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Address congenital heart defects immediately

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About 1 in every 100 newborns, the birth of a child is followed by a warning signal

The birth of a newborn is always a celebration. All parents just want to know that their child is healthy and growing normally. However, for some parents or just about 1 in every 100 newborns, the birth of a child is followed by a warning signal i.e. presence of a congenital heart defect or CHD.

Infants born with CHD, can present with significantly less oxygen than ideal (cyanosis), tend to gain weight more slowly than other babies, rapid and irregular heartbeat, general tiredness, increased respiratory rate, loss of appetite due to constant breathing difficulties and fatigue, frequent respiratory infections such as bronchitis and pneumonia, and most importantly compromised absorption of nutrients from the digestive tract.

With science taking giant leaps in the field of innovation, 85% of infants with CHDs can now survive the defects and lead a near-normal life. With the innovations leading the way for effective and timely management of CHDs, the condition can no longer be treated as a terminal disease.

Understanding the Types of CHDs

While there are many different types of congenital heart defects, they can be categorized into two main categories: Cyanotic and Acyanotic Congenital Heart Disease.

In the case of the child being affected with Cyanotic heart disease, babies experience low levels of oxygen in the blood and are prone to breathlessness and a bluish tint to their skin. In the Acyanotic child, however, interferes with the heart's ability to pump blood correctly secondary to holes in the heart, valvular defects etc.

Take, for instance, Atrial septal defect (ASD) or ventricular septal defects (VSD) is a type of heart wall defects in which the natural walls that exist between the left and right sides and the upper and lower chambers of the heart may not develop correctly, causing the more blood to flow between heart and lungs. This defect puts extra pressure on the heart to work harder resulting in increased workload on heart and lungs.

The Clinical Approach to Managing CHDs

CHDs are often detected at the time of pregnancy using an ultrasound (Foetal echocardiography or anomaly scan). After birth the congenital heart defects are diagnosed when doctor on physical examination finds abnormal pulses or abnormal heart sounds, low oxygen levels etc.The good news is, in many cases, we no longer need to perform an open-heart surgery on an infant that may incur risks such as blood transfusion, blood infections, prolonged hospital stayetc.

Take, for instance, a baby born with ASD/VSD etc can be treated minimal invasive approach – ASD/VSD septal occluders/device without the need for open heart surgeries. Similarly, in case of valvular stenosis (narrowing of the valve) a balloon attached to the catheter is inflated, which helps to stretch or widen the valve and relieve any blockage in the flow of the blood. Such minimal invasive surgeries are now a possibility in many congenital hearts disease condition and has marked impact on how this patients are treated.

Regardless of the situation, the important thing to understand here is that while technology is paving way for a healthier future, it is also our responsibility to take timely actions.

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