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Title: Case Series of CVT and its Outcome in Pregnancy.





ABSTRACT

Introduction: Cerebral Venous Thrombosis (CVT) is a rare but a life threatening disease in pregnancy. It has a varied clinical presentation and pathogenesis. It most often involves the superior sagittal sinus but may occur anywhere in the cerebral venous circulation. Pregnancy and puerperium are in itself a high-risk factor for its occurrence.

Aim: To assess the frequency of different clinical features, risk factors and prognostic outcome of patients diagnosed as CVT.

Materials and Methods: A hospital based observational study was conducted in the antenatal mothers in the Department of Obstetrics and Gynaecology in Theni Medical college and hospitals, Tamil Nadu. All cases of cerebrovascular accidents were followed and those diagnosed as CVT on the basis of Computed Tomogram (CT), Magnetic Resonance Imaging (MRI) and/or Magnetic Resonance Venogram (MRV) were included in the study, managed and followed till discharge from the hospital and at three months post-discharge. The varied symptomatic presentation of CVT in antenatal mothers were studied and followed up.

Case 1 19yr old Primi, 9 week gestation came to AN OPD with c/o headache, blurring of vision, diplopia and bulging of left eye for 1 week, Pt. vitals stable inv-normal, Ophthal (O) left papilledema with right eye early stage of edema, Neuro (O) To do MRI. And it was diagnosed as CVT. Pt. was started on anticoagulant switched over to Tab. Acitrom. APLA was positive Pt, was discharged with Tab. Prednisolone and Acitrom

Case 2 27 yrs G3P2L2, previous NVD,34wks, admitted in v/o of sever anaemia hb-7 and after evaluation was transfused with 1 PCV. During 2nd PCV transfusion Pt. complaints of inability to lift left UL and LL after getting physician and Neuro (O). Pt. was diagnosed with CVA and MRI was suggestive of CVT and similarly Pt. was found to be APLA positive.

Case 3 34 yrs, elderly primi, 38 weeks, was admitted with c/o of giddiness on and off for 1 week. After getting physician and Neuro(o) MRI was taken and diagnosed as CVT and started on Anticoagulants

Results: Out of total 6000 deliveries in the study period, we found four cases of antenatal CVT. The mean age of women presenting with CVT was 20 to 30 years. The most common presenting symptom was headache, hemiparesis, diplopia. The most common area of infarct was superior sagittal sinus (4/4, 100%). Mortality at discharge was zero. All 4 patient we're found to be APLA positive.

Conclusion: In CVT precise diagnosis is decisive and, based on the diagnosis timely and suitable therapy can be started which can reverse the disease process.

Is it time to do APLA screening also a routine diagnostic test for Antenatal mothers?

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