AB218. SOH21AS079. Plasmodium falciparum malaria in a Jehovah's witness parturient with concomitant pre-eclampsia and severe mitral regurgitation

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Background: Malaria is the second most common infectious disease related-death in the world. Pregnant women infected with malaria usually have more severe symptoms and outcomes, with higher rates of miscarriage, intrauterine demise, premature delivery, low-birth-weight neonates, severe anemia, neonatal and maternal death.

Methods: Laboratory results were obtained from the hospital's laboratory information technology system (iLab). Images from point of care ultrasound (POCUS) images were retrieved from the GE Voluson P8 ultrasound machine in University Maternity Hospital Limerick (UMHL) and the departmental echocardiography images from the cardiology system. Computerized tomography (CT) scan result was obtained from radiology information system (NIMIS).

Results: We report a case of a 27-year-old woman at 35 weeks of gestation who presented to UMHL with epigastric pain, vomiting, fever, tachypnoea and lethargy. She had recently travelled from a malaria endemic country. Point of care ultrasound (POCUS) demonstrated findings consistent with pulmonary oedema. Subsequently, she was diagnosed with severe pre-eclampsia and severe falciparum malaria for which she was successfully treated. She went on to have an emergency caesarean section due to fetal

distress. Post-delivery, a departmental echocardiogram revealed severe mitral regurgitation. CT scan of pulmonary demonstrated evidence of pulmonary hypertension and right heart enlargement. The impact on her care plan as a Jehovah's Witness was discussed.

Conclusions: This case illustrates the prompt diagnosis of malaria infection in pregnancy and role of radiological imaging leading to optimal patient outcome. The importance of multidisciplinary approach and communication between the doctors and patient is highlighted in this case.

Keywords: Jehovah's witness; malaria in pregnancy; mitral regurgitation; plasmodium falciparum; pre-eclampsia

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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