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Heart Failure and Cardiomyopathies

PERIPARTUM TAKOTSUBO CARDIOMYOPATHY

Poster Contributions

Poster Hall B1

Sunday, March 15, 2015, 9:45 a.m.-10:30 a.m.

Session Title: World of Cardiomyopathies

Abstract Category: 14. Heart Failure and Cardiomyopathies: Clinical

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Background: Takotsubo Cardiomyopathy (TCM) is a rarely identified cause of acute heart failure in pregnancy. We describe the demographic characteristics, clinical features and outcomes in reported cases of peripartum TCM.

Methods: We searched four databases (EMBASE, OVID Medline, PubMed and Google Scholar) from Jan 2000-Jun 2014 using the search words "takotsubo"; "cardiomyopathy"; "peripartum"; and "pregnancy" as well as citation sections of retrieved articles. Of 33 cases reviewed, 21 met inclusion criteria of (i) TCM symptom onset within 24 hours of birthing (ii) TCM diagnosis confirmed by imaging; and (iii) minimum dataset of age; mode of delivery; cardiac enzymes and +/-ST-segment elevation on ECG. We include two un-published cases meeting these criteria from our hospital.

Results: Pre-existing maternal high risk features had greater prevalence in the TCM population compared with the population of all women who gave birth in the US in 2012. Included age >35 years (26% vs. 10%); multiple gestations (22% vs. 3%), preterm birth (<37 weeks) (22% vs. 11%) and cesarean delivery (87% vs 33%). Pulmonary oedema was reported in 43%; peripartum haemorrhage (PPH) in 26% and hypotension in 26%. Tocolytic use was reported in 9% and uterotonics in 39%. Inotropes and/or vasopressors use was reported in 48%. 43% required intubation beyond the time of birthing. Cardiac findings were similar to those for older women with TCM, though peripartum TCM patients were more unstable during the acute phase, but all made a full recovery within a few weeks of TCM onset.

Conclusion: TCM should be considered as a possible diagnosis for acute peripartum-related heart failure. High risk features that appear to be more prevalent in the TCM population compared with a general population of pregnant women are older age, multiple gestations, cesarean delivery, preterm labour and PPH. Uterotonic and anesthetic agents may have a role in the development of TCM via effects on the cardiovascular system and cardiac output. 1 Martin JA, Hamilton B, Curtin S, Mathews T. National vital statistics reports. National Vital Statistics Reports 2013; 62.