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Can in utero fetal pacing cause cardiac complications?



TO THE EDITORS: I read with interest what seems to be the first-ever report of successful in utero transesophageal pacing.¹ The authors had successfully adopted a technique known to treat newborns with tachyarrhythmia to the fetus. Fetal transesophageal pacing was reasonably undertaken as a last resort to prevent the demise of the hydropic fetus after the failure of medical treatment. In 1995, we reported 3 cases of endoscopic delivery of surfactant to preterm fetuses in labor.²

The flexible fiberscope was inserted under constant endoscopic visual control to avoid possible trauma to the fetus and the mother. Surfactant was injected into the mouths of 3 preterm fetuses through a catheter placed through the biopsy channel of the fiberscope. Fetal heart rate tracings as well as neonatal and maternal outcome are reported for each case.

Clinical thinking at that time was that surfactant are to be delivered as early as possible.

Although the first 3 fetuses showed no major fetal heart rate irregularities during the procedure, we did note deep spontaneous decelerations in a fetus when the endoscope was located between the pharynx and esophagus, forcing us to

terminate the procedure. As more experience in the transesophageal approach to the fetus is being gained, these complications may be encountered. ■

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