

WCC 2016-108 : Adult Presentation of Congenital Heart Diseases - Three Case Reports-

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Introduction Most of the congenital heart diseases manifest during infancy or childhood with small proportion presenting at adult age as that of an acquired heart disease. Ostium Secundum Atrial Septal Defect is the one among congenital heart disease which presents in adults. Presentation will be of heart failure or with arrhythmias. Tetralogy of fallot with pulmonary atresia usually presents with cyanosis at birth and die by 2 years of age, but those with patent ductus arteriosus and systemic collaterals may be asymptomatic. Patent Ductus arteriosus is the acyanotic congenital heart disease which presents in the second decade with PAH.

Case Reports:

1. A 70yr old female was referred for surgical fitness to department of cardiology. On evaluation she had incomplete RBBB on ECG. 2Decho showed 1.8cm ostium secundum ASD with left to right shunt. On history evaluation there was no significant history in the past with regards to features of increased pulmonary blood flow that is recurrent respiratory tract infections. Her obstetric history was uneventful. Large ostium secundum ASD with left to right shunt with no features of RA,RV dilation being asymptomatic till 7th decade is rare and hence being presented.
2. A 25 year female presented with bilateral pedal edema, shortness of breath and palpitations . she was referred for evaluation from maternity hospital. On evaluation she had recurrent SVTs which were reverted with sinus rhythm with adenosine. Patient was stabilised with decongestive therapy. Echocardiography revealed overriding of aorta 50% , ventricular septal defect and pulmonary atresia. A diagnosis of cyanotic congenital heart disease, Tetralogy of Fallot with pulmonary atresia was made. Patient was stabilised and referred for CT aortography to delineate aortopulmonary collaterals. Her developmental history was uneventful and she gave birth to a live child normal delivery with no complications. Cyanotic congenital heart disease, TOF with pulmonary atresia presenting in second decade is rare.
3. A 42 year female presented with shortness of breath and palpitations. On examination she had central cyanosis .At rest her saturation at room air was 86%. On auscultation systolic murmur at left 1st and 2nd intercostal space heard.ECG was showing biatrial enlargement, LVH. Chest X Ray showed enlarged pulmonary arteries with mild cardiomegaly. ECHO showed 8mm PDA with bidirectional shunt with dilated pulmonary arteries of 8 cms at main pulmonary artery

before bifurcation. PDA usually presents in second decade. Pulmonary arteries are aneurysmally dilated in ostium secundum ASD but very rarely in PDA and hence reported.

Conclusion: Three case reports of adult presentation of congenital heart diseases, each of which usually presents in childhood or early adulthood.