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Ruchi Sharma, V. D. Dogra

Zonal Hospital, Chamba, Himachal Pradesh, 176-310.

Mrs. Sanvogita, aged 26 years, primigravida was admitted in the maternity ward of Zonal Hospital, Chamba (H.P.) on 21-12-2000, with swelling of both feet for I week. This was the patient's first antenatal checkup. at 6 months amenorrhea.

General Examination: did not reveal any significant findings except bilateral pitting pedal edema. The PR was 82 minute in the right upper limb while no pulse was palpable in the left upper limb. The femoral artery and posterior tibial artery pulsation was however felt in both lower limbs. BP was 220 / 160 mm Hg in the right arm in the supine position.

Systemic examination: A bruit was auscultated over the left subclay ian artery.

Obstetrical Examination: Uterus height was 24 weeks, tetal parts palpable but no total heart sound.

Investigations which were done on 22-12-2000 revealed a normal haematological picture, ESR 22 mm, normal LEL, urine albumin + with other parameters of RFI being normal. Fundus examination revealed grade If hypertensive retinopathy in both eyes. USG examination revealed a fetus of gestation age 20 weeks with no cardiac activity.

Medical opinion was sought and a provisional diagnosis of secondary hypertension due to Takayasu's disease a.k.a. "pulseless disease" with super imposed pre-eclampsia was made.

Management:- The patient was put on antihy pertensivetab Emadine - AT O.D. and s/l depir sos. Need for termination was explained to relatives. Labour was induced with syntocinon on 22-12-2000 and the patient delivered a macerated fetus after 12 hrs of induction. Puerperium was uneventful. Patient was discharged and was advised to take tab. Fmadine-AT, tab Ditide and tab Disprin.

Follow up: Patient reported for follow up after 10 days. The pedal edema had subsided and her BP was 140-90. mm of Hg. The bruit over the left subclavian artery was faint. Urine examination revealed a normal picture. Fundus examination still showed grade II changes. Patient was advised to get the following investigations: done for definitive diagnosis and treatment of the medical disorder - Rheumatic factor, ANA, Aortography Doppler study of aorta

The patient has not reported thereafter.