LETTER TO EDITOR



LETTER TO THE EDITOR Re: First live birth after fertility preservation using vitrification of oocytes in a woman with mosaic Turner syndrome

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To the Editor,

We were excited to read the report published recently in JARG by Strypstein and colleagues on the first live birth after fertility preservation using autologous oocyte vitrification in a woman with mosaic Turner syndrome [1]. The Turner syndrome community of patients, families, and healthcare providers has been waiting expectantly for reports of successful cryopreservation and fertility outcomes [2–4]. In fact, as more fertility options become available, we would like to reiterate the importance of appropriate and thorough counseling and cardiovascular monitoring in this population. As clinicians who care for young women with Turner syndrome, we are aware that they will read your report with great interest. We encourage families to advocate for themselves when it comes to a rare condition and associated health risks.

As the authors appropriately highlight, women with Turner syndrome have an increased risk of aortic dissection or rupture during pregnancy and in the immediate post-partum period, with the risk of death estimated as high as 2% [5–8].

Women with Turner syndrome and their providers must recognize that medical care should include standardized, systematic pre-conception cardiovascular monitoring that continues diligently throughout the pregnancy and postnatally to assess for these potentially devastating cardiac consequences while also contributing to favorable outcomes [8–11]. We look forward to additional research from this group and others in this important area of Turner syndrome care.

Yours sincerely,

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Declarations

Conflict of interest The authors declare no competing interests.

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