

15. RISK FACTORS OF ISCHEMIC STROKE IN PREGNANCY

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Introduction. Ischemic stroke during pregnancy is relatively rare, but when it occurs, the greatest risk is in the postpartum period, which requires immediate recognition and evaluation for acute management to prevent potential neurological sequelae.

Aim of study. This study aimed to analyze the etiology, epidemiology, risk factors of ischemic stroke associated with pregnancy, treatment and prevention methods.

Methods and materials. The information was selected based on the articles found in the online resource (PUBMED, NHLBI, HINARI etc.) using the key words: "risk factors", "pregnancy", "stroke".

Results. The incidence of stroke in pregnant women is 30 in 100.000, but this rate is approximately 3 times higher than stroke in young adults overall. There are a wide variety of underlying causes and risk factors, some that are common to both pregnant and non-pregnant women, and others that are unique to pregnancy. The main risk factors for ischemic stroke associated with pregnancy are: preeclampsia, eclampsia, gestational hypertension and migraine. According to the study from Maryland and Washington, preeclampsia and eclampsia were identified in women with stroke in 47% of cases. Other risk factors may be cardioembolism, postpartum angiopathy and postpartum cardiomyopathy, posterior reversible encephalopathy, hypercoagulability, diabetes mellitus and advanced maternal age, and smoking. Treatment of stroke during pregnancy is based on current recommendations for nonpregnant patients with stroke, assuming that the benefits of these treatments likely outweigh the risks. These decisions should be made with appropriate stroke and endovascular specialists, as well as obstetricians/gynecologists.

Conclusion. The risk of ischemic stroke increased with the number of risk factors, having an increased incidence of 22.6% but also a mortality rate of 2.7%. Surveillance and counseling of pregnant women, especially those with multiple risk factors, is crucial for preventing pregnancy-related ischemic stroke.