PERCUTANEOUS ASD & VSD CLOSURE OF A 4 MONTHS OLD INFANT IN THE SAME SESSION

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OBJECTIVE
Percutaneous closure of septal defects is a successful treatment modality that has been used for a long period of time in children. Our main objective in this case report is to present the transcatheter closure of atrial and ventricular septal defects of four months old infant in the same session. As far as we know this case is the youngest patient on whom percutaneous VSD closure was done in the same session with ASD closure.

HISTORY AND PHYSICAL
Four months old boy with tachypnea, tachycardia diagnosed to have aneurysmatic perimembranous ventricular septal defect (VSD) sized 4 mm and atrial septal defect (ASD) sized 8 mm. Anti-congestive treatment was started but despite treatment, his symptoms continued and he was hospitalized 3 times for lower respiratory tract infections.

INDICATION FOR INTERVENTION
Surgery was found as too risky because his lung parenchyma was not good and body weight was low. Therefore transcatheter closure was planned.

INTERVENTION
VSD was closed with 4x4 Amplatzer® Ductal Occluder II device, ASD with 9 mm sized Amplatzer® Septal Occluder. In his first month control his complaints relieved and body weight was increased to 6.2kg.

LEARNING POINTS OF INTERVENTION
Percutaneous ASD and VSD closure is being done safely in children, but for the first time, percutaneous VSD closure was done in an infant with low body weight in the same session with ASD closure successfully. This case will be an encouraging example for the future.

KEYWORDS
ASD, VSD, infant, percutaneous closure