

Stage B heart failure in pregnancies with hypertensive disease in pregnancy

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Objective

If we can identify any form of cardiac dysfunction along with its severity during early pregnancy.

Methods

After initial assessment 81 patients were enrolled in the study after signing a written consent. Patients were divided in two groups depending whether they had hypertension or not. In the hypertensive group 51 patients were enrolled and 30 normotensive pregnancies were used as controls. A total of 3 echocardiography's were made in the 28 g. w, 2 weeks after delivery and 6 months after delivery.

Results

In our study, diastolic dysfunction at the entrance of the study was identified in 43.1% of the evaluated pregnant population, at the first control the percentage decreased to 33.3% and at the last control - 6 months after delivery was 18.1%. In our study, pregnant women were not divided into early and late preeclampsia due to the low number of patients.

Conclusion

Early recognition and management of symptoms are essential. Women who suffer from hypertensive disorders in pregnancy require close monitoring after delivery. This has been shown especially in earl onset preeclampsia. Up to 40% of those patients fit the criteria of B stages heart failure (left ventricular diastolic dysfunction/abnormal relaxation). These are young active women who don't know that they have an underlying risk for chronic hypertension and future heart failure.