Postpartum Cerebral Venous Sinus Thrombosis in a Patient with Aplastic Anemia, Preeclampsia, and HELLP Syndrome

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Background o Case TOLAC

1. Kasgkoushet al. Journal of Clinical Neuroscience 39 (2017): 9-15.

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• Central venous sinus thrombosis (CVST) is a rare cause of stroke but occurs more commonly in association with pregnancy and puerperium • Prognosis can be favorable in those with early treatments, with mortality rates $< 15\%^{-1}$

42-year-old G2P1 with aplastic anemia presented at 39w4d with SROM with plan for

 Diagnosed with preeclampsia with severe features by BP Thrombocytopenia with platelet count of 56k

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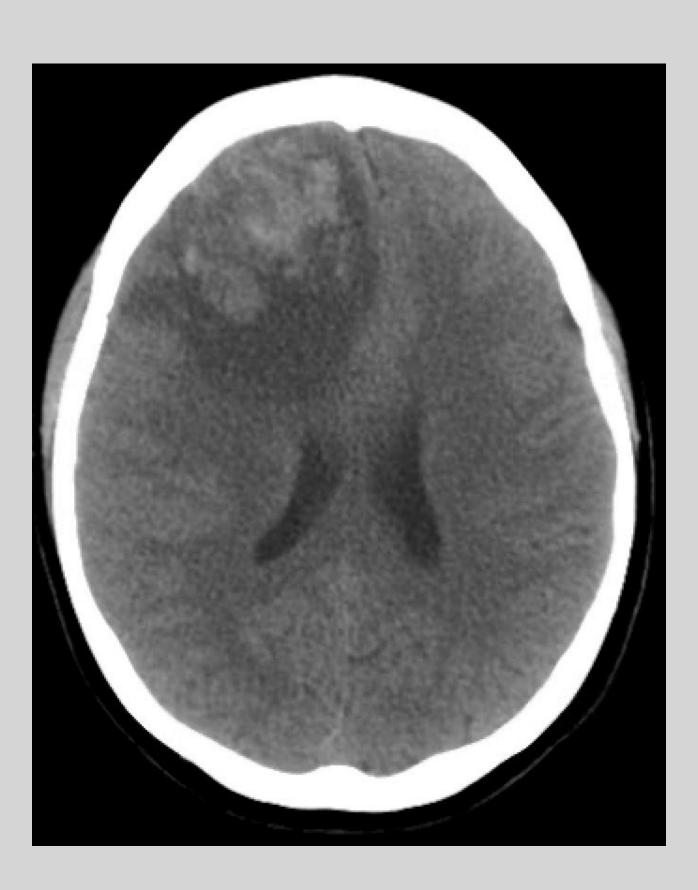
Labor & Delivery

- Analgesia with Remifentanil PCA
- Complicated with diagnosis of HELLP
- Transfused 2u prbc & 1u plt
- NSVD with QBL 295 mL
- Discharged on PPD2

Case Presentation

Postpartum

• PPD11 reported HA and low-grade fever in video visit • PPD12 presented to ED with persistent HA, new L hemibody weakness, and seizures



• PPD22 transitioned to comfort care and passed away

CU

• Treated with heparin gtt Worsening neuro exam with elevated ICPs • Two failed attempts of thrombectomy and catheter-directed thrombolysis Progressively hypotensive and hypoxic despite maximal support

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• The rate of pregnancy-related CVST has been reported to be 9.1 per 100,000 pregnancies, contributing to 2% of pregnancy-associated strokes¹ • Headache is the most common presenting symptom²

1. Swartz et al. International Journal of Stroke 12.7 (2017): 687-697. 2. Roeder et al. *Handb Clin Neurol.* 2020;172:3-31.

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Discussion

Case Highlights

1. The clinical suspicion for CVST in postpartum patient who present with headaches may be complicated by suspicion of hypertensive disorders of pregnancy 2.Early diagnosis and intervention is critical to improving outcomes

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