

האיגוד הקרדיולוגי בישראל האיגוד הישראלי לכירורגית לב וחזה דאיגוד הקרדיולוגי בישראל ואיגוד הישראלי לכירורגית לב וחזה דאיגוד הקרדיולוגי בישראל ואיגוד הישראלי לכירורגית לב וחזה





The 60th International Conference of the Israel Heart Society in association with the Israel Society of Cardiothoracic Surgery

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Maternal and Neonatal Complications in Women with Valvular Heart Disease

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No conflict of interest exists



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Background and Aim:

- The presence of valvular heart disease in a pregnant patient continues to pose a clinical challenge
- Information on valvular heart disease in pregnancy is based on several case series
- Most of maternal and fetal complications arise in valve stenosis lesions, while regurgitation is usually well tolerated

Aim: to assess maternal and neonatal outcomes of pregnant women with valvular heart disease and compare them with matched normal pregnant controls



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Study Design:

- A retrospective case-control study
- Study group: Women with valvular heart disease followed in a specialized cardiac high-risk pregnancy clinic between 2004-2010

35 pregnancies of women with valvular heart disease

- MS 17 (45%)
- AS 13 (34%)
- MR 29 (50%); AR 11(29%); TR 8 (21%); PR 3 (8%)
- 23 (60%) combined lesions

Controls: 70 women without heart disease who gave birth at our center at the same time served as controls (2:1 ratio)

Maternal (cardiac and non-cardiac) and neonatal complications were assessed, after controlling for confounders



Maternal cardiac complications:

- 1 maternal death
- 2 thrombotic events (PE)
- 8 arrhythmias
- 7 events of pulmonary congestion

Increased risk for cardiac complications influenced by:
 Severity of valvular stenosis
 OR 1.31

Previous maternal complications

▶ Point score index ≥1 (Siu et al)

OR 1.31 (95% CI 1.08-1.58) OR 1.99 (95% CI 1.21-2.93) OR 2.18 (95% CI 1.44-3.32)



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Obstetric complications:



- Women in the study group delivered earlier(260±20 vs 277±20 days, smaller babies(2776±760g vs 3232±490g), p<0.001</p>
- Any obstetric complications (preterm delivery, hypertensive complications, placental abruption or postpartum hemorrhage): 31% vs. 13% controls (p=0.04)
 OR 3.1, 95% CI 1.14;8.44

Neonatal complications:

- Low birth weight (<2500 grams) 23% vs 6% (p=0.02) OR 4.9, 95% CI 1.36-17.6
- Admission to neonatal ICU: 55% vs 6% (p<0.001) OR 18.3, 95% CI 5.33-63.14
- Any neonatal complications: 63% vs 16% (p<0.001) OR 4.2, 95% CI 2.15-8.25



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Preexisting valvular heart disease imposes significant risks on the pregnant woman

The risk of adverse pregnancy and neonatal outcome should be explained in detail to such women contemplating pregnancy.



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