

Expert Q&A's



# Peripartum cardiomyopathy (PPCM)

**1. It presents in late pregnancy and early post-partum. Why are women at risk post-partum when the body is no longer carrying a child?**

PPCM can occur up to 6 months post delivery. Although the cause of PPCM is unknown, it is thought to be due to hormonal and vascular changes in the peripartum period. Some women have a genetic predisposition due to mutations in genes that predispose to heart contractile dysfunction.

**2. Symptoms of pregnancy and PPCM, such as fluid retention and shortness of breath, are very similar. PPCM is often a diagnosis of exclusion, especially if there is no history of heart disease. How long post-partum should you wait before mentioning to your doctor that you still have these symptoms?**

PPCM should not be considered a diagnosis of exclusion and the diagnosis can be clearly made by performing an echocardiogram. If these symptoms are present post-delivery it is best to report them to your doctor so that they can be monitored and investigated if necessary.

**3. Are pre-eclampsia and diabetes markers for PPCM?**

Pre-eclampsia and diabetes are not necessarily markers of PPCM, but may increase the risk that PPCM will develop.

**4. In the post-partum period, how do new mothers manage their PPCM while caring for a newborn?**

It is important that mothers with PPCM look after themselves as well as the baby and help from others may be needed.



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**5. Research indicates the majority of women recover in the six months post-partum. What treatments are offered during this period?**

PPCM is managed like any other cause of heart failure with medication. Care is needed to avoid drugs that will cross into breast milk if at all possible. Some women with PPCM do not respond to drug therapy and need heart transplants. Progressive deterioration may be more likely if there is an underlying genetic mutation.

**6. If you had PPCM after one birth, will you have it with subsequent pregnancies? Why/why not?**

Whether or not PPCM develops is unpredictable. It may not recur with subsequent pregnancies and can occur after several normal pregnancies.