

19. STROKE IN PREGNANCY AND POSTPARTUM



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Introduction. Stroke is a medical emergency that requires urgent care and treatment. As everyone, regardless of age, gender or health, can experience this condition, pregnant women can have it as well. In addition to major changes in their bodies during the pregnancy and the first weeks after birth, the health complications during that period may raise the risks of having a stroke.

Aim of study. The aim is to list and clear up the epidemiology, risk factors and other characteristics of the stroke in pregnancy and postpartum, as well as the methods of treatment.

Methods and materials. The information was selected and based on the articles found in online resources (NCIB, NIH, NHLBI etc.) using the following keywords: “pregnancy”, “stroke”, “risk factors”, “treatment”.

Results. The incidence of stroke in pregnant women is 30 in 100.000, about three times more than among non-pregnant ones. However, the risk of stroke in women with common pregnancy-related issues such as preeclampsia, can be up to six times higher. In addition to the percentage of maternal mortality caused by stroke, which is 7,4% (and it can be underestimated), pregnant women may face a possibility of having disabilities, thus dealing with difficulties in selfcare, childcare, personal and professional life. According to studies from Canada, the number of cases of maternal stroke between 2003 and 2016 became more frequent by 60%. The period with the highest risk of stroke in the last month of the pregnancy and the first six weeks puerperium. Besides the common risk factors that are present in the general public, there are conditions that occur during the pregnancy and are prone to causing stroke: preeclampsia, gestational diabetes, paradoxical cardioembolism, carotid artery dissection, coagulopathies and others. One of the major issues in this topic is the lack of trials in pregnant women and balancing the maternal and fetal health in investigating and treating stroke. Providing treatment to pregnant women who are at high risk of stroke is a challenge for doctors as some of the drugs (ACE inhibitors, statins, warfarin etc.), that are crucial for the general public, have a negative impact on the fetal development.

Conclusion. Stroke in pregnancy and postpartum became a more approached and a more discussed topic in recent years. Dealing with a pregnant woman, especially one with health conditions that may put her life at risk, requires a rigorous supervision, treatment, and collaboration between multiple specialists from different fields in order to keep her safe from further complications.