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TITLE

THE INFLUENCE OF VITAMIN D ON CONCEPTION AND PREGNANCY IN HASHIMOTO THYROIDITIS

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ABSTRACT

Introduction: It is well known that vitamin D can modulate immunological state especially in Hashimoto thyroiditis. We estimated serum level of 25(OH)D3 at 16 women with Hashimoto thyroiditis and problem with misconception. All of them had three or more habitual abortion before.

Aim: We wanted to estimate which serum level of vitamin D is necessary for women to keep their pregnancies.

Methods: We took serum for level of 25(OH)D3, free thyroid hormones, thyrotropin, anti tPO and anti tg,

We found that all of them initially had a low level of vitamin d3 ($20 \pm 1,3$) nmol/l and high level of thyroid antibodies: anti Tg($351,2 \pm 88,6$) and anti TPO($886,7 \pm 120,5$). Some of them had tsh above 3,5 ($31,25\%$). We gave them solution of vitamin D Oleovit D3 14400 IU/ml Fresenius Kabi Austria GmbH, Linz, Austria 3300 ij /per day through 3 months period. The pregnancy had been planned when they achieved all optimal parameters: tsh about 2,5 and vit d3 from 75 till 90 nmol/l

Results: After they had achieved our goals they attempted to become pregnant in very short period. 10 (62,5%) of our patients achieved this level; The rest six (17,5%) stayed with pregnancy with lower level of vitamin D $43, 21 \pm 2,3$. Tsh was $2,31 \pm 1,2$ and anti tpo ($241,8 \pm 30,12$), anti tg ($468,33 \pm 110,11$) were. Two women have lost their pregnancy in 6th week of gestation. Other four got 4000-5000 ij /per day until their level of Vitamin D became 70nmol/l in first term. All women were monitoring during the pregnancy and we were maintaining same level of vitamin D whole period. Level of tsh was according ATA recommendations. They all gave birth to a normal mature child.

Conclusion: Maintaining stable level of vitamin D during preconception period and pregnancy could be important for normal birth.

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