

Rheumatic Heart Disease

This sheet is about having rheumatic heart disease (RHD) in a pregnancy or while breastfeeding. This information is based on available research studies. It should not take the place of medical care and advice from your healthcare provider.

What is rheumatic heart disease?

Rheumatic heart disease (RHD) is a condition where the valves of the heart are permanently damaged by inflammation and scarring caused by rheumatic fever. This can cause narrowing or leaking of the heart valve, which makes it harder for the heart to work as usual. People with RHD can have mitral stenosis (narrowing of the two left chambers of the heart), aortic stenosis (narrowing of the connection between the heart and one of the main blood vessels), mitral regurgitation (when blood flows backwards within the areas of the heart), or aortic regurgitation (when blood flows backwards back into the heart from the aorta). RHD can increase the chance of stroke, changes to the heart rhythm, and infections in the heart valve.

How do you get RHD?

RHD can happen when a person has an untreated or undertreated group A strep infection that moves into the organs. When this happens, the immune system attacks the body instead of the infection. MotherToBaby has a fact sheet on group A strep infections here: https://mothertobaby.org/fact-sheets/group-a-strep-infections/.

I have RHD. What should I talk about with my healthcare team before I get pregnant?

It is important to talk to your healthcare team about plans for treating your condition before and during pregnancy, as well as during and after delivery. If possible, talk with your healthcare team before getting pregnant. If your pregnancy is unplanned, contact your healthcare providers as soon as you find out you are pregnant.

Things to talk about with your healthcare team include:

- Ways to monitor your pregnancy and manage your RHD symptoms.
- Any medications, vitamins, supplements, or other exposures.
- Any other questions or concerns you have.

People with RHD often need medications to best manage their health. Sometimes when people find out they are pregnant, they think about changing how they take their medication, or stopping their medication altogether. However, it is important to talk with your healthcare providers before making any changes to how you take your medication. Your healthcare providers can talk with you about the benefits of treating your condition and the risks of untreated illness during pregnancy.

I have RHD. Can it make it harder for me to get pregnant?

It is not known if having RHD can make it harder to get pregnant.

Will pregnancy affect my RHD symptoms?

A woman's body goes through many changes while pregnant. Some of these changes include increases in how fast the heart is beating and how much blood the heart is pumping. A woman with RHD might have changes to their symptoms because of the extra effort needed by the heart during pregnancy.

Does having RHD increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. Studies have not been done to see if having RHD increases the chance of miscarriage.



Does having/getting RHD increase the chance of birth defects?

Birth defects can happen in any pregnancy for different reasons. Out of all babies born each year, about 3 out of 100 (3%) will have a birth defect. We look at research studies to try to understand if an exposure, like RHD, might increase the chance of birth defects in a pregnancy. Studies have not been done to see if RHD increases the chance for birth defects.

Would having RHD increase the chance of other pregnancy related problems?

It is not known if having RHD increases the chance of other pregnancy-related problems such as preterm delivery (birth before week 37) or low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth). However, complications of RHD, like aortic valve stenosis, mitral stenosis, mitral regurgitation, or aortic regurgitation, has been associated with preterm delivery, low birth weight, and intrauterine growth restriction (IUGR) (fetus does not grow as much as expected during pregnancy. There can also be arrythmias (changes in the heartbeat) and heart failure in the woman who is pregnant.

Rarely, it has been reported that having RHD might increase the chance of severe pregnancy-related problems, including death of the woman who is pregnant or the fetus. There are also studies that have not found an increased chance for these outcomes when a woman who is pregnant has RHD. Having RHD that is treated or controlled and being monitored by a medical team that is aware of your condition can help to decrease the chance of severe pregnancy-related problems. It is important to speak with your healthcare providers about managing your condition for your health and the health of your pregnancy.

Does having RHD in pregnancy affect future behavior or learning for the child?

Studies have not been done to see if RHD can cause behavior or learning issues for the child.

Breastfeeding while I have RHD:

Having RHD is not expected to affect a woman's ability to breastfeed. People who have RHD might be on different medications to control their condition. It is important to talk to your healthcare provider and your child's pediatrician about your condition, your medications, and your plans to breastfeed. Be sure to talk to your healthcare provider about all your breastfeeding questions.

If a man has RHD, can it make it harder to get a partner pregnant or increase the chance of birth defects?

Studies have not been done to see if RHD could affect a man's fertility (ability to get a woman pregnant) or increase the chance of birth defects. In general, exposures that men have are unlikely to increase the risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/.

Please click here for references.



Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

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