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Title: Influence of pregnancy on pulmonary function in women with pulmonary Langerhans cell histiocytosis

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Body: Introduction: Pulmonary Langerhans' cell histiocytosis (PLCH) is a rare disease of smoking women in childbearing age. Some patients require steroid treatment or chemotherapy, but in other patients only cessation of smoking induces the regression of the disease. Material and methods: From 2000 to 2012, 32 women aged 15 to 69 years with PLCH have been hospitalised in our department. The median follow-up period was 79 months (range 12 to 138 months). During that time 7 women were pregnant, two of them 2 times. The mean age of them was 27,3 years (ranged 24 to 36 years). One patient was pregnant in the time of diagnosis, two - in the time of low doses of steroid treatment, one - just after the chemotherapy, one in the time of antituberculosis therapy and 2 patients were without any therapy. Seven patients delivered at term 7 healthy children (now 10, 7, 4, 3, 1 years, 4 and 1 month old). Two spontaneous abortions in the 7-th week of pregnancy were noted in one untreated patient and in one who was treated for mycobacteriosis. Pregnancy was no significantly influence on pulmonary function parameters such as FEV1, FVC, RV/TLC, DLCO, distance and saturation in 6 MTV but TLCO was significantly higher after pregnancy (93,13% vs, 103,3%: p=0,0389). There was no significant complication of pregnancy and delivery in patients with PLCH, except one patient, in whom persistent air leak was observed during pregnancy.