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## Objective

Heart disease in pregnancy is a serious health problem, and although its incidence ranges between 0.2-0.4%, it can represent the leading cause of non-obstetric maternal mortality.

In recent years, there has been a trend towards an increase in the prevalence of heart disease in the pregnant population due to cardiovascular risk factors such as Mellitus diabetes, hypertension and obesity.

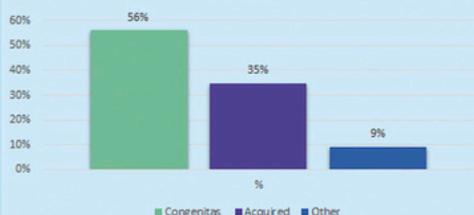
Evidence shows that pregnancy and childbirth entail substantial physiological changes that require adaptation of the cardiovascular system. These changes, well tolerated in pregnant women without heart disease, expose women with cardiovascular disease to significant risks. Therefore, our objective is to describe the cases managed in 2 health institutions in Colombia (Cardiology Service of Hospital San José - Bogotá and NORFETUS Maternal-Fetal Medicine Unit - Cúcuta) and also to report their statistics.

## Methods

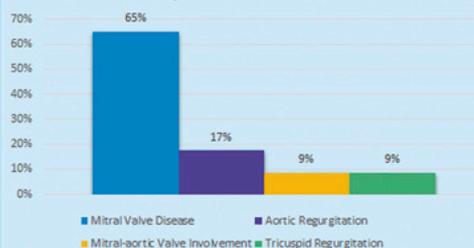
A descriptive, retrospective study was carried out with the clinical histories of the cardiology service at the Hospital de San José and at the perinatology service of the Maternal Fetal Medicine Unit NORFETUS (Bogotá and Cúcuta respectively) from 2.004 to 2.021, where 66 pregnant women diagnosed with heart disease were found and met the inclusion criteria of the study.

## Results

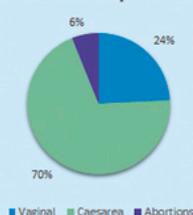
Types of Heart Disease in Pregnant Women



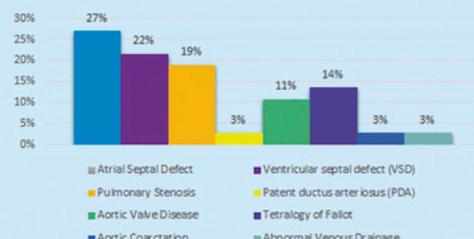
Acquired Heart Disease



Route of Delivery in Pregnant Women With Cardiopathies



Congenital Heart Disease



Regarding surgical management, 19.7% (13 cases) required prenatal intervention, while 4.55% of pregnant women underwent surgery during pregnancy (3 cases).

Among pregnant women with heart disease, the percentage of prematurity was 49% (31 cases); 50% of the neonates weighed between 2.500 and 3.500 grams. Despite this, 90% of the neonates obtained a score >7 on the Apgar test and only 2 cases of neonatal mortality (5%) were found.

It was found that the age group of mothers with the highest frequency of heart disease ranges from 16 to 25 years, representing 43% (29 cases). Parity was another relevant finding since 33 cases (50%) corresponded to primiparous mothers, 17 cases (25.75%) to second pregnant women and 16 multi-pregnant cases (24.2%).

## Conclusions

1. Heart disease in pregnancy represents a great problem for the pregnant woman and the fetus; according to the risk classification, it can even result in maternal death and/or the mother-fetus binomial. The most frequent heart diseases found in our study population were septal defects 27% (18 cases) and mitral-aortic valve disease 37,9% (25 cases of the total).

2. Despite the maternal-fetal risks of heart disease associated with pregnancy, it was shown that the rate of complications is low and the most predominant pathologies allow the pregnancy to be carried to a successful term.