

Anesthesia in pregnancy with cyanotic heart disease

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Anesthetic management of pregnant patients with cyanotic heart disease is very challenging because of the severities of clinical conditions, complications and high maternal mortality rate. Effective team work should be organized for proper maternal care during antepartum, intrapartum and postpartum periods. If the mother faces the life-threatening situation, termination of pregnancy may be necessary. The antepartum care should aim to stabilize and optimize maternal conditions and close monitor fetal conditions. Vaginal delivery by low forceps extraction under epidural analgesia is a preferable procedure. For cesarean section, continuous epidural anesthesia is the anesthetic technique of choice due to less catecholamine release and better pain relief. If general anesthesia is used, high-dose narcotic technique is preferable to inhalation. Adequate analgesia should be provided postoperatively together with close monitoring of vital signs in case of heart failure.