Complications of long-term Prostaglandin E1 use in newborns with Ductal-Dependent critical congenital heart disease

Prostaglandin E1 (PGE1) has been used for decades in the medical treatment of ductal dependent critical congenital heart disease in neonates. We report a retrospective evaluation of the long-term effects of PGE1 in a neonatal intensive care unit in Saudi Arabia. There were 22 subjects with a wide spectrum of cardiac defects maintained on PGE1 for a mean of 38 days (range: 6-200 days). The majority of complications included hypokalemia, hypotension and apnea/bradycardia. Pseudo-Barrett syndrome and gastric outlet obstruction were also found. While long-term administration of PGE1 in North America is rare, it is important to be aware of possible adverse effects of fluid and electrolyte imbalance, gastric outlet obstruction and feeding difficulties.

Biography

M. Terese Verklan has received her Bachelorette of Nursing in 1982 and her Bachelor of Arts (Sociology/Psychology) in 1984 from the University of Manitoba. She has completed her graduation from the University of Pennsylvania in 1987 with a master’s in nursing, specializing in Perinatal and Neonatal Nursing. She then joined the University of Texas Houston Health Science Center as an Assistant Professor and was promoted to Associate Professor after two years. Currently she is a Professor at the University of Texas Medical Branch in the Graduate School of Biologic Sciences and the School of Nursing. She is recognized as a Clinical Expert and Educator in the care of high-risk neonates and consults worldwide. She is an Associate Editor for Nursing and Health Sciences and a Contributing Editor for Journal of Perinatal and Neonatal Nursing. She has received numerous awards for clinical practice, education and research, including Excellence in Education from the Association of Women’s Health, Obstetric and Neonatal Nurses and is a 2010 Fellow of the American Academy of Nursing.

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