

Women with Congenital Heart Disease (CHD) in Pregnancy- A Combined Cardio-Obstetric Clinic Report from Cape Town, South Africa

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Background

Congenital heart disease (CHD) is a leading cause for maternal death in western countries, little is known about developing countries like South Africa.

Grown-up congenital heart disease (GUCH) patients are at high risk for cardiac failure and cardiovascular complications during pregnancy.

In 2014, we described the spectrum of cardiac disease in a combined cardio-obstetric clinic in a tertiary maternity centre in Cape Town.



ORIGINAL ARTICLE

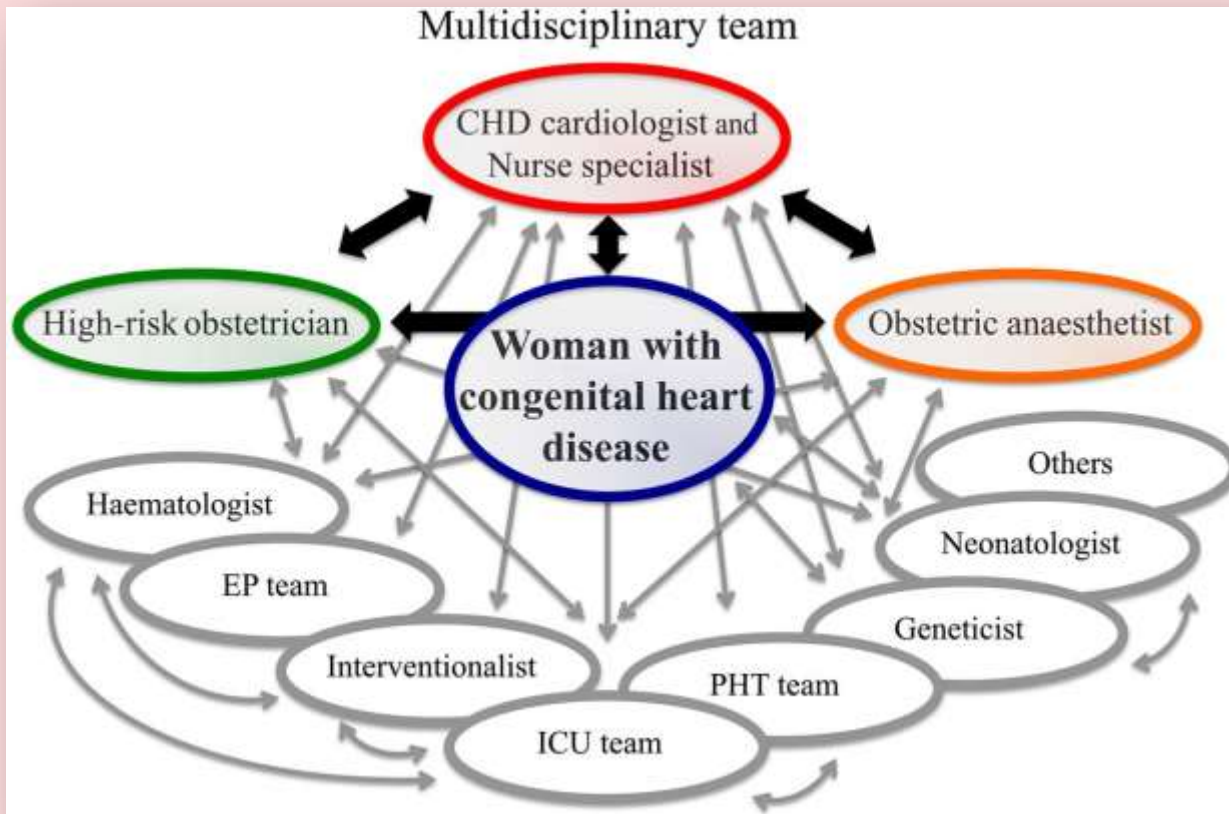
Spectrum of cardiac disease in maternity in a low-resource cohort in South Africa

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The Recommendations

1. Multidisciplinary approach.
2. Preconception counselling.
3. Comprehensive risk assessment and stratification.
4. Risk estimation.
5. Informed and patient(s)-centred decision making
6. Management planning



Objective and Methods

- **To quantify the presentation, clinical assessment and outcomes of GUCH patients in this clinic.**
- **Women were enrolled either during pregnancy or within 6 months postpartum after ethics approval.**
- **Patients were classified according to the modified WHO classification of maternal risk in pregnancy with clinical assessments including echocardiography at baseline and follow-up.**



