

*Salzburg Cleveland Clinic Seminar in Cardiac Surgery
November 10-16, 2024*

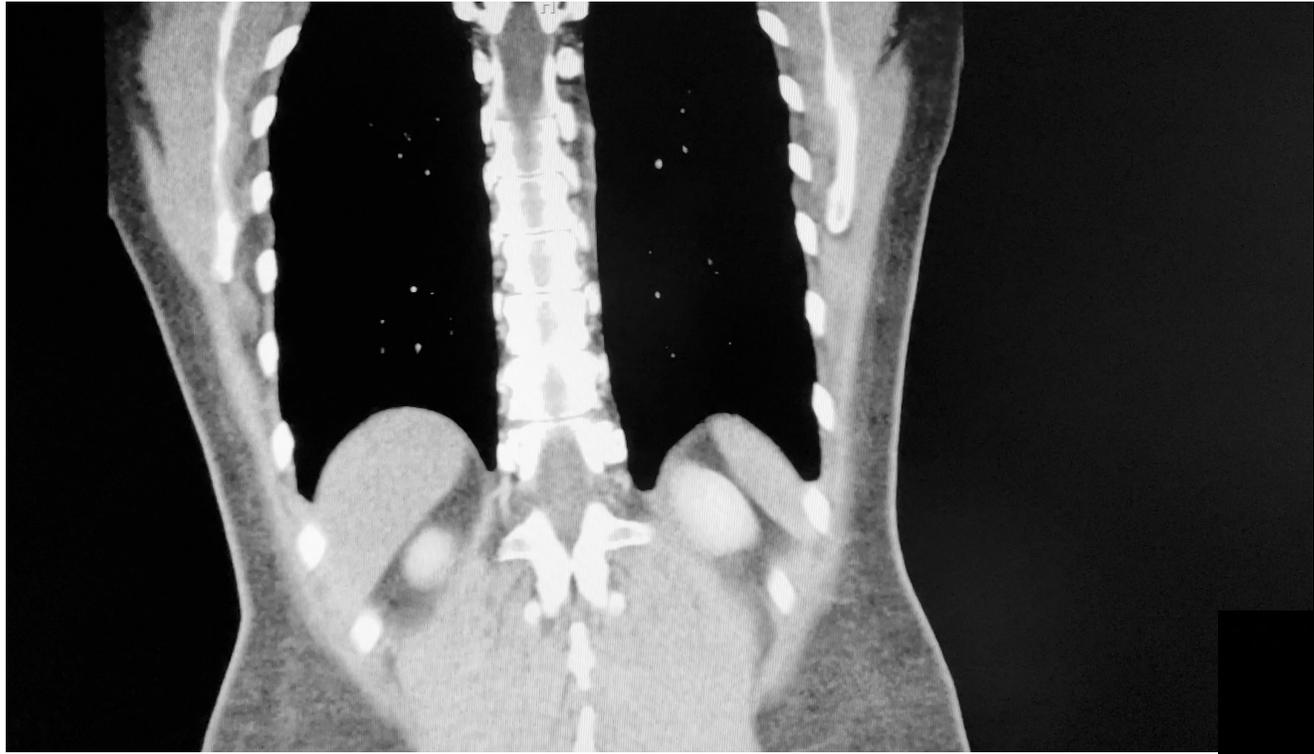
Acute aortic dissection in the postpartum period

