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ASSOCIATION BETWEEN HEART DISEASE IN PREGNANCY WITH CARDIAC EVENTS

Abstract

Pregnancy in heart disease is at high risk for cardiac events. Heart failure (NYHA III-IV), ejection fraction (EF)<40%, cyanosis and left ventricle obstruction (MVA< 2 cm² or AVA <1.5 cm²) are parameters that still use in predicting cardiac events in pregnancy. But in clinical experience, pregnancy with MVA 1.5-2 cm² still can have the pregnancy without cardiac events. These parameters haven’t included congenital heart disease (CHD) and hypertension with preserved EF and cyanosis had still occurred has the potency the occurrence of cardiac events. To date, no exact parameters associate with severity of CHD are high risk for occurrence cardiac events in pregnancy. The objective was to prove MVA <1.5cm², CHD with PASP > 60 mmHg, and chronic hypertension with left ventricle hypertrophy as risk of occurrence for cardiac events in pregnancy. Ninety two pregnant women with mitral stenosis, MVA < 1.5cm², CHD with PASP >60 mmHg and chronic hypertension with left ventricle hypertrophy based on registry from 2002 to 2007, retrospectively through medical record and classified into groups based on occurrence of cardiac events. Ninety two pregnant women in 5.5 year period fulfilled inclusion criterias. 46.75% had cardiac events. There are significant association between MVA <1.5cm² (CI 1.61-78.56, p=0.01), CHD with PASP > 60 mmHg (CI 1.97-19.04, p=0.01) and chronic hypertension with left ventricle hypertrophy (CI 1.16-52.35, p=0.001) with the occurrence of cardiac events. In conclusion, pregnancy with severe MS, CHD with pulmonary hypertension moderate-severe and chronic hypertension with left ventricle hypertrophy are at risk of cardiac events along the pregnancy.

Keyword : pregnancy, heart, disease, cardiac, events, ,

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