Outcome of pregnancy after the prenatal diagnosis of isolated major congenital heart diseases in a tertiary center in Romania

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Objective and Methods

Objective
To analyse:
- cases with a diagnosis of isolated major congenital heart diseases (MCHDs) in terms of gestational age (GA) at the suspicion
- GA at the diagnosis
- the management and the outcome of the pregnancy

Methods
Retrospective analysis of cases with isolated MCHDs in a tertiary center from 2010 to 2016
*In 12 cases (60%), termination of pregnancy took place in or after the 18th week of gestation.
Results

In our center were diagnosed 35 cases of isolated MCHDs in over 13 hundred pregnancies, during the study period.

The time of positive diagnosis was 16+6 WA.

20 couples (57.14%) chose first and second trimester termination of pregnancy.

The time interval between the diagnosis and the termination procedure was 3.5 days (range: 1-7 days).

Most couples (18/20 - 90%) requested for repeated multidisciplinary counselling before termination.

Only one couple expressed the intention of engaging in a medical litigation for a delayed diagnosis.
Study group

Tetralogy of Fallot (TOF)
In our study group we had also 1 case of rhabdomyoma
Conclusion

• In our country many parents experience difficulties in coping with the severe prenatal diagnosis of MCHD
• Implementation of a uniform prenatal care including first-trimester cardiac screening could lead to an earlier accurate diagnosis in a reduced number of cases
• There is need for cost-analysis studies and ethics debates before changing health policies
• The additional minor risk due to medical second trimester termination and litigation must be balanced against incomplete counselling after FT suspicion and against the disadvantages of FT surgical terminations request