Tetralogy of Fallot is the most common cyanotic congenital cardiac disease. The hemodynamic changes which are present immediately after abdominal delivery may be resulted with serious, life-threatening multiorgan complications. Therefore the choice of anesthesia is very difficult. We describe the case of pregnant, 33 weeks gestation, with uncorrected tetralogy of Fallot who underwent caesarian section. The epidural anesthesia was performed uneventfully. After having stable vital signs and a good general condition patient was followed up at the intensive care unit for 4 days. She was transferred to the obstetric service. We think that application of epidural anaesthesia with fragmented and increasing doses of slow levobupivacain in pregnant women with tetralogy of Fallot is safe. Nonetheless, this data of ours will grow stronger with the increase of the clinical application amount.

Key words: Caesarean section, tetralogy of Fallot, epidural anaesthesia