



TRANSCATHETER OUTLET- TYPE VSD CLOSURE IN SMALL CHILDREN

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Background:

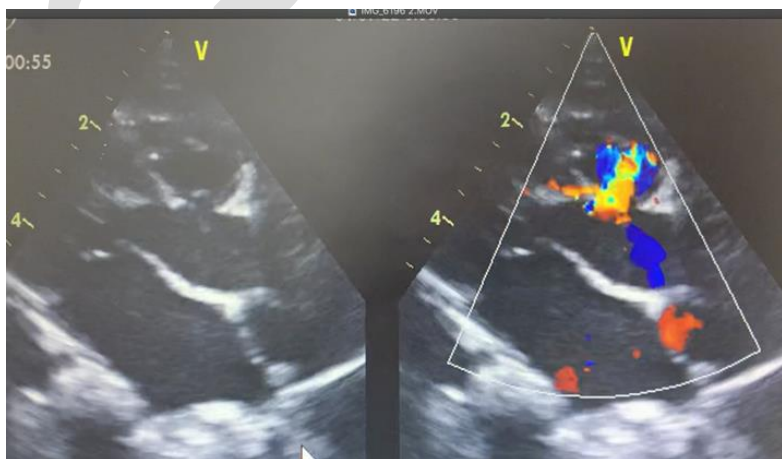
Outlet-type VSD is frequently associated with aortic valve prolapse that surgery is frequently required. The literature regarding outcomes of transcatheter closure of outlet-type VSDs, especially in small children is scant. We present a case of transcatheter closure of outlet-type VSDs complicated with AVP by using Amplatzer Duct Occluder II (ADO II) in 7kgs baby.

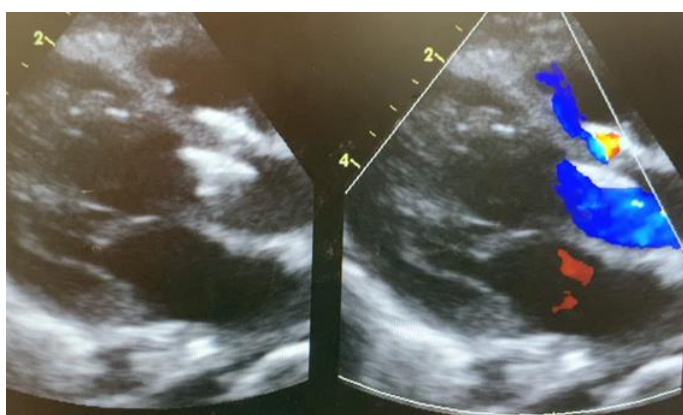
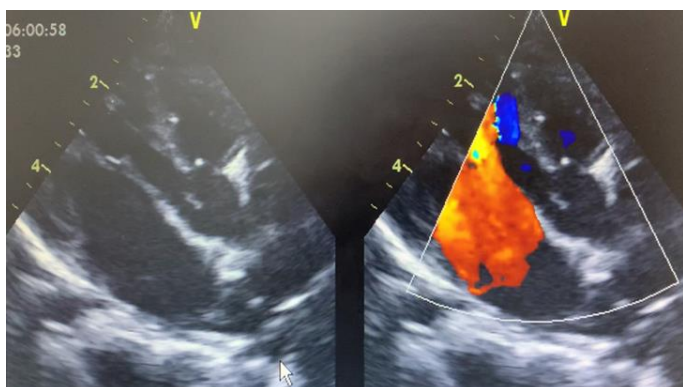
Method:

Several case reports

Results:

An eight- month-old 7 kg baby with recurrent pneumonia. Echocardiography show 5mm outlet-type VSD with right coronary cusp prolapse. Two 5 Fr sheath was used for the femoral vein and femoral artery. We at first attempted to close the VSD retrogradely by making an veno- arterial guirewire loop. However, her heart was too small to close the VSD from the venous site. We then successfully close the VSD anterogradely from the arterial site with 5/4 mm ADO II device. Echocardiography after VSD closure show improved cardiac function with no aortic nor tricuspid valve regurgitation.







Conclusion:

Transcatheter closure of outlet-type VSDs with ADO II is feasible. Although no significant aggravation of AR was observed in the short-to-mid-term follow-up, long-term follow-up is mandatory.

CSI EDUCATION