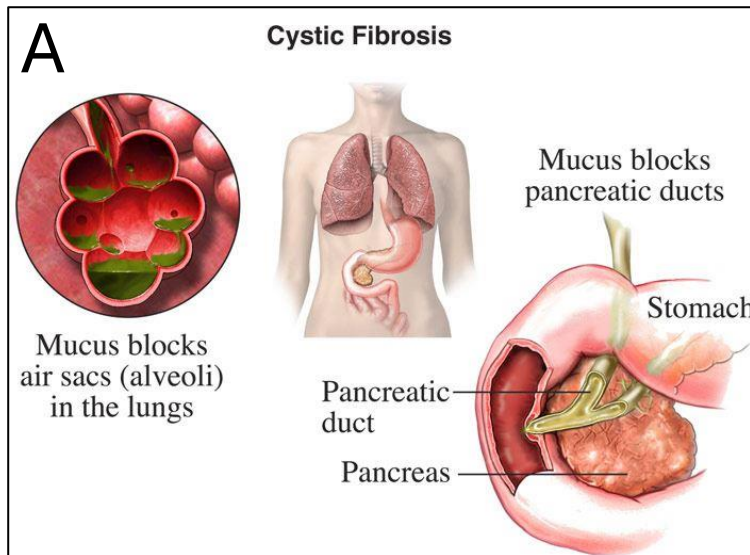


Objective: This case report highlights the complexities and challenges of managing pregnancy in a woman with cystic fibrosis (CF) who has undergone lung transplant. It underscores the need for careful multidisciplinary coordination in managing such high-risk pregnancies, and the unique considerations required for optimizing maternal and fetal outcomes.

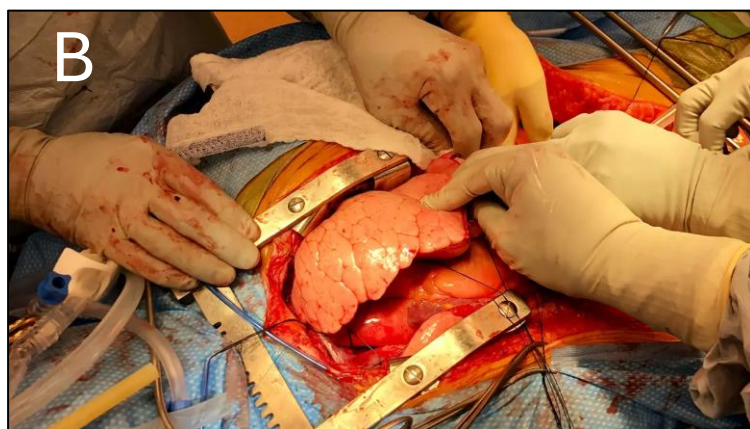
Case Report: A 31-year-old woman, G5P0 with cystic fibrosis and lung transplantation presented for antenatal care at 15 weeks of gestation. She had undergone bilateral lung transplant 6 years prior due to end-stage pulmonary disease associated with CF. Post-transplant, she was maintained on immunosuppressive therapy, including Tacrolimus, Azathioprine, and Prednisolone.

She underwent 5 IVF cycles for current conception and Preimplantation Genetic Diagnosis (PGD) to confirm the embryo was not affected. The patient was closely monitored by a multidisciplinary team, including obstetrics – maternal fetal medicine, pulmonology, and neonatology; and managed for potential risks of preterm labor, respiratory compromise, and rejection of the transplanted lungs. She required frequent obstetric ultrasounds, pulmonary assessments, with adjustments to her medications to minimize the risk of infection and rejection while safeguarding fetal development. Her blood pressure, renal function, and glucose levels were closely monitored due to the side effects of immunosuppressants. Lung function remained stable, however she developed Pulmonary Embolism (PE) managed with Enoxaparin, hypertension, and renal impairment with Chronic Kidney Disease (CKD) stage 1.

Patient was followed up by tertiary centre and birthed by emergency Caesarean Section at 35 weeks.



