

Category : **Cardiovascular: other**

## **A314 - Peripartum hypertensive disorders: a sub-cohort outcome analysis**

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### **Introduction:**

The Hypertensive Disorders of Pregnancy (HDP), including preeclampsia/eclampsia and Hemolysis Elevated Liver Enzymes and Low Platelets (HELLP) syndrome are the most frequent nonhemorrhagic diagnoses requiring Intensive Care Unit (ICU) admission in peripartum women. Data regarding factors predicting poor outcome in these patients is scarce.

### **Methods:**

We analyzed a cohort of pregnant and postpartum women admitted to a tertiary ICU between January 2012 and January 2023. A sub-cohort of patients diagnosed with HDP was retrospectively selected. Main objective was to identify ICU length-of-stay (LoS) predictors. We used t-student test or pearson correlation coefficient to identify significant associations between independent variables and LoS. A multiple linear regression model with selected variables was used to predict LoS.

### **Results:**

A total of 49 patients were included, mean age was  $32.51 \pm 7.0$  years. Mean LoS was  $2.5 \pm 2.5$  days. Mean SOFA and SAPS II at admission were  $3.0 \pm 2.4$  and  $17.0 \pm 9.4$ , respectively. We observed 36 (73.5%) cesarean deliveries and 37 (75.5%) preterm births. 16 (32.7%) patients had two or more HDP diagnosis. Preeclampsia was observed in 35 patients (71.4%), HELLP syndrome in 24 (49.0%) and eclampsia in 6 (12.2%). In a multiple linear regression, coagulopathy ( $B=11.83$ ,  $t=5.22$ ,  $p=0.006$ ), need for Invasive Mechanical Ventilation (IMV) ( $B=10.09$ ,  $t=3.92$ ,  $p=0.017$ ) and Gamma-Glutamyl Transferase (GGT) values at admission ( $B=0.035$ ,  $t=3.23$ ,  $p=0.032$ ) were independent predictors of LoS.

### **Conclusion:**

To the best of our knowledge, this is the first study to evaluate predictors of outcome in HDP patients. Our analysis suggests that specific complications, namely acute respiratory failure requiring IMV and coagulopathy may have an impact on these patients' outcome. Although these results need further confirmation with prospective studies, our data can help to predict morbidity in critically ill peripartum women with HDP.