

Peripartum Cardiomyopathy in a 32 Years Old Saudi Female Complicated with Acute Ischemic Stroke: Case Report

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ABSTRACT

Background: Peripartum cardiomyopathy (PPCM) is an idiopathic cardiomyopathy presenting with heart failure secondary to left ventricular systolic dysfunction towards the end of the pregnancy, or within five months following postpartum, where no other cause for heart failure was found. PPCM is an uncommon but potentially catastrophic to maternal health, and is an important cause of maternal morbidity and mortality, it accounts for up to 11% of maternal deaths. About half of all women will have full myocardial recovery within 6 months of diagnosis, but complications such as severe heart failure, thromboembolism or death are not rare. Patients with peripartum cardiomyopathy often present with symptoms and signs of heart failure. Criteria for diagnosis of PPCM, include heart failure that presents with reduced left ventricular function, symptoms and signs of heart failure either late in pregnancy or early in the postpartum period. Recurrence in subsequent pregnancies may occur.

Case report: We report a case of a 32-year-old patient, diagnosed with a peripartum cardiomyopathy in the postpartum period, when she had symptoms of heart failure in the third trimester but she did not seek medical advice till 3 months after delivery, and then she developed acute ischemic stroke. The echocardiogram reported heart failure, left ventricular thrombus and a ventricular failure with an ejection fraction <40%. We could not identify any other cause to justify heart failure nor any other cause for the ischemic stroke. Multidisciplinary management was administered successfully.

Conclusion: The presented case indicated that important complications, such as congestive heart failure and intraventricular thrombus are associated with peripartum cardiomyopathy. Because these complications are risk factors for developing a thromboembolic event, such as acute ischemic stroke which occurred in this reported case, timely and accurate identification of these complications is essential to achieve optimal outcome.

Keywords: Peripartum cardiomyopathy, Heart failure, Acute ischemic stroke

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