

MICRO-EMBOLI SECONDARY TO DVT CAUSING OXYGEN DESATURATION IN COVID-19 IN PREGNANCY

T. Senevirathne¹, T. Vidanapathirana¹, S. Srisubakaran¹, P. De Silva¹
Colombo North Teaching Hospital Ragama, Sri Lanka

Objective

- We report a case of SARS-COV2 with multi-system involvement discussing approaches and challenges.

Case report

- 22yr, healthy, primipara presenting at 34wks with fever, headache, mild dyspnoea without cough or anosmia. Examination normal except for few lung basal crackles
- Septic screening elevated with positive COVID-19 swab.
- Developed tachypnoea and dyspnoea (SpO₂=96%).
- Performed caesarean delivery under spinal anaesthesia
- At ICU, she developed septic shock and managed.
- Concomitant Urosepsis was diagnosed and treated.
- Once septic shock was on course for resolution, she required high-flow oxygen therapy on the postpartum 3rd day (SpO₂=94%). Serial chest imaging (x-rays, HRCT) didn't show deterioration of pneumonic consolidation accounting for desaturation.
- Venous duplex scan on the 4th day showed evidence of bilateral femoral DVT with a negative CTPA study. suspicion of micro pulmonary embolism was confirmed, hence started on therapeutic Enoxaparin (1mg/kg/day, twice daily).

- Dexamethasone 4mg per day was started on the 5th day. DVT didn't progress further. Enoxaparin was gradually bridged with warfarin to keep INR at 2.5.
- Following 22 days of inward care, she was discharged on warfarin along with the baby

Discussion

- This highlights the importance of recognising the unpredictable but high chance of deterioration of a SARS-COV2 in pregnancy and resorting to early delivery when haemodynamics are stable and a chance to go for less complicated delivery. Continuing the pregnancy would have led to adverse maternal and fetal outcomes.
- DVT, despite prophylactic enoxaparin, indicate the need for higher doses early when it comes to pregnancy. Commencement of steroids in the background of urosepsis was a dilemma, and we waited till signs and inflammatory biomarkers started declining.
- This patient was managed by a team involving Senior Obstetrician, Physician, Respiratory Physician, Intensivist, Radiologist etc, using their knowledge and experiences.

Conclusion

Suspicion of micro-pulmonary embolization as a cause of oxygen desaturation is important in managing SARS-COV2 infection in pregnancy.