

Gonadotrophin + menotropins

Ovarian hyperstimulation syndrome treated with albumin and furosemide: 2 case reports

Severe ovarian hyperstimulation syndrome developed in 2 women treated with human chorionic gonadotrophin (hCG), follicle stimulating hormone (FSH) and human menopausal gonadotrophin (hMG) for ovulation induction.

The first patient, a 33-year-old woman, received hCG [Physex®] 4500IU, and hMG [Pergonal®] 2 ampoules/day for 4 days [*dose not stated*], and FSH [Fertinorm®] 4 ampoules [*dosage not stated*]. She presented 5 days after receiving the hCG injection with severe abdominal distension, weight gain, constipation, nausea and dyspnoea.

The second patient, a 36-year-old woman, was also treated with hCG, FSH and hMG [*dosages not stated*]. She presented 10 days after receiving the hCG with similar symptoms.

Both women developed severe pulmonary compromise and prerenal azotaemia, with increased BUN, creatinine, and creatinine clearance levels and oliguria. Enlarged and multicystic ovaries were noted in both patients. Infusion with crystalloid solutions had no effect on reversing oliguria, and actually led to ascites accumulation. Indomethacin was not found to be useful.

However, both patients dramatically responded to albumin infusions associated with furosemide. Ultrasound revealed reduced ovary size in both women prior discharge.

Author comment: *'We believe that albumin infusion associated with the judicious use of furosemide, and careful monitoring may be a safe procedure that permits progressive fluid depletion. The advantage of this approach over other procedures deserves further investigation.'*