



South Wales and South West
**Congenital Heart
Disease Network**

Resources for Obstetricians for Women with Congenital Heart Disease who are pregnant

Sheena Vernon Lead nurse
SWSW CHD Network
2020

The CHD Standards 2016

- The national CHD standards for patients with congenital heart disease were produced in order to standardise care for patients with CHD nationally
- One of the standards was to develop a network approach to CHD care
- Another looked at pregnancy and contraception
- As a network we have a number of resources which you may find useful

The CHD Standards 2016

A – **The Network Approach**

- B – Staffing and skills
- C – Facilities
- D – Interdependencies
- E – Training and education
- F – Organisation, governance and audit
- G – Research
- H – Communication with patients
- I – Transition

J – **Pregnancy and contraception**

- K – Fetal diagnosis
- L – Palliative care and bereavement
- M – Dental



www.swswchd.co.uk

- Resources for obstetricians and cardiologists who are caring for pregnant women with congenital heart disease
- They can be found on www.swswchd.co.uk
- **Professional** / Clinical information/Pregnancy
- **Patient pathways**/Adults/pregnancy pathway



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Welcome to the Congenital Heart Disease Network South Wales and South West

We proudly support over 6,500 children and 8,000 adults with a congenital heart condition.

Read More



Babies and Children

Teenagers/Young

Adults

Resources for professionals

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Pregnancy

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In this section, you will find clinical information (guidelines, protocols and toolkits) relevant to Pregnancy.

If you have any suggestions for further documents to be added, please email: Sheena.Vernon@uhbristol.nhs.uk

Cardiac antenatal clinic

Cardiac antenatal clinic

Pregnancy places a unique stress upon the heart and women with cardiac disease require specialist advice regarding family planning, and specialist supervision throughout pregnancy, delivery and post-partum.

Because of the increasing number of women of child-bearing age with congenital heart disease (CHD) entering adulthood there are now increasing numbers of patients with CHD becoming pregnant. Two-thirds of patients seen in the Bristol antenatal clinic have CHD and managing the interaction between their often complex hearts and the changes during pregnancy and childbirth is challenging. The service also sees women with acquired heart disease and inherited cardiac conditions.



The Royal College of Obstetricians and Gynaecologists (RCOG), European Society of Cardiology (ESC) and MBRRACE-UK: Mothers and Babies: Reducing Risk through Audits and Confidential Enquiries across the UK recommend that pregnant women with heart disease are seen in joint clinics, where each patient is reviewed by a multi-disciplinary team consisting of an obstetrician, cardiologist, anaesthetist and midwife. In Bristol, this Gold standard model of care is provided. The service sees patients from all over the South West in an all-day twice-monthly clinic in St Michaels Hospital in the Antenatal Clinic on Level E. Here women can have consultations with all specialists, see a midwife and have investigations, such as ECG, echo and fetal ultrasound. Before each clinic starts there is a formal multi-disciplinary meeting where upcoming deliveries and birth plans are discussed, as well as high risk patients. A delivery plan is formulated and is filed electronically, in the mother's delivery notes and on the Central Delivery Suite.

The information is listed in alphabetical order.

Regional referral pathway for pregnant women with known cardiac disease

UHBristol referral pathway for cardiac problems presenting in pregnancy

UHBristol referral pathway for pre-existing cardiac disease in pregnancy

Complex EP cases in pregnancy guideline

Cardiac disease (including endocarditis prophylaxis) - Intrapartum care guideline

Management of aortopathy in pregnancy guideline

Cardiac Alert Card

Good Practice - Cardiac Disease and Pregnancy (Royal College of Obstetricians and Gynaecologists)

Heart Disease and Pregnancy

Pregnancy Guidelines ESC

Leaflets from the Somerville Foundation

Contraception for Women with A Heart Disease

GUCH and Pregnancy (The Somerville Foundation)

Lesion information on all lesions on www.swswchd.co.uk

Professionals → Clinical information → adults



South Wales and South West
**Congenital Heart
Disease Network**

University Hospitals Bristol **NHS**
NHS Foundation Trust

Fontan Circulation (Total cavopulmonary circulation (TCPC))

SETTING	South West England and South Wales
GUIDELINE FOR	Cardiology teams in South West England and South Wales hospitals
PATIENT GROUP	Adult patients with congenital heart disease

GUIDANCE

Follow-up:	annual
Associated lesions:	dependent on the underlying abnormality, note may be isomerism
Inheritance:	dependent on the underlying abnormality

Long-term complications:

European Guidelines

2018 ESC Guidelines for the management of cardiovascular diseases during pregnancy



Table 7 Congenital heart disease

Recommendations	Class	Level
Patients with a Fontan circulation and saturations <85%, depressed ventricular function, moderate–severe AV regurgitation, refractory arrhythmia, or protein-losing enteropathy should be advised against pregnancy.	IIa	C
Patients with a systemic right ventricle (Mustard/Senning or congenitally corrected TGA), in NYHA class III/IV, systemic ventricular dysfunction (EF <40%), severe TR should be advised against pregnancy.	IIa	C
Anticoagulation treatment should be considered during pregnancy in Fontan patients.	IIa	C
Asymptomatic patients with Ebstein's anomaly with saturations <85% and/or heart failure should be advised against pregnancy.	IIa	C
Patients with a Fontan circulation and saturations <85%, depressed ventricular function, moderate–severe AV regurgitation, refractory arrhythmia, or protein-losing enteropathy, pregnancy is not recommended.	III	C

Resources for women with congenital heart disease

- Please see the outline of the patient pathway on our website in the following slides
- This can be found under
- **Patient pathways**/Adults/pregnancy pathway

What are you looking for?



