Objective: Establish the clinical epidemiology and the diagnostic and therapeutic processes of women suffering from peripartum cardiomyopathy in our environment.

Methods: A retrospective descriptive observational study was conducted with female patients between 15 and 50 years of age with a diagnosis of peripartum cardiomyopathy during the last 10 years in a specialized institution in the city of Medellin.

Results: A total of 17 women with a diagnosis of peripartum heart disease were seen in an institution in the city of Medellin, whose mean age was 31 years with a standard deviation of (6.7) at the time of diagnosis.

Regarding their gynecological history, the average number of pregnancies was 1.0, with 52.9%, the most frequent diseases during pregnancy were obesity and preeclampsia with 23.5% and 18.8%, respectively, for both diseases. Diabetes was found in one patient (5.9%) and 2 had hemorrhage in the first trimester (11.8%); 41.2% of the women had a spontaneous vertex delivery. No woman had a cardiovascular history.

When evaluating the symptoms presented by the patients at the time of diagnosis, it was found that 100.0% started with deterioration of their functional class, 52.9% with edema in the lower limbs, 76.4% with orthopnea and 88.2% with paroxysmal nocturnal dyspnea.

Conclusion: This registry highlights the similarity in the behavior of this pathology with respect to epidemiology, presentation and management with respect to world records. Our data show that peripartum cardiomyopathy occurs with a mode of presentation similar to the rest of the world, pharmacological treatment for heart failure with the combination of beta blockers, ACE inhibitors/ARBs, and diuretics continue to be the fundamental pillar in the treatment of peripartum cardiomyopathy; It is also important to note that peripartum cardiomyopathy remains a serious condition with a high rate of critically ill patients who remain in heart failure after diagnosis and a significant risk of mortality.

Keywords: Peripartum cardiomyopathy; biomarker; pregnancy; Acute heart failure