Abstract

BACKGROUND. Transfusion-related acute lung injury (TRALI) is a syndrome of respiratory distress caused by blood transfusion. The Food and Drug Administration (FDA) places TRALI as the main cause of death associated with transfusion.

OBJECTIVE. The present clinical case is reported, treated in a Third Level Hospital and a search was carried out to update the topic on the management of TRALI in a pregnant patient.

CLINICAL CASE. A 35-year-old woman with a pregnancy of 33.2 weeks of gestation, placental accreta, with a threat of preterm delivery and severe anemia that required hemotransfusion of erythrocyte concentrate, subsequently with a respiratory distress syndrome clinic. TRALI was diagnosed, it was managed in intensive therapy with diuretic and inotropic, it evolved clinically to the improvement, until its total improvement, Placental accreta was corroborated, cystoscopy was performed without data on bladder invasion. Subsequently, he presented uterine activity and premature rupture of membranes, caesarean section and obstetric hysterectomy were performed. The patient evolved satisfactorily and left without incident.

CONCLUSIONS There are very few documented reports of TRALI in the period prior to delivery. Pregnant women are disadvantaged by the physiological changes of pregnancy such as decreased residual volume and respiratory reserve capacity, decreased capillary colidosidotic pressure. Therefore, the diagnosis of TRALI is important to manage timely management. The management of respiratory failure in TRALI must be done multidisciplinary way.

KEY WORDS: TRALI, Acute lung injury, transfusion, pregnancy, transfusion adverse reactions.

Biography

EL Dr. Alexander de Jesús Rafaelano Miranda

Lieutenant Resident of Gynecology and Obstetrics, Naval Medical Center, Mexico City

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Biography

EL Dr. He is a graduate of the naval medical school of the naval university of the Secretary of Navy of Mexico. He is currently A Lieutenant Resident of Gynecology and Obstetrics at the Naval Medical Center in Mexico City. It presents the clinical case in which he was involved as a poarte of the multidisciplinary team in the attention of this patient, as well as the review of the literature for the management of these patients in the gestation period.

Published papers


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