

32. PREGNANCIES WITH PULMONARY HYPERTENSION SECONDARY TO CONGENITAL HEART DISEASE.

Kaluarachchi A¹, De Alwis D¹, Gnanasekeram R¹, Gunawansa N¹, Wijeratne CN¹, Seneviratne HR¹

Introduction: Heart disease complicating pregnancy is a significant cause of maternal morbidity and mortality. Pulmonary hypertension (PHT) secondary to congenital heart disease (CHD) is potentially a fatal condition.

Objectives : To find the maternal and foetal outcome of pregnancies complicated with PHT secondary to congenital heart disease.

Study Design : Retrospective descriptive study.

Setting: University Obstetric Unit, De Soysa Hospital for Women, Colombo.

Method : Data collected from the records of 77-consecutive mothers with congenital heart disease who delivered during the period from 01/09/98 to 30/11/00.

Results : This study group consisted 77 mothers with CHD, their mean age=27.94yr (SD±5.22yr) and their mean parity was 1.58(SD±0.75).

41.6% (n=32) had Mitral Valve Prolapse, 33.7% (n=26) had Atrial Septal Defect (ASD) and 16.9% (n=13) had Ventricular Septal Defect (VSD).

18.4%(n=14) had PHT and 10 of them were in their 1st pregnancy.

ASD was the primary lesion in 10 and VSD in 4.

16 put of 26 ASD patients and all VSD patients did not have corrective surgery done.

None of the patients with PHT had undergone corrective surgery.

The only two maternal deaths and two perinatal deaths were seen in the group with PHT.

Conclusion : Despite the advancement of the health care services pregnancies complicated with PHT is not uncommon. Early surgical correction of congenital heart lesions and counseling of women of reproductive age group with PHT against pregnancy are two areas need addressing.