

Rebecca Johnson, a former patient of St. Paul's Hospital's Maternity Centre, shares some quality time with her two girls, Elliott (left) and Avery, at their home in Mission, BC.





Top-Tier

MATERNITY CARE

Women facing high-risk pregnancies receive compassionate and high-level care thanks to a team of specialists at St. Paul's Hospital's Maternity Centre

By Gail Johnson

By the time Rebecca Johnson hit the six-week mark of her first pregnancy, she had passed out several times. The weather during the summer of 2012 was hot and humid, and it was initially thought that she was simply dehydrated and experiencing low blood pressure. In fact, the Mission, BC, resident was suffering from complications due to a blood clot in her heart. After being referred to St. Paul's Hospital, Johnson required open-heart surgery when she was eight weeks pregnant.

"It was awful," says Johnson. "I was totally stressed. My obstetrician/gynecologist focused on the fact that there was a 20-percent chance my baby would make it."

Specially trained experts from St. Paul's Maternity Centre team monitored Johnson closely throughout her pregnancy, labour and delivery. Not only did she recover fully from the heart operation, but she went on to deliver a healthy baby girl named Elliott.

Johnson's case is just one example of the unique and vital role that St. Paul's plays as a

provider of top-level medical care for higher-risk mothers and babies.

SPECIALIZED MATERNITY CARE

St. Paul's highly specialized level III Maternity Centre, which delivers approximately 1,800 babies every year, supports some of the most complex and high-risk pregnancies in British Columbia. The multidisciplinary team at the Maternity Centre cares for pregnant women with a range of co-existing medical issues, including heart disease, kidney conditions and blood disorders. In fact, St. Paul's is the only hospital in Vancouver to have an adult Intensive Care Unit just steps away from the maternity ward. It also houses the Neonatal Intensive Care Unit, which treats infants up to eight weeks premature with equipment generously donated by Variety - The Children's Charity and other supporters. Patients come from all over BC, including from remote areas and the Downtown Eastside.



(Left to right) Dr. Monica Beaulieu, Dr. Jasmine Grewal and Dr. Elisabet Joa stand beside a fetal heart monitor at St. Paul's Maternity Centre.

ESSENTIAL EQUIPMENT

FETAL HEART MONITORS are an essential tool for the ongoing assessment of the health and safety of an unborn baby throughout every woman's pregnancy, but especially when the woman is at high risk of complications.

"In labour, for these high-risk pregnancies, we require a way to monitor the status of the fetus and the monitors are how we do this," says Dr. Elisabet Joa, head of the Department of Obstetrics and Gynecology at St. Paul's Hospital.

St. Paul's Hospital Foundation currently has a fundraising goal of \$45,000 for replacement fetal heart monitors. As St. Paul's is unique in that it has specialized services and equipment for higher-risk pregnancies, replacing the aging monitors is a top priority for the unit and essential to making sure moms and babies continue to get the best care. □

"Our goal is a healthy baby and a healthy mom," says Dr. Elisabet Joa, head of the Department of Obstetrics and Gynecology at St. Paul's. "Providing a safe and caring environment is what we work for every day."

When a pregnant woman has a pre-existing medical condition – such as a neurological illness, diabetes, compromised kidney function, respiratory disorder, heart condition, etc. – it can have a significant effect on both the pregnancy and childbirth. That's why it's so crucial for the obstetrics team to work in close collaboration with doctors and nurses from a range of medical specialties.

"We share a common goal of providing the best possible care for these women, who often have very complicated histories," says Joa. "It all comes down to the team members respecting each other and working well together. A dedicated team makes all the difference."

"While we provide care in very high-risk situations, we really strive to create an environment for the family that minimizes stress," she adds. "We work to create trust on our unit, so that our patients feel secure knowing that they're getting excellent care."

CARE WITH HEART

That was certainly the case for Johnson. Having initially come to St. Paul's with a heart condition, she says she knew she was in good hands when her cardiologists began working closely with the obstetrics and anesthesiology teams.

"Our doctors spent a lot of time talking to us and answered all of our questions, and they really made sure that my husband understood everything that was going on, too," says Johnson. "He felt very included, and that made it easier for both of us."

Patients like Johnson, with congenital or acquired heart disease, such as rheumatic heart disease or valvular heart disease, can be at risk of developing serious cardiac and obstetrical complications during pregnancy. These include miscarriage, heart failure, arrhythmias, stroke and even sudden death.

"Our aim is to provide comprehensive, individualized care to women through this important time," says Dr. Jasmine Grewal, cardiologist and director of the Cardiac Obstetrics Clinic at St. Paul's. "Close attention through pregnancy, labour and delivery and in the post-partum period is important to avoid cardiac complications or to manage them when they do arise."

The clinic also provides pre-pregnancy assessment and counselling, patient and family education and psychosocial support, as well as reviews from cardiologists, obstetricians, anesthesiologists, maternal-fetal medicine experts and other specialists.

KIDNEY CARE

That same kind of interdisciplinary approach applies to women with kidney disease. Dr. Monica Beaulieu, director of St. Paul's Hospital's Kidney Care Clinic and a scientist with the Centre for Health Evaluation and Outcome Sciences (CHÉOS) at St. Paul's, explains that risks to these patients during pregnancy include pre-eclampsia (pregnancy induced high blood pressure), the need for dialysis and premature, low-birth-weight babies.

"The most common risk is the kidney disease getting worse during pregnancy," says Beaulieu. "The value that the moms find in having a team-based approach and having their obstetrician and their nephrologist talk to each other throughout their pregnancy is tremendous."

"We help patients understand all the information in front of them, so they can make informed decisions. Both the mom and baby have to be watched closely."

COMPASSIONATE CARE FOR FAMILIES

Johnson, meanwhile, has since gone on to have a second child – a healthy baby girl named Avery. Throughout her open-heart surgery and both of her pregnancies, Johnson says she had full confidence in the team at St. Paul's Hospital.

"The doctors and nurses were amazing," she says. "They were professional but never clinical. They were all positive and compassionate, and that makes you feel a lot better when you're in a scary situation. I could tell they really cared."

To learn how to support women and babies at St. Paul's Hospital, please contact St. Paul's Hospital Foundation at 604-682-8206 or visit www.helpstpauls.com.