

Pregnant women with heart defects don't always get this recommended test

June 8 2020



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Women with heart defects experience far more cardiovascular problems

during pregnancy than those without, yet only half get a recommended test to assess their heart health before giving birth, according to new research.

The study, published Monday in the American Heart Association journal *Circulation: Cardiovascular Quality and Outcomes*, found that during pregnancy, [women](#) with [congenital heart disease](#) experienced adverse conditions 34 to 63 times more often than those without [heart](#) defects. The conditions included [high blood pressure](#) in the lungs, heart rate problems, dangerous heart rhythms and cardiac arrest. But just 56% of these women received the comprehensive echocardiograms experts recommend.

"We were surprised that some conditions were up to 63 times more prevalent," said lead author Karrie Finn Downing, an epidemiologist at the Division of Birth Defects and Infant Disorders at the Centers for Disease Control and Prevention. "Women with CHD and their doctors should be aware of this greater level of risk so there's more communication between the two during pregnancy. They need echocardiograms to assess the heart's health and to identify any problems early in pregnancy."

In the United States, about 40,000 babies are born each year with congenital heart defects, a condition that affects the structure of the heart and how blood flows to the rest of the body. These defects can be fatal. However, a growing number of people born with CHD are living longer and healthier lives.

Researchers estimate there are now roughly 1.4 million U.S. adults living with CHD. So, more women with the condition are living long enough to start families and, as they do, hospital deliveries for [pregnant women](#) with CHD have increased.

The AHA, American College of Cardiology and American College of Obstetricians and Gynecologists recommend doctors use echocardiograms as part of a comprehensive assessment of [heart health](#) for these pregnant women. The painless test uses ultrasound to visualize the heart beating and pumping blood to detect abnormalities.

The study did not address why half the women who should have gotten echocardiograms did not.

But one reason may be that some health care providers are not aware of the guidelines, said Dr. Laxmi Mehta, professor of medicine and director of preventive cardiology and women's cardiovascular health at the Ohio State University Wexner Medical Center in Columbus. She recently chaired an expert panel that authored an AHA statement recommending pregnant women with heart conditions receive specialized treatment from a collaborative team, including an obstetrician, cardiologist, anesthesiologist, maternal-fetal medicine specialist and nurses.

As women with CHD grow up and transition from seeing pediatric to adult [health care providers](#), "some may lose their cardiologists," said Mehta, who was not part of the new study.

"They may be followed by a primary care physician and an obstetrician, or getting care from a midwife who may not have formal training on CHD or be aware of the recommended cardiac guidelines. Just because guidelines exist doesn't mean they are being implemented. We need to increase education regarding these guidelines for the entire health care team so both the severe and less severe CHD patients get appropriate guideline-recommended care prior to, during and after pregnancy."

While failing to get an echocardiogram may not lead to worse outcomes for some pregnant women, it could delay identifying problems that

affect the mother's health, she said.

"Those who don't get assessed in time could run into delayed recognition of issues such as heart failure or worsening underlying valve disease. Pulmonary hypertension could worsen," Mehta said. "Even if they get an echocardiogram, these things could occur. But close monitoring means the sooner you catch it, the sooner you can address it by tailoring medication and delivery plans."

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Citation: Pregnant women with heart defects don't always get this recommended test (2020, June 8) retrieved 19 April 2024 from <https://medicalxpress.com/news/2020-06-pregnant-women-heart-defects-dont.html>

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