

Acute onset breathlessness in pregnancy : A rare cause identified

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Despite advances in treatment primary pulmonary hypertension continues to carry considerable maternal morbidity and mortality. We report a patient who was diagnosed with severe pulmonary hypertension of

unknown cause in the 32nd week of gestation. The patient had an emergency cesarean section due to fetal growth restriction with absent diastolic flow in umbilical artery. The postoperative period was uneventful and she was discharged on day 14 due to NICU stay of baby. This report adds to the amount of evidence that pregnancy in a patient with Idiopathic pulmonary hypertension may have a better outcome in hands of a multidisciplinary team.