

## Management of Eclampsia Associated with Myasthenia Gravis and Thymoma – Case report

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Management of eclampsia associated with medical disorders requires specialized care and therapy should be tailored accordingly. Myasthenia gravis presenting in pregnancy is uncommon and its management is challenging specially when it presents in acute crisis that too associated with convulsions. Pregnancy, infections, surgical trauma, administrations of neuromuscular agents such as magnesium sulfate, gentamycin etc precipitates acute myasthenic crisis. The present case is of an eclamptic patient admitted in post-

partum stage in intensive care unit diagnosed to have myasthenia gravis as a cause of respiratory failure. A 26 year primigravida was admitted in semiconscious stage with h/o hypertension and convulsions. She had delivered a stillbirth baby on the day of admission. She received magnesium sulfate for eclamptic convulsions and gentamycin as an antibiotic. On exam she was semiconscious. Response to painful stimuli and limb movements were poor. Pupils were CCERL & fundus was normal. Eyeball movements were slow. No neck rigidity. Respiratory effort was poor. Pulse 102/mts, BP 170/100 mmHg, resp rate 22/mts. Blood gas analysis reveal 70% O<sub>2</sub> saturation & pCO<sub>2</sub> 40mmHg. X-Ray chest showed widening of mediastinum. (Fig) Keeping a possibility of neuromuscular lesion. Tensilon test (edrophonium 10 mg IV) was carried out after intubating the patient. The test was positive. External ocular movement improved and tidal volume increased. Patient was treated with Epsolin, Corticosteroids, Pyridostigmine and cephalosporine. She could be weaned off after 3 day and extubated.



Fig. 1

Nine months after the episode in July 1999 a thymectomy was performed by midsternal approach and thymoma was removed. The patient was advised copper T as an IUD and to avoid oral contraceptive pills and cautioned about pregnancy. She is on corticosteroid and pyridostigmine.

The present case highlights the obstetrical subsequent management of an eclamptic patient associated with medical disorder.