

Pregnancy, delivery and postpartum care

1.1 Before Pregnancy



WHAT IS RECOMMENDED

- Address the issue of pregnancy in both male and female Marfan syndrome (MFS) patients of childbearing age in a systematic manner to inform them of the options of prenatal/pre-implantation diagnostics. Inform women as well about specific management and care recommendations - also include the optimal conditions of follow-up and a written delivery plan.
- As soon as a pregnancy is being considered by someone suspected of having MFS, refer him and/or her to a specialized centre, if this has not already been done, for a full assessment and pre-pregnancy counselling.
- Plan the pregnancy in collaboration with the specialized centre.
- Assess the risk of aortic dissection before pregnancy by measuring the aortic diameter.
- <40 mm: pregnancy allowed.
- 40-45 mm: pregnancy allowed on a case by case basis.
- >45 mm: contra-indication for pregnancy with limited evidence. This aortic diameter may warrant prior surgery.
- No data is available on the effect of hormonal procedures (IVF). The same thresholds as for pregnancy (contra-indicated when ARD >45 mm) should be used.