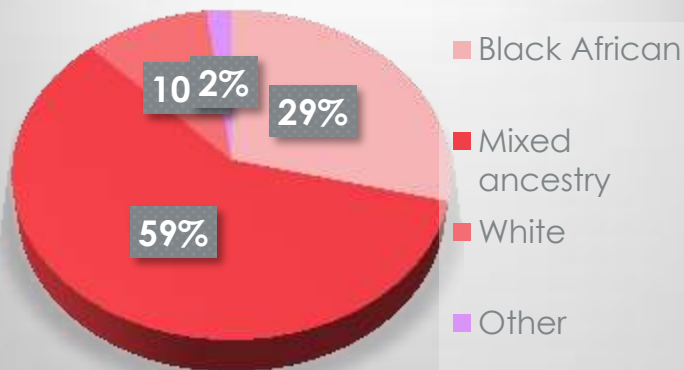
Findings

There were 239 women (mean age 28.5 ± 5.9 yrs) included in the total cohort.

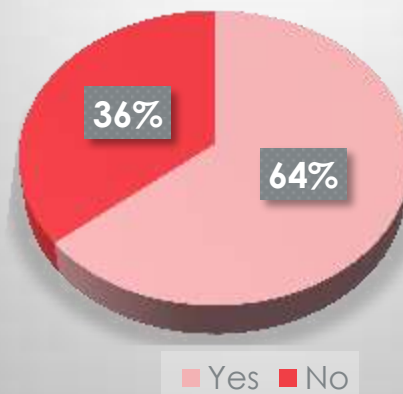
In total, 84 (35.1%) had CHD (most common were Ventricular and Atrial Septal Defects: 32% and 14% respectively, Tetralogy of Fallot 11%, Pulmonary Stenosis and Coactation of the Aorta 6%).

Frequency of heart failure and complications during pregnancy did not differ significantly from women without CHD. There were no deaths recorded.

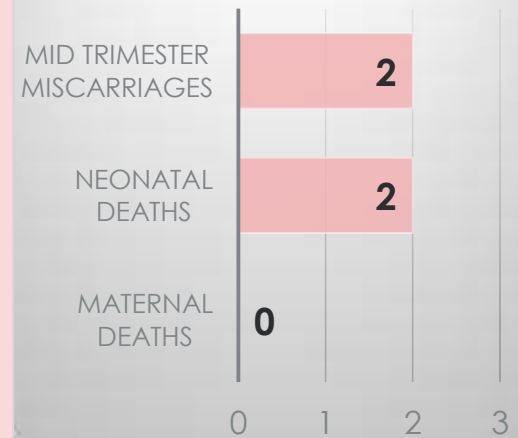
Ethnic mix



Post-Operative patients



Mortality (count)



Conclusions

We report excellent maternal and neonatal outcomes for GUCH patients.

As the GUCH population increases, the impact on tertiary obstetric services will be felt, highlighting the need for interdisciplinary medical teams to ensure good outcomes.



Cardiovascular Topics

The importance of cardiovascular pathology contributing to maternal death: Confidential Enquiry into Maternal Deaths in South Africa, 2011–2013

