

عنوان مقاله:

Evaluation of Clinical Course in Children and Adolescents with Atrial Septal Defects

محل انتشار:

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خلاصه مقاله:

Background Atrial septal defects (ASDs) are the most common third congenital heart defects. This study aimed to evaluate the clinical course of ASDs and the relationship between its complications, location closure and size. Materials and Methods: This cross-sectional study was conducted in the cardiac center of the pediatric ward in Zahedan, Iran. The study was carried out on 529 children with ASD between 2003 and 2018. The ASD children underwent echocardiography and complete examination such as physical exams, ECG and chest X-ray at every visit during follow-up. A diagnosis of ASDs was confirmed by a transthoracic echocardiography. A unique cardiologist applied transthoracic echocardiography to get information about size, location, and the number of the defects as well as hemodynamic information such as pulmonary artery pressure and any associated lesions. The data were analyzed using SPSS software version 20.0. Results: From 529 ASD children, 278 (52.5%) were girls. Most were medium (46.1%). 44.2% were closed by surgery; about 90.9% were secundum. 133 closed spontaneously and 14.6% by device. ASDs size had significant association with closure, location, and complication ($P<0.001$). The sinus venosus occurred in 29 patients, of which 62.07% and 37.93% were medium and large, respectively. PH was observed in nine children, 88.89% were large. ASD closure had significant association with location, and complication ($P<0.001$). From secundums, surgery and occluder devices closed 40.75% and 15.80, respectively. From those closed by surgery, 8.12% had residuals, 10.26% were partial anomalous pulmonary venous connection (PAPVC) as comorbidities, and 3.42% had pulmonary hypertension. Conclusion: From the study concluded ASDs size had significant association with closure, location, and complication and ASDs closure had significant association with location and complication.

کلمات کلیدی:

Atrial Septal Defect, Children, Clinical course

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