



## LETTER TO THE EDITOR

### Turner syndrome and pregnancy: A multidisciplinary approach

### Síndrome de Turner e gravidez: uma abordagem multidisciplinar



Dear Editor,

We read with great interest the review article recently published in your journal by Donato and Ferreira concerning cardiovascular disease and Turner syndrome.<sup>1</sup> It is a very welcome article, as Turner syndrome, although an infrequent condition, is important from a cardiological point of view. The work reminds us of the need for cardiological screening in these patients as well as the follow-up that should be performed. On the other hand, pregnancy is now possible thanks to oocyte donation, but this requires pre-pregnancy counseling that must be taken into account. The most recent ESC guidelines (2018) on cardiovascular diseases during pregnancy<sup>2</sup> specifically state that Turner syndrome is a contraindication for pregnancy (modified World Health Organization level IV) with an aortic diameter greater than 25 mm/m<sup>2</sup>. Moreover, the possibility of both type A and type B dissection is present, and therefore careful and periodic aortic assessment should be performed, especially during pregnancy. The guidelines recommend the creation

of pregnancy heart teams in order to assess risk prior to and during pregnancy and also to decide the time and mode of delivery. The review by Donato and Ferreira helps increase knowledge and awareness of this condition and compels us to consider the creation of multidisciplinary work teams for both diagnosis and follow-up. We thank the authors.

### Conflicts of interest

The authors have no conflicts of interest to declare.

### References

1. Donato B, Ferreira MJ. Cardiovascular risk in Turner syndrome. *Rev Port Cardiol.* 2018;37:607–21.
2. Regitz-Zagrosek V, Roos-Hesselink JW, Bauersachs J, et al., ESC Scientific Document Group. 2018 ESC Guidelines for the management of cardiovascular diseases during pregnancy. *Eur Heart J.* 2018;39:3165–241.

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