

# HELLP

# #EM3

Dr. Pandora Spilman-Henham @pandoraspilman

# SYNDROME

## H AEMOLYSIS

**E**levated **L**iver Enzymes

**L**OW **P**LATELETS

- IS A COMPLICATION OF PREGNANCY

- USUALLY PRESENTS IN PATIENTS WITH PRE-ECLAMPSIA/ECLAMPSIA

### INVESTIGATIONS

- DIAGNOSTIC CRITERIA -

- BLOOD FILM → shows haemolysis
- LDH → > 600 IU/L
- ALT → > 70 IU/L
- PLATELETS → < 100 x 10<sup>9</sup>/L

### CLINICAL FEATURES

• HYPERTENSION

• RIGHT UPPER QUADRANT TENDERNESS

• OEDEMA

• POLYURIA

## COMPLICATIONS

### HAEMORRHAGE

- PLACENTAL ABRUPTION
- POST PARTUM HAEMORRHAGE
- LIVER HAEMATOMA
- DIC
- INTRACEREBRAL HAEMORRHAGE

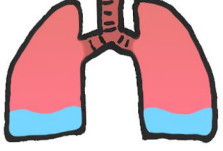
### INFARCTION

- LIVER INFARCT
- CEREBRAL INFARCT

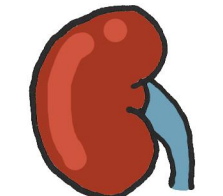
### PREGNANCY RELATED

- ECLAMPSIA
- IUGR
- PRETERM DELIVERY
- FETAL DEATH

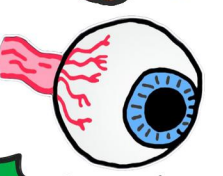
### OTHER



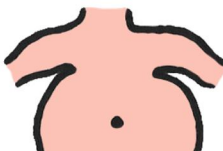
PULMONARY OEDEMA



ACUTE KIDNEY INJURY



RETINAL DETACHMENT/  
RETINOPATHY



ASCITES



DEATH

## MANAGEMENT

### DELIVERY OF THE BABY

- Advised after 34 weeks
- If maternal / fetal health deteriorate
- If < 34 weeks gestation and delivery can be delayed, consider IV corticosteroids to aid fetal lung development

### ANTI HYPERTENSIVES

- to control blood pressure
- eg. labetalol

### CORRECT COAGULOPATHY

- transfuse blood products under specialist advice.

