

## Abstract

### **Re-Evaluation of Serum Beta Human Chorionic Gonadotropin Follow Up in Patients with Molar Pregnancy**

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#### **Objective:**

Aim of the study was to determine whether there is a need to continue follow up of uncomplicated molar pregnancy beyond attaining one undetectable serum  $\beta$ -hCG level. The number of patient defaulted follow-up during the duration of protocol and the number of patient who relapsed after achieving one undetectable serum  $\beta$ -hCG level were determined.

#### **Methods:**

This was a retrospective study. One hundred and two patients with molar pregnancy between the period of 1st January 2005 and 31st December 2010 who were managed in the oncology unit in UKMMC were analysed. Patients who developed persistent trophoblastic disease before achieving undetectable serum  $\beta$ -hCG level were excluded from analysis.

#### **Results:**

The incidence of molar pregnancy was 2.6 per 1000 deliveries in UKMMC. The number of patients defaulted follow-up before completion of protocol were 28 (27.5%). Four out of 102 patient (3.9%) developed persistent trophoblastic disease before attaining one undetectable serum  $\beta$ -hCG level. None of the patient with uncomplicated molar pregnancy had evidence of relapse following one undetectable serum  $\beta$ -hCG level.

#### **Conclusion:**

Continued follow up of uncomplicated molar cases beyond obtaining one undetectable serum  $\beta$ -hCG level is not necessary in order to detect relapse of gestational trophoblastic disease.