

International Meeting on

Clinical Case Reports

April 18-20, 2016 Dubai, UAE

Pulmonary edema (non cardiogenic) & ARDS secondary to amniotic fluid embolism following preterm delivery of IUFD: Case report

Vandita Kailas Patil¹, Kailas N Patil¹, Sayeed Mahmud Ali Reza¹, Jawaher Al Yazeedi¹, Shaji Varughese¹ and Ashwin Varghese²¹Buraimi Regional Referral Hospital, UAE²Christian Medical College, India

A 27 years old healthy female of 28 weeks pregnancy with history of low grade fever and dry cough for 1 day presented with intrauterine fetal death (IUFD). Following spontaneous preterm delivery of the dead fetus, within 3 hours, patient developed irritable cough, dyspnea, tachypnea, restlessness and cyanosis. She was put on face mask with O₂ flow of 10 L/min and was nebulized with salbutamol in the delivery suite but gradually desaturation of 76% occurred. As the condition was worsening patient was transferred to ICU. In ICU patient was intubated & put on ventilator immediately. Chest X-ray was showing bilateral infiltrates and ABG was showing P/F ratio of 55.6%. Pulmonary Capillary Wedge Pressure (PCWP) was not checked as pulmonary catheterization is not practiced in our ICU. Cardiogenic component of pulmonary edema was ruled out indirectly by history, ECG, echocardiography, central venous pressure and chest X-ray (heart shadow). She was diagnosed as a case of severe ARDS & non cardiogenic pulmonary edema due to amniotic fluid embolism. In course of management, maximum emphasis was given on lung protective ventilation and fluid, conservative strategy along with medical and other supportive management. On her 8th day on ventilator she was extubated and on 9th day, she was shifted to Maternity ward. On 14th day she was discharged from hospital. She came for follow up after 1 month of her discharge and was found to have no residual complication.

Biography

Vandita Kailas Patil has completed her MD, DGO from Grant Medical College, Bombay University, India & FMAS from World Laparoscopy Hospital, India. Presently she is working in Buraimi Hospital as Specialist in Obstetrics & Gynecology and she is also working as Focal Obstetrician for HIV, In-Charge for CPE activities in Obstetrics & Gynecology & contributing in preparing departmental protocols. She has done a course in "Assisted Reproductive Technology" at World Laparoscopy Hospital and Balaji Fertility & IVF Center, India and also did Advance USG course in Obstetrics & Gynecology in Chikitsa, Centre of excellence in USG, India.

drvandita_k@yahoo.com

Notes: