

Long-term Outcomes in Patients with Peripartum Cardiomyopathy and No Recovery of Ventricular Function

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PURPOSE

- Peripartum cardiomyopathy (PPCM) is an uncommon condition with variable and unpredictable outcomes.
- While recovery of ventricular function is the usual course, some PPCM patients will continue to have left ventricular dysfunction.
- Whether these patients experience worse outcomes is underreported and the subject of study in this report.

RESULTS

- The Utah PPCM Registry was queried for eligible patients age ≥ 18 years with confirmed diagnosis of PPCM:
 - new reduced left ventricular ejection fraction (LVEF) $< 45\%$
 - no known etiology
 - diagnosed in the last month of pregnancy up to the 5th postpartum month
- The absence of left ventricular recovery was defined as a best left ventricular ejection fraction still $< 50\%$.
- Outcomes of interest included survival and use of advanced therapies.

METHODS

- n=58 patients with PPCM.
- 22 patients (38%) had no cardiac recovery.
- Average age was 30 years and mean follow-up 3.8 years.
- At one year, 61% were on beta-blocker therapy and 50% were on ACEI.
- Survival and use of advanced therapies are shown below (Table).

CONCLUSIONS

- A significant number of PPCM patients with no recovery of cardiac function require advanced heart failure therapies.
- Yet, with appropriate and early intervention mortality can be minimized.
- Patients with PPCM and no recovery of cardiac function should be considered for advanced heart failure therapies to avoid adverse outcomes.

Outcome	n, (%)
Alive	21 (95.4)
Death*	1 (4.5)
Implantable cardiac defibrillator	9 (40.9)
Ventricular passive restraint device	1 (4.5)
Left ventricular assist device	2 (9.1)
Heart transplantation	3 (13.6)

* Death occurred following a subsequent pregnancy