





Why undergoing this examination?

Thrombophilia is the predisposition for the development of blood clots and occurs as a consequence of alterations in the coagulation system. It is potentiated during pregnancy and the postpartum period due to the pro-coagulant characteristics of these conditions. Thrombophilia can be classified as acquired or hereditary and affects approximately 15% of the general population.

The risk of venous thromboembolism (VTE) during pregnancy and the postpartum period increases between 9 and 34 times in women with a genetic susceptibility to thrombophilia. Pregnancy complications caused by thrombophilia include placental thrombosis, severe forms of gestational hypertension, premature placental detachment, intrauterine fetal growth restriction that can lead to fetal death. These complications represent about 75% of the causes of neonatal morbidity and mortality.

What is the exam?

The **Thrombo InCode Reproductive Health** test involves the evaluation of 12 genetic variants associated with an increased risk of thrombosis development. The result is obtained through a mathematical algorithm that allows the assessment of the patient's risk in three ways: the patient's risk of presenting thrombophilia associated with the current clinical condition (variable factors such as weight, smoking, habits, and lifestyle); the patient's risk compared to the risk of Factor V Leiden heterozygosity with the same clinical profile; and the risk with the same clinical profile considering the found genetic variants. This provides a comprehensive analysis of the genetic implications in the risk of thrombophilia and, consequently, recurrent pregnancy loss.

For whom is it indicated?

- Patients with a history of VTE or a condition suggesting a hereditary component;
- · Idiopathic or recurrent venous thromboembolism;
- Venous thrombosis in infrequent vascular territories;
- · Neonatal fulminant purpura;
- Warfarin-induced skin necrosis:
- Unexplained arterial thrombosis.
- Women with fetal loss or recurrent spontaneous abortions;
- Pregnant women with venous thrombosis;
- · Patients on oral contraceptives;
- Patients with a family history of venous thromboembolism.

Technology

Reverse Transcription Polymerase Chain Reaction (RT-PCR)

Advantages

SYNLAB GROUP

Guaranteed by the experience of the absolute European leader in laboratory diagnostics.

COMPLETE

Report with objective results and detailed interpretation.

Extra Information

DOCUMENTATION – Available on the SYNLAB Direct for clients

- · Informed Consent;
- Clinical Questionnaire:
- · Medical prescription.

PREPARATION

· Fasting is not necessary for the exam.



Delivery Time20 business days



Sample Type

5 mL of whole blood in EDTA