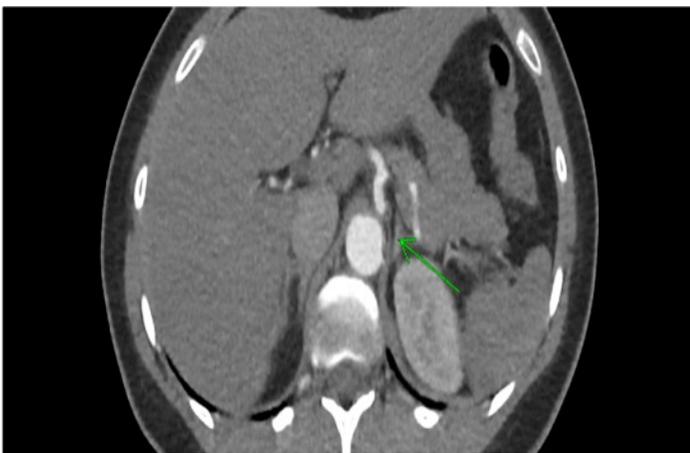
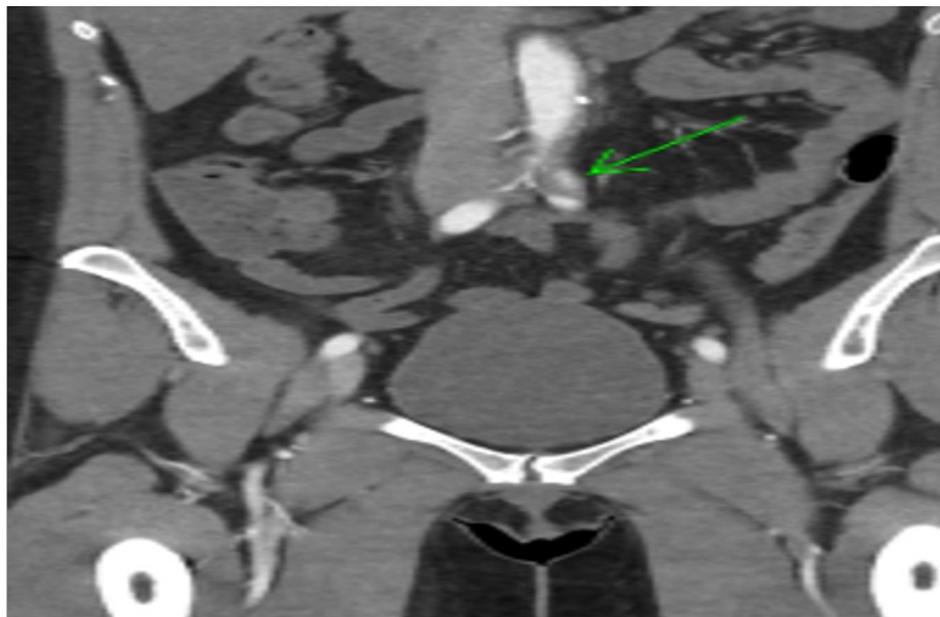
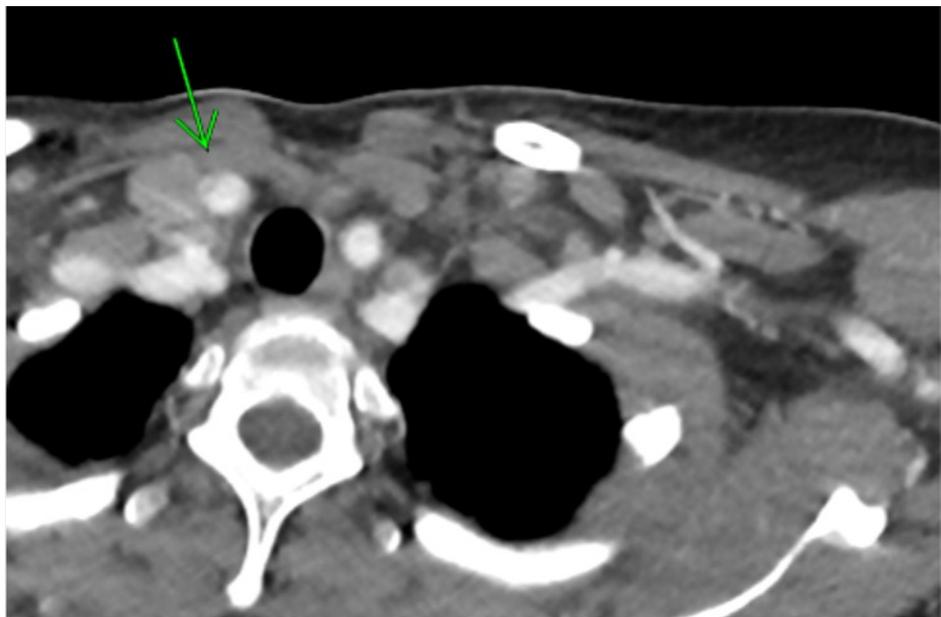
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Medical history

- 40yrs, hypertension (2015), AML (2014) in remission
- Neonatology dep.
- 18th POD → preemptive C-section for preeclampsia
- **Newly onset of acute back pain, nausea and vomiting, hypertension**