Cystic Fibrosis | Lung and Thoracic Treatment in New Jersey



https://www.medpagetoday.com/pulmonology/generalpulmonary/91706

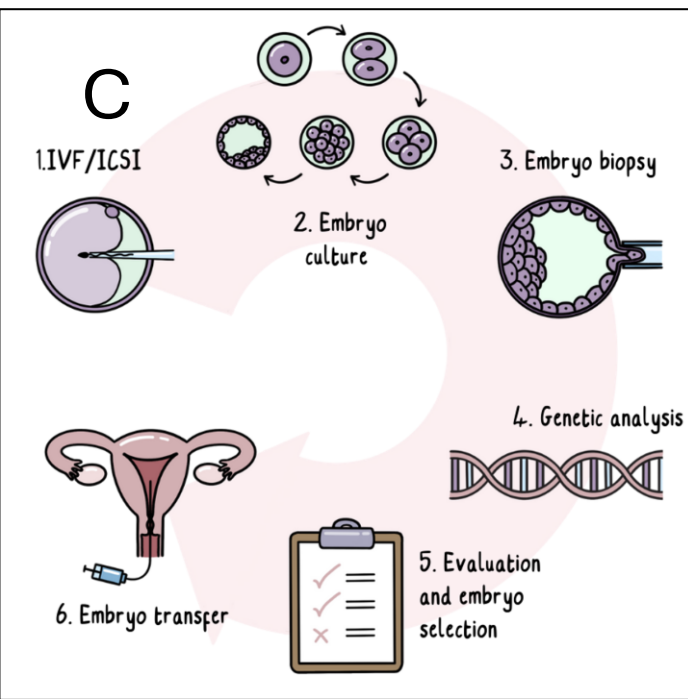
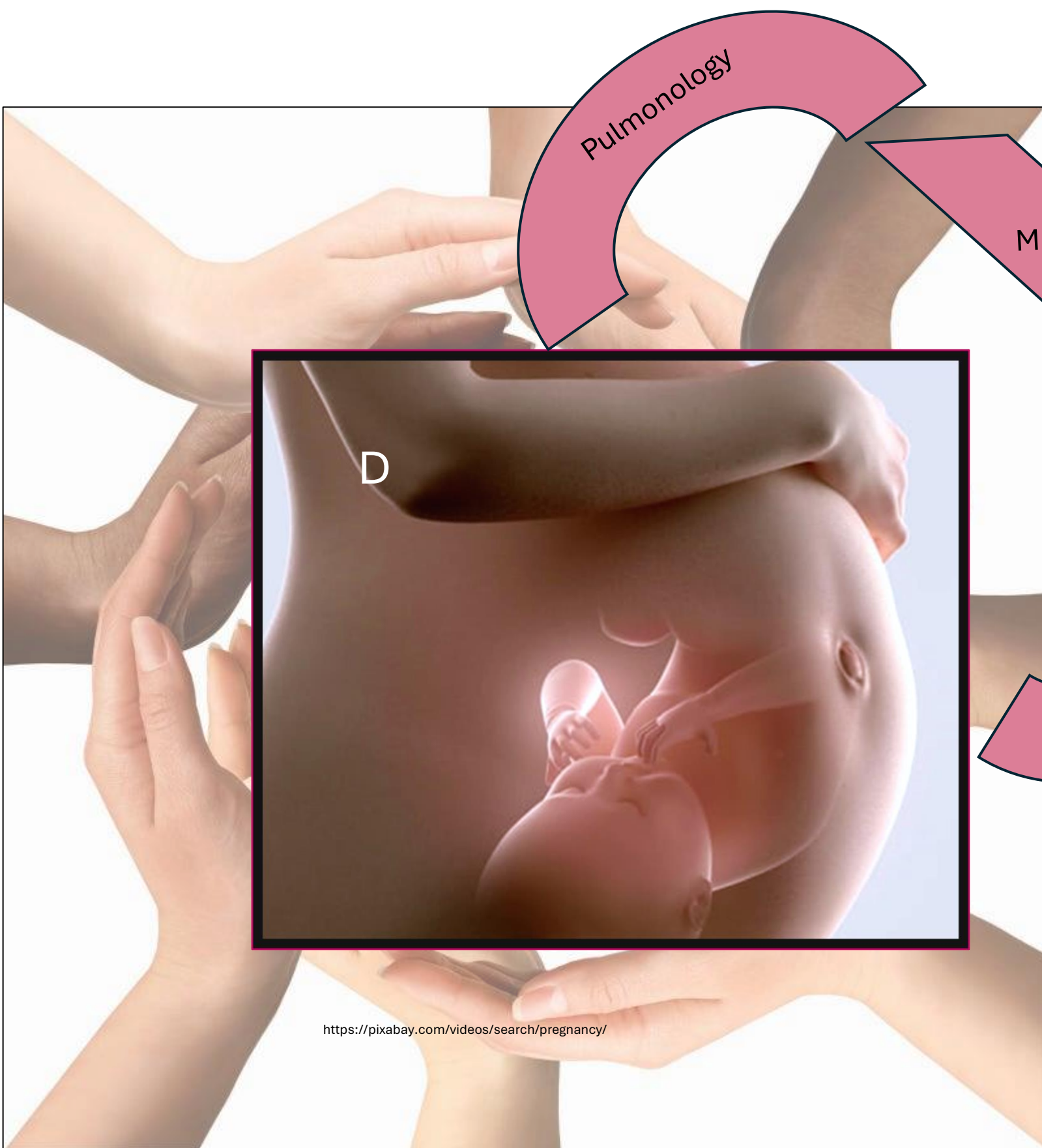


Image credit: @gynotus



https://pivaboy.com/videos/search/pregnancy/



https://www.parents.com/health/parents-news-now/for-breech-babies-c-section-is-safer/

Time Collected	06/11	14/04	08/21	08/08	11/10	23/18
Date Collected	21/04/25	21/04/25	21/04/25	21/04/25	21/04/25	23/04/25
Date Registered	01/14	01/17	01/11	01/14	01/17	01/18
Date Registered	21/04/25	21/04/25	21/04/25	21/04/25	21/04/25	23/04/25
Reg. Officer	2023	2023	2023	2023	2023	2023
Ref. Officer	0104/25-2-0000	0104/25-2-0000	0104/25-2-0000	0104/25-2-0000	0104/25-2-0000	0104/25-2-0000
Consultant	0104/25-2-0000	0104/25-2-0000	0104/25-2-0000	0104/25-2-0000	0104/25-2-0000	0104/25-2-0000
Lab No	230101002	230101002	230101002	230101002	230101002	230101002
Specimen Type	Blood	Blood	Blood	Blood	Blood	Blood
Units						
Ref Range						
Haemoglobin	106	102	93	78	77	91
White Cell Count	12.9	14.1	15.9	14.8	15.1	15.4
Platelets	179	174	179	194	204	189
Haematocrit	0.32	0.31	0.29	0.24	0.24	0.27
MCH	33.4	33.2	33.0	34.1	33.2	32.6
Red Cell Count	3.17	3.07	2.82	2.29	2.32	2.79
MCV	102	102	102	104	104	98
Neutrophils	10.90	13.08	13.91	12.51	12.85	13.97
Lymphocytes	0.97	0.49	0.70	1.08	1.09	0.61
Monocytes	0.90	0.51	1.29	1.12	1.09	0.77
Eosinophils	0.09	0.00	0.00	0.04	0.05	0.00
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