Pregnancy, delivery and postpartum care

1.3 Delivery

**WHAT IS RECOMMENDED**

- Assess the risk of aortic dissection before delivery based on the aortic diameter.
- <40mm: vaginal delivery. Shorten the duration of stage 2 of labour with vacuum extractors, etc.
- 40-45 mm: delivery on a case by case basis (contact the expert centre).
- >45 mm: Caesarean section and plan the delivery by limiting the duration of the third trimester, the period of maximum risk.
- A tailored delivery should be formalized. Different factors should be taken into account: distance of home to hospital, aortic diameter, etc... Labour should be limited to a minimum.
- Adequate epidural anesthesia should be performed with caution, considering dural leakage and in some cases dose adjustment.

**WHAT YOU SHOULD NOT DO**

- Administer an epidural without first checking the condition of the spine (scoliosis, spondylolisthesis, dural ectasia).
- Stop treatment with β-blockers.
- Prescribe beta-mimetics.