

Successful pregnancy outcome in a mother with surgically uncorrected Tetralogy Of Fallot



A case report (203)

Gunathilaka S N M P K, Lanerolle S, Sumanathissa RPJ, Weerakoon WAB.

Obstetrics & Gynaecology Unit – 1 & 2, Castle Street Hospital for Women, Colombo 08, Sri Lanka. (punsirikamal@yahoo.com)

Background

- ➤ Tetralogy Fallot (TOF) is the commonest congenital cyanotic heart disease.
- ➤ Survival of surgically uncorrected TOF adulthood is possible, however pregnancy is rarely seen due to the reduced fertility and life expectancy.
- >We report a case of successful pregnancy outcome in a woman with uncorrected tetralogy of Fallot.

Case

- > 29 ys old primi with uncorrected TOF presented to ANC at 14/52.
- Exercise tolerance NYHA I
- ➤ O/E: Plethoric Peripheral cyanosis+ Clubbing+ Systolic murmur+ O2 saturation-93%

> IX: 2D ECHO - TOF with hypoplastic MPA with severe Pulmonary Stenosis. EF - 60%.

USS - Asymmetrical FGR.

- Close follow up with MDT.
- Vaginal delivery at 38 weeks with second stage assistance was planned.
- Admitted at 37/52 with exertional dyspnea (NYHA IV).
 - BP-90/70 mmHg O₂ saturation-84% Hb -163 g/L PCV - 47%
- MX:
- MDT involvement
- Stabilized in ICU
- Due to worsening symptoms + FGR Caesarean section was performed under graded

epidural anesthesia.

- Baby 2.3 kg.
- Neonatal ECHO Patent foramen ovale and mild bilateral branch PA stenosis.
- Post op: managed in
- A corrective surgery for TOF was planned later.

Discussion:

- Pregnancy with uncorrected TOF is associated with increased maternal morbidity and mortality.
- These mothers should be followed up closely with hematocrit and the fetuses should be screened for FGR and congenital heart diseases.
- Careful fluid management and blood pressure maintenance gives a outcome better in labour.

Tetralogy of Fallot (ToF)



