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## Optimized maternofetal outcomes in a series of pregnant women with Ebstein anomaly- An emphasis on multidisciplinary approach

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### Introduction:

Ebstein anomaly is a rare congenital heart disease. It's a dysplastic abnormality of tricuspid valve where there is a downward displacement leading to tricuspid regurgitation and complete arterialisation of right ventricle. The aim of this paper is to address the maternal and perinatal outcomes of pregnancies with Ebstein anomaly in a tertiary centre.

### Case Description:

We report three cases of pregnancies with incidentally diagnosed Ebstein anomaly who presented to us at term gestation. All were acyanotic, no clubbing, no tachycardia, rest of examination was unremarkable. Two pregnancies were complicated by fetal growth restriction. Pre-eclampsia was seen in two of them, well controlled on medication. ECG and ECHO depicted Right bundle branch block (RBBB), right axis deviation and moderate-severe tricuspid regurgitation, ASD, dilatation of right heart. One patient developed pulmonary oedema in the woman with preeclampsia, another case developed supraventricular tachycardia (SVT) during labour. Both the cases were medically managed with the help of multidisciplinary team. Labour was closely monitored under graded epidural analgesia. Two women delivered vaginally, one set into spontaneous labour and the other required induction for severe preeclampsia. One underwent emergency caesarean for obstetric indication.

### Discussion:

Arrhythmias are more common in pregnancy with Ebstein anomaly due to

worsening of tricuspid regurgitation and maternal hypoxia which occurs as result of physiological changes in cardiovascular system. Two women developed pre- eclampsia which is commonly seen in cyanotic and chronic hypoxic state due to vascular endothelial damage. During labour epidural anaesthesia and euhydrated status is preferred to reduce maternal arrhythmias and congestive cardiac failure due to right-to-left shunt.

### Conclusion:

Pregnancy is well tolerated in women with Ebstein anomaly as in our series. Close monitoring of pregnancy by a multidisciplinary team optimizes the materno-fetal outcomes. Vaginal delivery is preferred and caesarean delivery is reserved for obstetric indications only.

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