

Key notes on: Cardiac Disease and Pregnancy

- Cardiac disease in pregnancy is a leading cause of maternal mortality in Australia
- Changing profile of cardiac disease in pregnancy more women with congenital heart disease are surviving to have children & increasing number of childbearing age women with ischaemic heart disease
- Pre-conception counselling should be offered to all women with cardiac disease
- Normal physiological adaptations of pregnancy can 'unmask' previously undiagnosed cardiac conditions
- Large range of cardiac conditions with variable effects on maternal and perinatal outcomes and cardiac status can change unpredictably
- Mechanical heart valves pose a significant risk and challenge regarding prevention of thrombosis and haemorrhage
- Some standard cardiac medications are contraindicated in pregnancy e.g. ACE inhibitors
- Multidisciplinary and collaborative management should be the aim for maternity care and include the woman and her partner in decision making
- Multidisciplinary planning for labour and birth should be done well in advance of term; mode of birth is
 usually guided by obstetric indication
- Most research has been about medical management little evidence to guide nursing and midwifery care

Key resources/recommended reading

Electronic references/Guidelines:

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