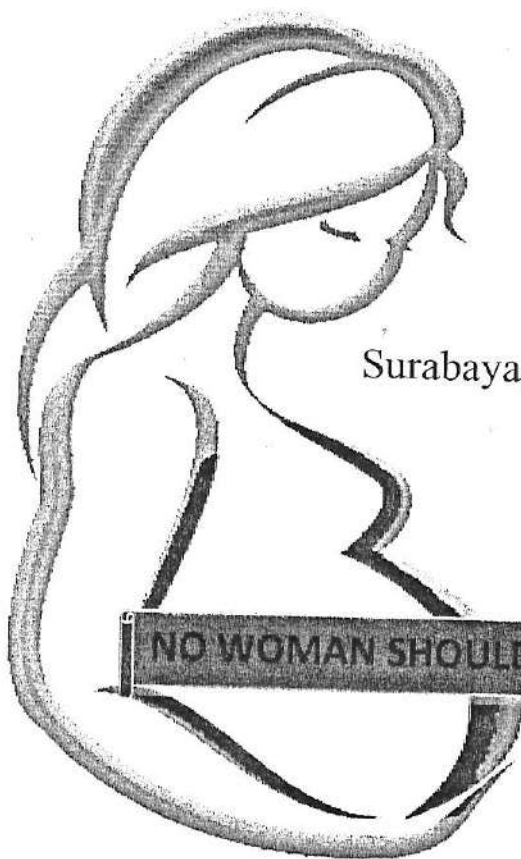


INTERNATIONAL SEMINAR ON INNOVATIONS TOWARDS



Surabaya, May 12 – 13, 2018

NO WOMAN SHOULD DIE WHILE GIVING

Faculty of Medicine University Airlangga in Cooperation with
POGI, IDI and Dr Soetomo General Hospital

Website : isitzpmd.com, E-mail: isitz.pmd@gmail.com



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Report from Chairman ISITZ-BMD

Pertama - tama kami ucapkan terima kasih atas peluang yang diberikan oleh Dekanat untuk menyelenggarakan satu seminar International untuk membantu upaya akselerasi upaya penurunan kematian maternal di Surabaya, Jawa Timur dan Indonesia.

Pada kesempatan ini kami mengundang 10 Fakultas Kedokteran di Indonesia, 3 Pembicara Asing, Dinas Kesehatan dan jajarannya dan Organisasi Profesi dan NGO (Non Government Organizing) di samping pemerhati dan penggiat upaya ini.

Diharapkan dengan adanya seminar ini terformulasi *plan of action* penguatan kontribusi Fakultas Kedokteran, pemilihan inovasi yang layak dilakukan di Surabaya, Jawa Timur dan Indonesia.

Tak lupa juga kami ucapkan terima kasih kepada peserta PPDS, Peserta didik Program magister IKR (Ilmu Kesehatan Reproduksi) dan para sekretaris dan pihak -pihak lainnya yang tidak kami sebutkan atas terselenggaranya seminar ini dengan baik.

Kami mohon maaf bila ada yg kurang berkenan dalam acara ini.

Wassalam

Ketua Pertama : Dr. dr. Ernawati.,SpOG - K

Ketua Kedua : Dr. dr. Lestari

Pembina:

Prof. Dr. Budi Santoso, dr., SpOG (K)
Dr. Hermanto Tri Juwono, dr., SpOG (K)
Dr. dr. Agus Sulistyono, dr., SpOG (K)
Dr. dr. Brahmata Askandar, dr., SpOG (K)
Baksono Winardi, dr., SpOG (K)
Poedjo Hartono, dr., SpOG (K)

Ketua:

Dr. dr. Ernawati, dr., SpOG (K)
Dr. dr. Lestari

Wakil Ketua:

Hanifah Erlin, dr., SpOG
Nareswari I. Cininta, dr., SpOG

Bendahara:

Rizki Pranadyan, dr., SpOG

Ilmiah:

M. Yusuf, dr., SpOG
Budi Wicaksono, dr., SpOG (K)
M. Ilham Aldika Akbar, dr., SpOG (K)

Pelaksana harian:

