

عنوان مقاله:

Congenital Heart Defects in Children with Upper Gastrointestinal Anomalies

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نویسندگان:

Hassan Mottaghi Moghaddam Shahri - Faculty of Medicine, Mashhad University of Medical Sciences, Mashhad, Iran

Fatemeh Soltan Zeghebizadeh - Department of Pediatrics, Mashhad university of Medical Sciences, Mashhad, Iran

Sina Afzoon - Department of Pediatrics, Mashhad university of Medical Sciences, Mashhad, Iran

Hamid Reza Kianifar - Mashhad Universi of Medical sciences, Mashhad, Iran

Zahra Abbasi - Akbar Clinical Research and Development Unit, Mashhad University of Medical Sciences, Mashhad, Iran

خلاصه مقاله:

Background: Congenital heart defect (CHD) is one of the leading causes of neonatal death. Although the majority of CHDs are isolated, a significant number of them are associated with noncardiac anomalies. Esophageal Atresia (EA)/Tracheoesophageal Fistula (TEF) is the most common congenital disorder of the upper GI tract. It is estimated that up to 70% of EA/TEF infants have other associated congenital anomalies such as CHD. This study determined the proportion of heart anomalies among the diseases of the upper GI tract in Imam Reza Hospital of Mashhad. Methods: The records of 38 infants with upper GI obstruction who were referred to the Pediatric Cardiology Clinic of Imam Reza Hospital in Mashhad between 2001 and 2017 were evaluated in this retrospective study. Data were coded and entered into SPSS software (version 16) and analyzed using Chi-square and T-test. Results: In this study, 38 babies with upper GI obstruction were evaluated (20 patients were female, 52.6%), and the average birth weight was 2.390 ± 0.170 gr. Among the parents, 13 patients (34.2%) were relative (third-degree or more) and 25 patients (65.8%) were nonrelative. The initial and final diagnosis was different at 14 pt (36.8%) that was confirmed with echocardiographic findings. CHDs were divided into two groups in this study. Malformations such as PFO (patent foramen ovale) or FMV without MR (floppy mitral valve without mitral regurgitation) considered as non-important congenital heart diseases. Other malformations that require interventional or medical management such as VSD, ASD, TOF, or other CHDs are considered important CHDs. Nineteen pt (50%) had important CHD and 16 pt (42.1%) had non-important CHD and 3 pt (7.9%) had normal echocardiographic findings. Conclusion: The heart defect is the most common associated anomaly in children with EA/TEF, which is divided into two subgroups. The first important one is CHD, which is effective in gastric surgery and management, and VSD is the most common type. The other group is non important CHD such as PFO or FMV without MR that are not effective in their management. The patients with EA/TEF are at risk for low birth weight and preterm delivery.

کلمات کلیدی:

cardiac malformation, Congenital disorder, Esophageal atresia, neonate, tracheoesophageal fistula