Priya Soma-Pillay, J Seabe, Karen Sliwa

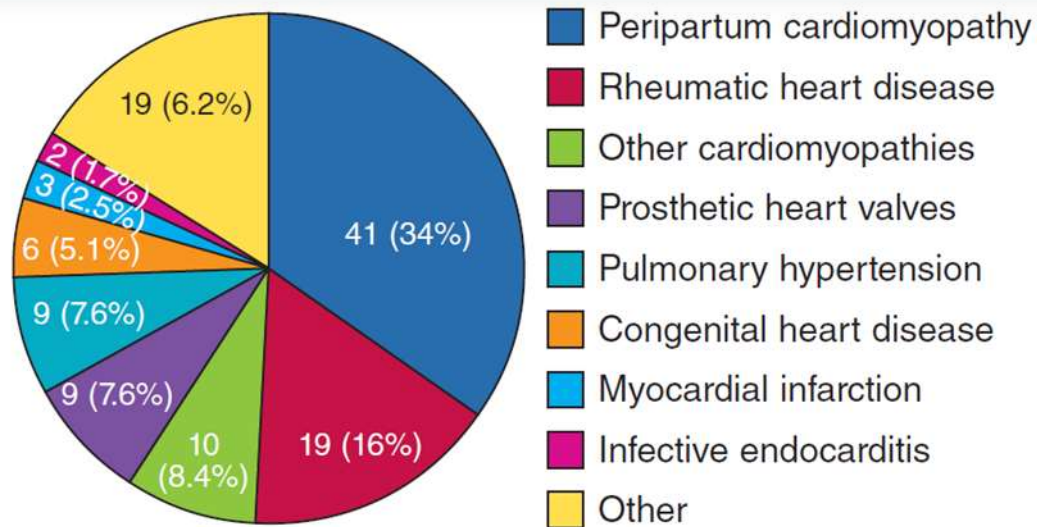
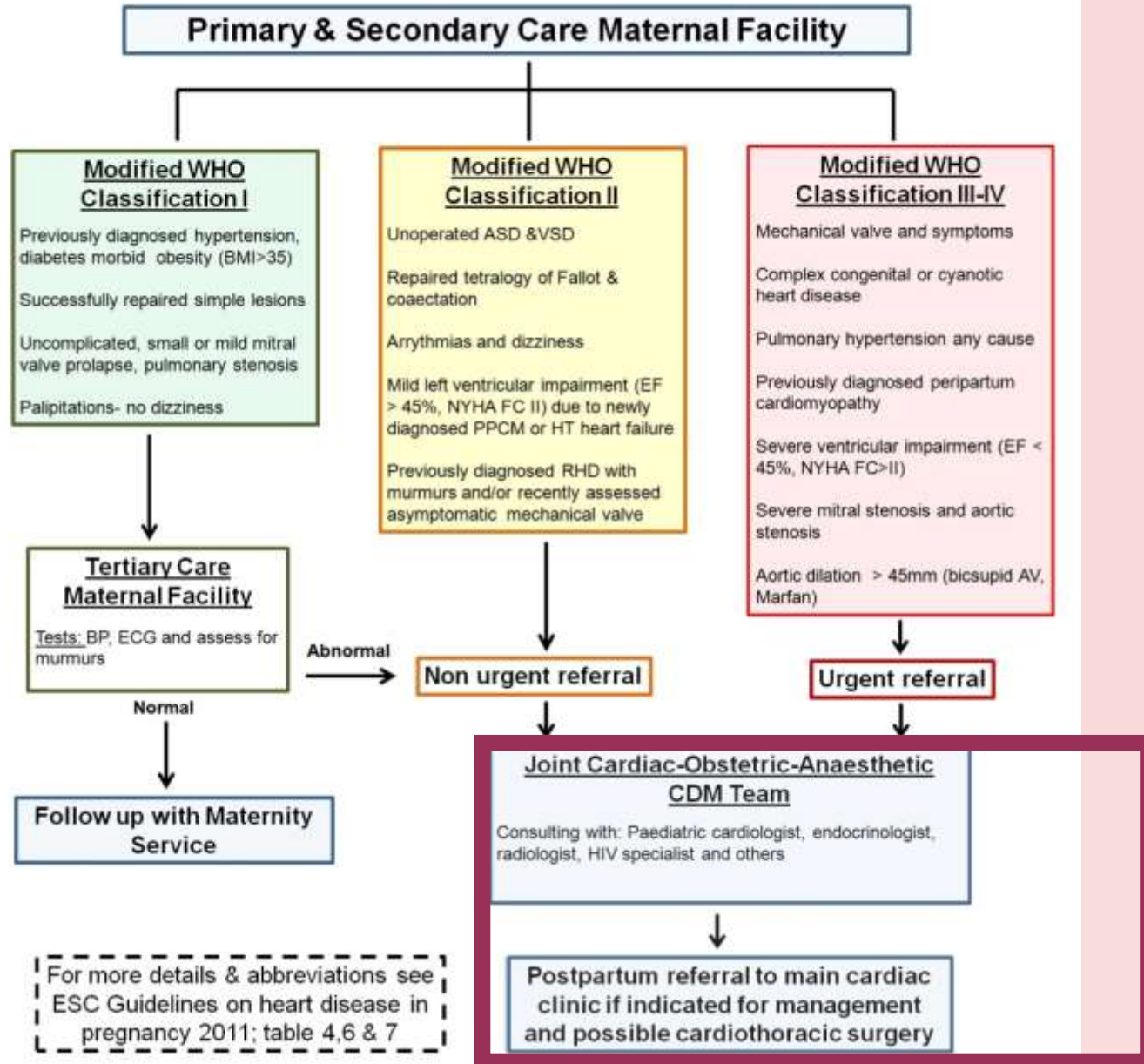


Fig. 3. Cardiovascular conditions contributing to cardiac death ($n = 118$).

Referral Algorithm for suspected and previously known Cardiovascular Disease in Maternity (CDM)



Thank you for your attention and
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South Africa!

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