Rozi Aditya, dr., SpOG
Manggala PW, dr., SpOG
Khanisyah Erza dr., SpOG

Sekretariat: Pitriyah, Sondeany Vicky D.B, Lusiana
Mulyani, Nur Ilhaini, dr

CHARACTERISTIC AND REFERRAL SYSTEM
ANALYSIS ON MATERNAL MORTALITY CAUSED
BY CARDIOVASCULAR DISEASE IN DR. SOETOMO
HOSPITAL ON JANUARY-AUGUST, 2017

Cininta NI *, Sulistyono A., Aditiawarman, Gumialr KE,
Wardhana MP, Aryananda RA, Aldika MI, Wicaksono B.,
Ernawati E., Hermanto TJ., Dachlan EG, Abdullah N.

Maternal Fetal Medicine Division, Obstetric &
Gynecologic department,

dr. Soetomo hospital, Surabaya

Telephone: +6281233721937, email:

nareswari_cininta@yahoo.com

ABSTRACT

From 2012-2017, maternal cardiovascular disease has become the third top cause of maternal mortality in East Java, Indonesia. The incidence of maternal mortality caused by cardiovascular disease increase from 6.7% on 2012 to 23.91% on 2017 as the highest number during these five years. This is a descriptive study using medical record and aims to analyze the characteristics of mortality cases caused by cardiovascular disease during January-August 2017 in dr. Soetomo hospital, Surabaya, resulted with the high underdiagnosed and late referral cases.

Keywords: maternal, mortality, cardiovascular disease, referral

Introduction : Maternal mortality rate (MMR) in Indonesia declines during 1991 to 2007, from 390 to 228. However, on 2012 there was significant increase to 359 maternal

deaths per 100,000 live births and decreased to 305 per 100,000 live births on 2015. The most cause of maternal mortality are preeclampsia and postpartum hemorrhage. Cardiovascular disease (CVD) is an emerging cause of maternal mortality lately. Dr. Soetomo hospital as the main referral centre in East Java has a high MMR with cardiovascular disease becoming the third top cause of maternal mortality.

Methods : We collected secondary data from medical records in dr. Soetomo hospital during January until August 2017. We analyzed the patient characteristic, time of diagnosis, types of cardiovascular disease, duration from referral until death of pregnancy with cardiovascular disease.

Results : During January-August 2017 there were 11 maternal deaths resulted from cardiovascular disease, which is 23,91% of total maternal deaths. The average maternal age were 28.28 years old. All of them were referral case, 45% from Surabaya and 55% from outside Surabaya. 9 cases (81.81%) were referred antepartum, only 2 cases (18.18%) were referred at the postpartum period. The cases varied from primigravida (9%), second pregnancy (73%) and multigravida (18%). The mean gestational age at the first diagnosis was 32 weeks and none were diagnosed preconceptionally. 5 cases (45.45%) were patients with undiagnosed congenital heart disease, while the rest were acquired heart disease related to hypertensive disorder. The average time from referral until death were 3 days with the main cause of death were cardiogenic shock followed by sepsis.

Discussion : Maternal mortality related to CVD in dr. Soetomo hospital during January-August 2017 were referral cases with all cases diagnosed antenatally. Half of the cases were congenital heart disease that should be diagnosed since childhood, therefore could be treated before pregnancy. Most of the cases were diagnosed at the third trimester and the fact that death occurred on 3 days after referral showed a poor referral system.

Conclusion : Death in pregnancy related with CVD has a spectrum of cardiac conditions dominated with cardiomyopathy related to hypertensive disorder in pregnancy. This review indicated that none of the cases had a known diagnosis of CVD prior to death, Most women who died had presented to care with symptoms either during pregnancy or shortly after childbirth. Half of the deaths were preventable if heart disease (especially congenital heart disease) had been included in the differential diagnosis. The overlap between normal symptoms of pregnancy and due to cardiac disease, specifically shortness of breath, fatigue and swelling have been the main reason of the underdiagnosed of this case. Counseling of women with known or suspected CVD should start before pregnancy and include genetic aspects. Women with high risk should be managed in specialized Centre, by interdisciplinary teams and a fetal echocardiography screening should be commenced starting week 13

Keywords : maternal, mortality, cardiovascular disease, referral system