



# Left middle cerebral artery ischaemic stroke, pre-eclampsia and preterm labour at 33 weeks: case report



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## Introduction

Cerebrovascular disease is uncommon in pregnancy but causes major morbidity in women and babies. Pre-eclampsia can result in renal and haematological abnormalities that in turn increase the risk of stroke in pregnancy. Other risk factors predisposing to stroke in pregnancy include hypertension, diabetes, coagulation disorders and tobacco use <sup>(1)</sup>.

## Case report

A 35 year old G<sub>3</sub>P<sub>2</sub> Aboriginal lady presented to Port Lincoln hospital at 33 weeks with collapse, dysarthria, right sided weakness, and in preterm labour.

She attended regular antenatal appointments but did smoke during pregnancy.  
Examination:

- elevated BP
- Proteinuria
- dense right facial and upper limb weakness
- lower limb hyper-reflexia
- non-reactive right pupil

Investigations:

- CT scan: left middle cerebral artery ischaemic stroke

Treatment:

- Magnesium sulphate
- Nifedipine
- Betamethasone
- Antibiotics
- Aspirin
- Retrieved to a tertiary centre.

Outcome:

- LSCS
- Collapsed left lung
- Patent foramen ovale
- recovered with minimal ongoing deficits
- baby has not shown ill effects of preterm birth.

## Discussion

Our review of the literature found 14 cases of stroke in pregnancy in women attributed to a PFO, but no maternal mortality. Pre-eclampsia and stroke can have a significant impact on maternal and infant morbidity and mortality and we hope this case report adds further information to a rare combination of complications in pregnancy

## References

1. James AH, Bushnell CD, Jamison MG, Myers ER (2005) "Incidence and risk factors for stroke in pregnancy and the puerperium" *Obstet. Gynecol.* **106**: 509–516.