflammatoire darmziekten en zwangerschapswens
- ken je de geneesmiddelen die gecontra-indiceerd zijn tijdens de zwangerschap
- weet je welke medicatie kan worden gecontinueerd tijdens de zwangerschap
- ken je het effect van een actieve ziekte op de uitkomst van de zwangerschap en weet je hoe te handelen indien de ziekte actief wordt tijdens de zwangerschap
- kun je advies geven over de modus partus
- kun je advies geven over borstvoeding en medicatiegebruik

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