

Impact of Von Willebrand Disease on Maternal Morbidity **at Time of Delivery** Emily K Redman, MD, David N Hackney, MD, MSCR, Manesha Putra, MD MetroHealth/University Hospitals Maternal-Fetal Medicine, Cleveland, OH

Introduction

- Impact of von Willebrand disease (VWD) on pregnancy has been narrowly characterized beyond associations with hemorrhage risk and need for transfusion
- We sought to evaluate the relationship between VWD and severe maternal morbidity (SMM) at time of delivery

Methods

- Using National Inpatient Sample data from 2007-2013, identified delivery admissions for women with and without VWD (ICD-9-CM 286.4)
- Examined rates of SMM defined by the Centers for Disease Control and Prevention for these two groups, both including and excluding blood product transfusion
- Poisson regression evaluated the association between VWD and SMM controlling for maternal comorbidities using a validated index (low: 0, moderate: 1-2, high: >2) and mode of delivery
- Weighted data analysis to provide national estimates

Results

- Total 5.7 million delivery admissions, of which 2,357 (0.04%) carried diagnosis of VWD
- Rate of SMM was significantly higher with VWD than without VWD, and this persisted after excluding transfusion (Figure 1)
- Incidence rate ratio after adjustment for overall SMM was 4.08 (95% CI 3.80-4.38) and with transfusion excluded was 1.97 (95% CI 1.68-2.31, both p<0.001)
- Several individual SMM indicators were associated with VWD including anesthesia complications, transfusion, embolism, disseminated intravascular coagulation, acute respiratory distress syndrome and hysterectomy (Figure 2)

Discussion

- VWD is associated with a four-fold increased incidence of SMM at delivery, and even with blood product transfusion excluded VWD doubles the incidence rate of SMM
- Likely an underestimate of the impact of VWD on maternal morbidity as we focused only on the delivery admission
- Further studies are needed to better inform delivery planning and postpartum care for VWD

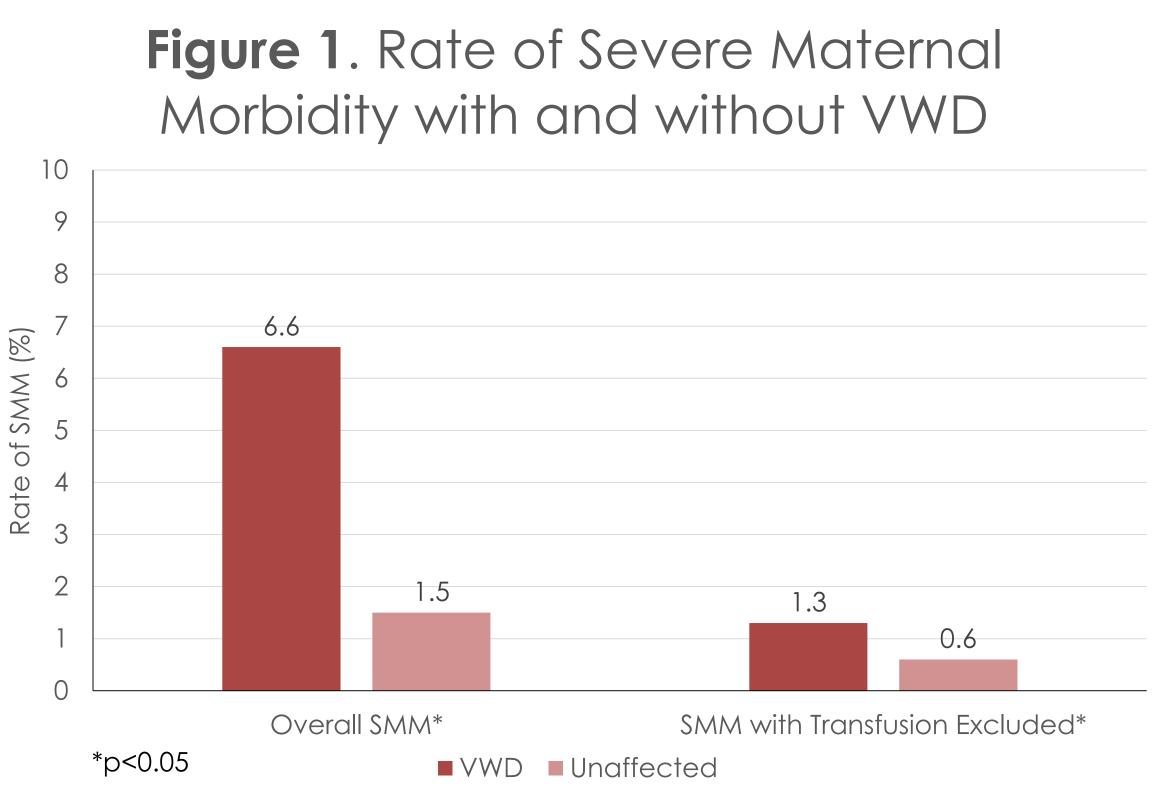
Women with VWD experience more maternal morbidity at time of delivery, even with transfusion excluded, compared with unaffected women.



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Severe Anesthesia Complications*			•		7.12 [4.05,12.52]
Blood Product Transfusion*		\			5.26 [4.87,5.67]
Air and Thrombotic Embolism*		•			4.36 [2.29,8.28]
Disseminated Intravascular Coagulation*					2.41 [1.93,3.01]
Acute Respiratory Distress Syndrome*					2.25 [1.38,3.67]
Hysterectomy*	•				1.61 [1.01,2.56]
Acute Renal Failure -	•				1.57 [0.85,2.91]
Shock	•				1.33 [0.55,3.20]
Sepsis —	•				1.22 [0.49,3.01]
-2.0 -1.0 0.0 1	.0 2.0 3.0 4	.0 5.0 6.0	7.0 8.0	9.0 10.0 11.0	12.0 13.0 14.0 15.0

*p<0.05





Figure 2. Severe Maternal Morbidity Indicators in VWD