

# SUCCESSFUL MANAGEMENT OF PTSD IN PERIPARTUM CARDIOMYOPATHY THROUGH LVAD AND CARDIAC TRANSPLANT: ROLE OF TRANSPLANT PSYCHIATRY

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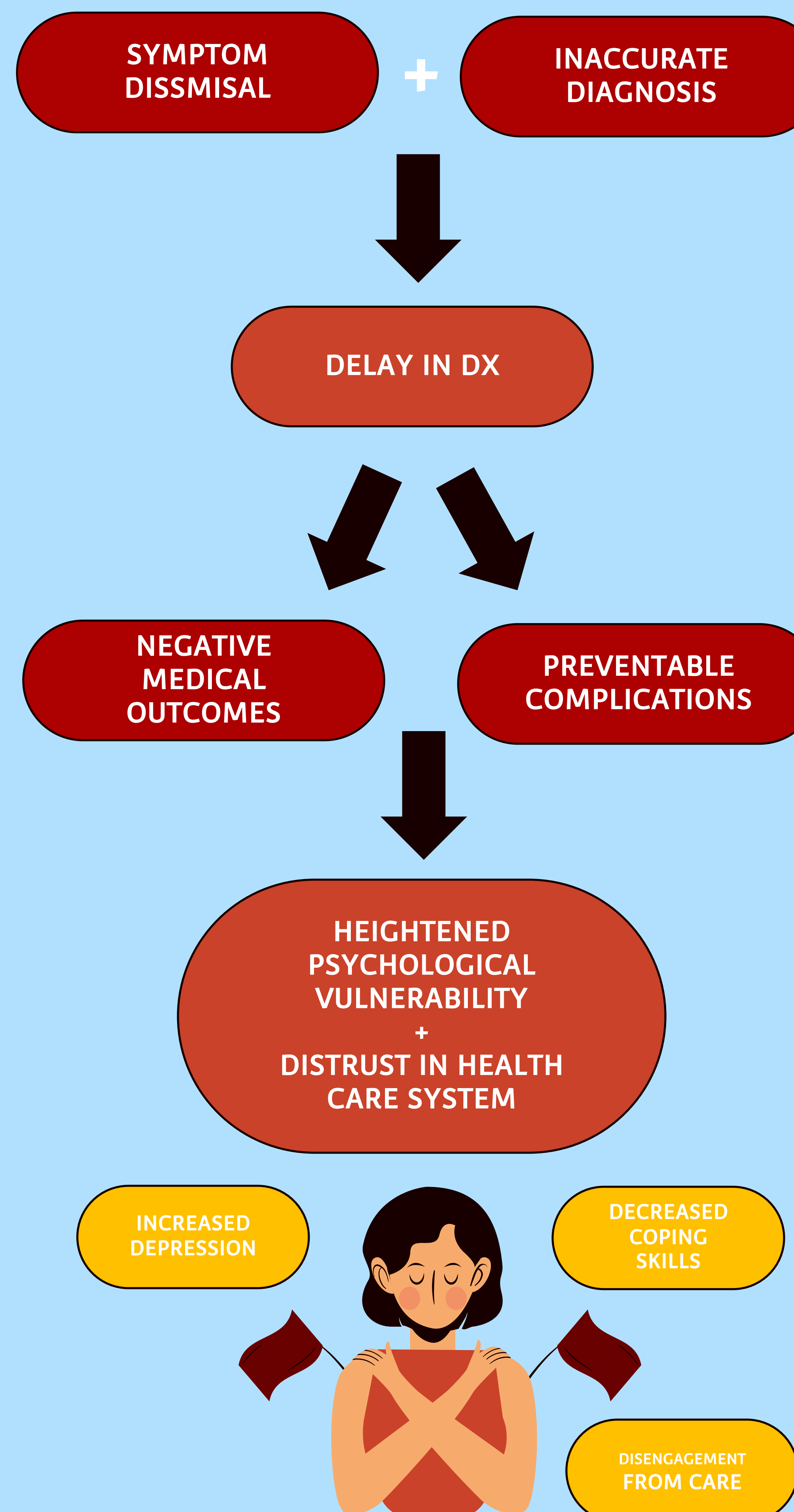
## BACKGROUND

- The diagnosis of peripartum cardiomyopathy (PPCM) is often delayed in young women, whose symptoms are initially attributed to pregnancy (Davis et al., 2020).
- This delay in diagnosis can result in distrust in healthcare providers and psychological distress, consequently translating to poor health behavior.
- For patients with PPCM in need of advanced cardiac therapies, such as left ventricular assist device (LVAD) or heart transplant, this psychological consequence of delayed diagnosis must be taken into consideration during their psychiatric evaluation.

