

PERIMORTEM CAESAREAN IN SEVERE ECLAMPSIA RESULTING IN CARDIAC ARREST

Nur Aini Binti Mustafa, 'Alia Fadhla Binti Adnan
Emergency and trauma department Kapit Hospital, Sarawak, Malaysia

Introduction

Eclampsia is a deadly situation for pregnant ladies. The management include arresting seizure and urgent delivery of baby. We present a case of eclampsia with status epilepticus complicated with cardiac arrest for which perimortem caesarean was performed.

Case description

37 year old G5P3 + 1A lady at 35 week 2 days with underlying chronic hypertension, maternal obesity and history of complete miscarriage in 2022 and perinatal death in 2018. She presented at our center with continuous seizure – unconscious, drooling of saliva with clenching of teeth and uprolling eye. BP was 235/133 with pulse rate 122 and saturation 70% under room air. Patient was put on high flow mask and nasal prong and placed on lateral position. IVI Magnesium Sulphate started but patient arrested. CPR started and subsequently intubated. Obstetrics team was called and perimortem caesarean section was decided. Baby was delivered well in emergency department. Patient achieved ROSC after delivery with 5 cycles of CPR as per ACLS protocol. Mother subsequently recovered and discharged well.

Discussion

Perimortem caesarean section is a rare intervention and performed in maternal cardiac arrest during pregnancy. Rate of maternal cardiac arrest about 1 in 30,000 pregnancies and perimortem caesarean section within 4 minutes of event is a key intervention in such case. Our case was complicated as it started with eclampsia but compounded with cardiac arrest.

Conclusion

Our case showed that perimortem caesarean would be indicated in the extreme case of status epilepticus resulting with severe hypoxia and cardiac arrest. Department has to be prepared for such possibilities as quick perimortem caesarean would save both baby and mother.

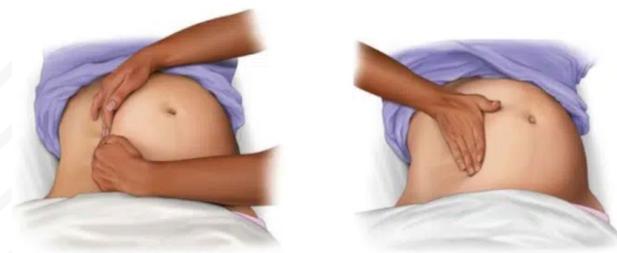


Fig1: Left uterine displacement.



Fig 2: 30° left lateral tilt position.

Reference

1. Lee CY, Kung SW. Perimortem caesarean section: A case report of an out-of-hospital arrest pregnant woman. World J Emerg Med. 2018;9(1):70-72. doi: 10.5847/wjem.j.1920-8642.2018.01.012. PMID: 29290900; PMCID: PMC571738.
2. Mathur, Deepak; Leong, Sng Ban. Perimortem caesarean section: Rethinking the resuscitation codes?. Journal of Obstetric Anaesthesia and Critical Care 3(1):p 35-36, Jan–Jun 2013. | DOI: 10.4103/2249-4472.114289