Pregnancy is associated with a hypercoagulable state due to relative decreases in protein S activity, stasis, and venous hypertension and predisposition to dissection with or without an underlying connective tissue disorder due to decrease in collagen synthesis. Hence, the appropriate anticoagulation management is important in pregnancy. Fetal mortality due to operation is considerably <100% mortality incurred by therapeutic abortion. This case report has shown once again that open heart operation is not a contraindication to pregnancy prolongation and it has been reported to be undertaken at any gestational age but it should be kept in mind that is best between 24 and 28 weeks' gestation, after the completion of organogenesis. Pump flow and mean arterial pressure during cardiopulmonary bypass seem to be the most important parameters that influence fetal oxygenation.

References


References