**CLINICAL PROFILE AND OUTCOMES OF PREGNANT PATIENTS WITH CONGENITAL HEART DISEASE AT THE UNIVERSITY OF THE PHILIPPINES-PHILIPPINE GENERAL HOSPITAL (UP-PGH)**

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Despite advances in the management of congenital heart diseases (CHD), in a developing nation like the Philippines, most CHD patients are unable to afford proper treatment. If a CHD patient desires children then greater problems may arise during pregnancy. This is a cross-sectional retrospective study of all admitted pregnant patients with congenital heart disease diagnosed by 2dechocardiography in our institution from July 2009–October 2011. Data on demographics, type of congenital lesion, common medications, maternal complications and pregnancy outcomes were gathered.44 cases of CHD in pregnancy were included. The median age of patients was 24 years old and median age of gestation was 37 weeks. The most common reason for consult was labor (90%) with 25% of them being in preterm labor. 50% noted onset or worsening of failure symptoms during pregnancy. The most common congenital lesions encountered were atrial septal secundum defects (32%) and patent ductus arteriosus (20%). Digoxin was the most frequently prescribed drug (27%) and infective endocarditis prophylaxis given 55% of the time. Assisted vaginal (41%) was the most common manner of delivery with epidural route (82%) for anesthesia. Maternal complications occurred in 9, preterm birth in 26% and small for gestational age (SGA) babies in 33%, majority of them having severe pulmonary artery pressures. Congenital heart disease with higher pulmonary pressures during pregnancy may prove to have the greater risk adverse outcomes. Importance of patient education is imperative in the prevention of pregnancy in CHD patients with severe pulmonary hypertension.