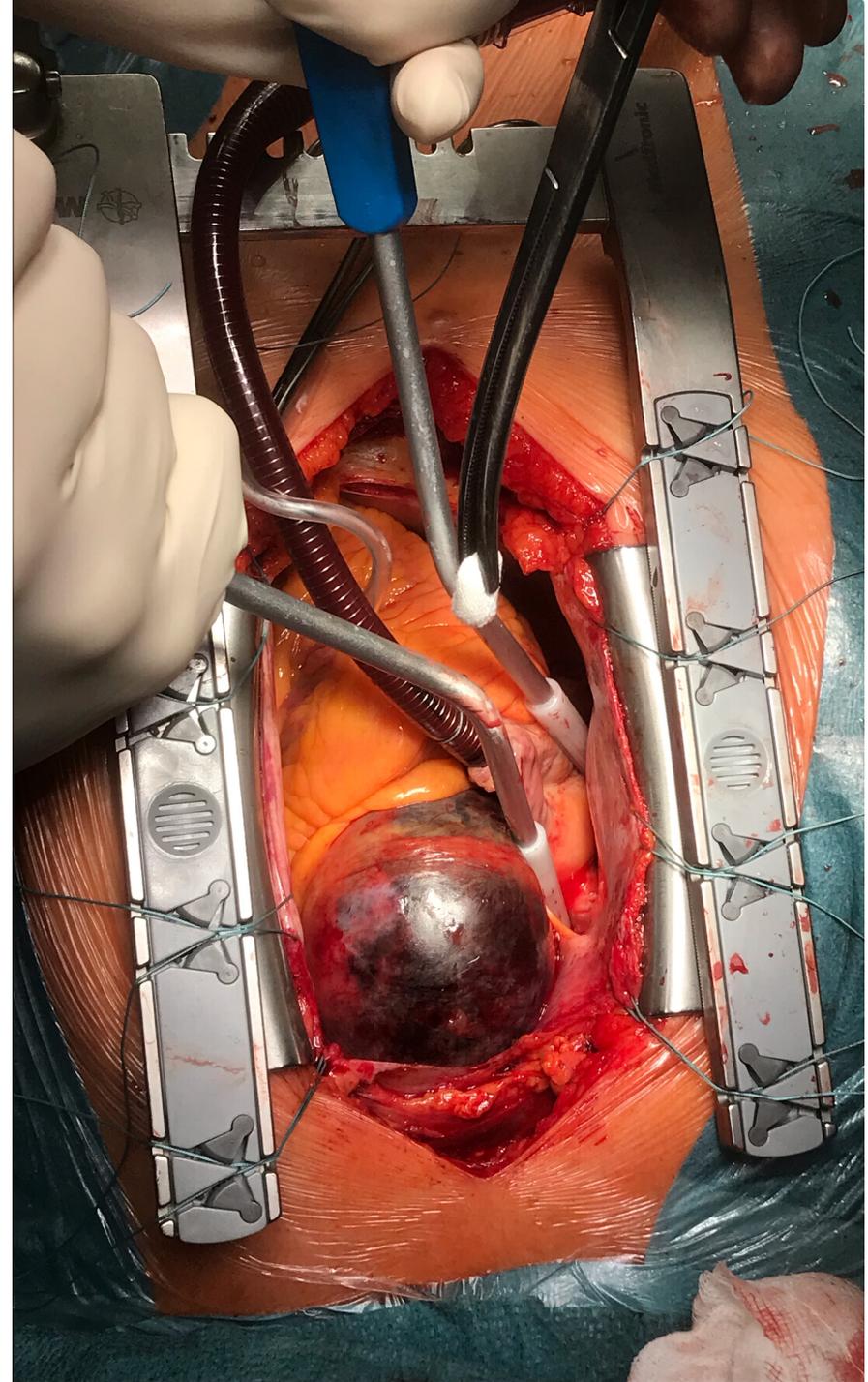
- **CTA confirms acute type A dissection**





Operation

- **Mech-Bentall**
- Samples on histology
- **Uncomplicated, packing, second - look closure**



Post-op

- Complicated post.op. course
- **17th POD** tamponade – drainage
- **26th POD** newly onset altered consciousness, GCS 3
- **Head CTA scan:** cerebral edema, midline shift, subdural hematoma, intracerebral hemorrhage
- Acute decompressive craniectomy - massive brain herniation
- Infaust prognosis
- **Exitus lethalis 20:30**



Histology

- **Aortic valve and aorta:** Degenerative changes in the aortic valve, dissected aortic wall with signs of moderate medial degeneration.
- **Brain tissue:** arteriovenous malformation can not be definitively confirmed or excluded.
- Genetic testing was recommended.

Conclusion

- Incidence of aortic dissection during pregnancy and postpartum
- Why?
- **Multidisciplinary cooperation!**

Thank you for your
attention.