DVT in Pregnancy; an underestimated calamity!

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Abstract:
DVT in pregnancy is a real world problem, which is a highly underestimated calamity. In 2018 the American Society of Hematology published guidelines “venous thromboembolism (TED) in the context of pregnancy”.

- Venous TED is one of the major causes of direct maternal deaths. Those who survive suffer significant morbidity
- Pregnancy is a known hyper-coagulable state, with a five-fold risk of venous thromboembolism over the non-pregnant condition
- 0.5 - 3 of every 1000 pregnancies are complicated by symptomatic deep venous thrombosis (DVT).
- Mortality rate as high as 15% (!)
- 25% may develop pulmonary embolism (PE),
- 40 - 60% of Pulmonary Embolism (PE) occurs after delivery
- PE is the major non-obstetric cause of maternal mortality - 2/100,000 pregnancies

In this talk we will cover all aspects, from incidence, pathophysiology, diagnostics, treatment and management options, special procedures and complications.

Biography:
Otmar RM Wikkeling, MD, MBA, CMIO. Is a vascular surgeon with special interest in lymphedema and deep venous diseases. As of the one of founding fathers of one of the four specialized centers in this pathology in the Netherlands, this subject very dear to him. A other specialty is data-driven care.

Recent Publications:


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