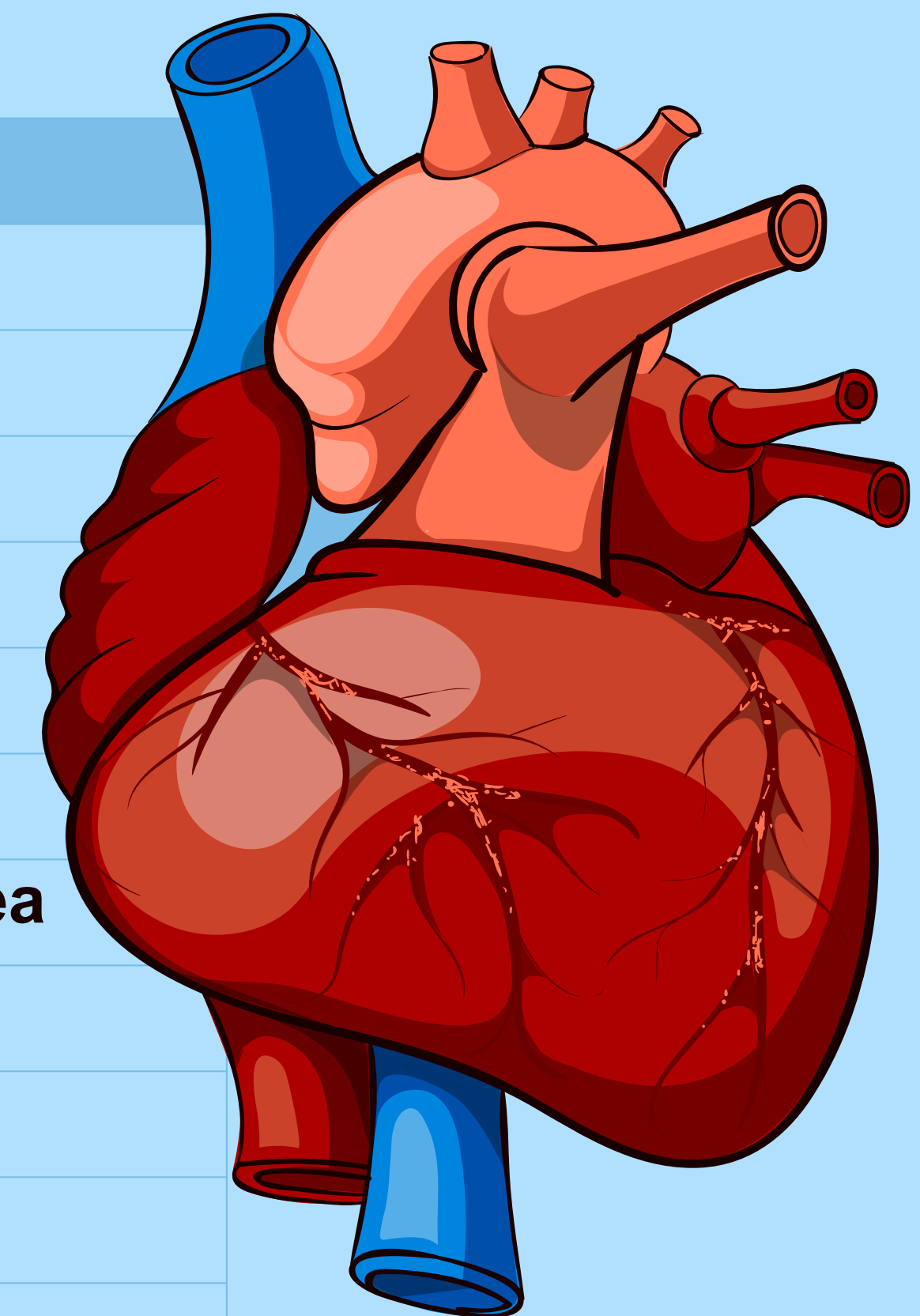
## CASE DETAILS

Patient is a 35-year-old female with a history of PPCM status-post LVAD implantation, major depressive disorder, and panic disorder, who presented with worsening heart failure requiring urgent transplant evaluation. Outpatient LVAD coordinators expressed significant concern due to the patient's history of inconsistent compliance with required laboratory tests (ex: INR monitoring). During Transplant Psychiatry assessment, it became apparent that the patient's lack of adherence was not secondary to disregard of medical advice, but more consistent with avoidance secondary to PTSD symptoms associated with her local hospital that missed a timely diagnosis of PPCM. Transplant Psychiatry recommended that the patient participate in trauma-focused psychotherapy to address her avoidance behaviors and improve her coping mechanisms to increase chance of successful transplant. After transplant, the patient has had a notable improvement in treatment adherence and continues to do well both psychiatrically and medically, with no evidence of rejection.

## DISCUSSION



Pregnancy	PPCM
Fatigue	Fatigue
Tachycardia	Tachycardia
Dyspnea	Dyspnea
Edema	Edema
Chest pain	Chest pain
DOE	DOE
PND/orthopnea	PND/orthopnea
Rales	Rales
S3	S3
Cough	
Hepatosplenomegaly	



## CONCLUSION

This case report highlights the need for a nuanced transplant evaluation sensitive to the psychological burden of patients with PPCM and specifically cautions against the misinterpretation of non-adherence as disinterest in care, as maladaptive behavior may be reflective of an underlying trauma-response associated with delay in diagnosis.

## REFERENCES

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