Resize text: A A A



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THE **PREGNANCY PATHWAY**



All women with congenital heart disease should be offered pre-pregnancy advice from their Adult Congenital Heart Disease (ACHD) Cardiologist. It is best if the pregnancy is planned.

It is very important that you attend all your midwife appointments throughout pregnancy, **AS WELL AS** your Cardiac Antenatal Clinic appointments.



If you become pregnant you should contact your

congenital heart disease should be offered pre-pregnancy advice from their Adult Congenital Heart Disease (ACHD) Cardiologist. It is best if the pregnancy is planned.



If you become pregnant you should contact your GP as soon as possible and you will be referred to a community midwife and for a booking scan at around 12 weeks.



Your GP, or you, can contact your Bristol or Cardiff Cardiologist or clinical nurse specialist to arrange for you to be seen in the Cardiac Antenatal clinic in Bristol or Cardiff.



You will receive a letter with the time, date and location of your appointment in the Cardiac Antenatal Clinic.

CARDIAC ANTENATAL CLINIC

At each Cardiac Antenatal Clinic visit you will see a Cardiologist and Obstetrician, as well as having an ECG, echo and possibly baby scan, depending on your heart condition. A scan of your baby's heart may be arranged.



When and how often you are seen will depend on your heart condition. At each appointment the doctors will write in your handheld maternity notes.



A decision will be made early on about where it is safest for you to deliver your baby. This may be your local hospital or it may be safer for you to deliver in Bristol or Cardiff.



early on about where it is safest for you to deliver your baby. This may be your local hospital or it may be safer for you to deliver in Bristol or Cardiff.



A birth plan will be made with you and the team, detailing the medical advice for the birth of your baby. You can have your own birth plan about what is important for you to go alongside this.



You will meet an anaesthetist later on in pregnancy, who will talk to you about pain relief in labour.



Your baby will be born in either your local hospital or Bristol/Cardiff as planned.



pregnancy, who will talk to you about pain relief in labour.



Your baby will be born in either your local hospital or Bristol/Cardiff as planned.



After the delivery you will be on the Maternity Ward but may have an echo and see the cardiology team before you go home. You may need to stay in hospital for up to a week after delivery, depending on your heart condition.



Before you go home, a follow-up appointment will be arranged with your cardiologist.

More about the CHD network



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Congenital Heart
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Spring 2020
Issue 7

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Newsletter

News from the network team

Welcome to our spring edition of the South Wales and South West Congenital Heart Disease Network newsletter! Published a little later than planned due to Covid-19 hitting us, but as always it's full of interesting updates on what our patients, families, clinicians and charities have been doing across the network; helpful articles on key services for congenital heart disease; and signposting to a number of important network meetings, as well as training and education events.

Little did we realise that 2020 would see the world face one of the greatest challenges of modern times with the Covid-19 pandemic. Whilst the last few months have presented many challenges, particularly for our clinical staff, there have also been a lot of positives. This time has focussed society's hearts and minds on what really matters at times like this; the care and support of our loved ones, our communities and our key workers. Each Thursday, the nation has clapped to show their appreciation and thanks to all of the wonderful people who have made personal sacrifices to care and help people out in a time of need.

In response to Covid-19, people have adapted with new ways of working. Whilst some of these changes in ways of working will be temporary, there will undoubtedly be things people will want to retain. We would love to hear about these, share the learning across the network and support you to carry these on. Please [email us](#) to tell us about them.

In 2019, the World Health Organisation (WHO) designated 2020 as the year of the nurse and the midwife; celebration and recognition of the pivotal role nurses and midwives play in society. We talk about the how the NHS plans to mark this occasion and highlight some of the fantastic work of nurses within our own network. We also pay tribute to Wendy Visser, one of our wonderful Adult Congenital Heart Disease nurses who sadly passed away towards the end of last year. There is also an update from Sheena Vernon, our lead nurse for the network, on progress with growing the population of link nurses, who play an important role in supporting our CHD patients and their families across the network.

Coronavirus (Covid-19)



We appreciate that this is an unprecedented and uncertain time for so many, but we will get through this together #StaySafe

To support our CHD staff, patients and families across the network, we have set up Covid-19 webpages (www.swschwcd.co.uk) with recent guidance and information. Importantly, it also has a wealth of wellbeing resources that may help you navigate this challenging time. We will continue to update these pages with helpful information as we receive it.

The UK government have issued guidance on social distancing/self-isolation for many vulnerable patient groups, including those with long-term health conditions. The BOCA would encourage patients to check this guidance which may change during the course of the Covid-19 pandemic.

For guidance regarding operational delivery during this time, please visit your local hospital's website.

Network Team Key Contacts

Clinical Director Dr. A. Williams

Find us online:
www.swschwcd.co.uk



Tweet @CHDNetworkSWSW

Thankyou

- Please do contact me if you have questions or suggestions
- Sheena.Vernon@uhbw.nhs.uk

