Critical Care Considerations in Pregnant Patients with Ebstein's Anomaly: A Narrative Review

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Abstract

Purpose: This non-systematic review and accompanying case series aim to provide an overview of the principles, challenges, and physiological considerations involved in managing pregnant patients with Ebstein's anomaly in the intensive care setting.

Methods: A detailed literature search was conducted using PubMed and Google Scholar to identify case reports, series, and clinical guidelines relevant to the critical care management of parturients with Ebstein's anomaly. In view of the limited strength and availability of direct evidence, articles addressing adult congenital heart disease (ACHD), congenital tricuspid valve abnormalities, and right-sided cardiac lesions during pregnancy were also included to provide a comprehensive perspective on the clinical challenges and management principles in this population. Emphasis was placed on the pathophysiological implications of tricuspid valve malformation, right ventricular dysfunction, cyanosis, and arrhythmogenic potential during the peripartum period.

Review: The article synthesizes current evidence on hemodynamic, respiratory, sepsis, and arrhythmia management strategies in this patient population, while also providing a brief pathophysiological rationale for each aspect of care.

Conclusion: In addition to general critical care goals, parturients with Ebstein's anomaly require specific hemodynamic, ventilatory, and arrhythmia management strategies that can significantly influence maternal and fetal outcomes. Further research is much warranted to establish standardized protocols and improve evidence-based guidance for this rare but high-risk population.