

Opinion

Common Heart Defects at Birth

Jonathan Roth*

Department of Cardiology, Queen Elizabeth Hospital, Birmingham, England

DESCRIPTION

Congenital heart disease is another way to show that someone had a heart problem at birth. There may have been a small hole in the heart or something more serious. These conditions can be serious, but many can be treated by surgery. In some cases, your doctor can detect these problems in your baby before giving birth. Sometimes it is diagnosed in childhood or adulthood. If you or your baby has a congenital heart defect, it may be asymptomatic or completely absent until adulthood. This is a problem that occurs when the baby's heart develops during pregnancy before the baby is born.

Congenital heart disease is the most common congenital defect. The baby's heart begins to develop at conception, but is fully formed by the 8th week of pregnancy. Congenital heart disease occurs during the important first eight weeks of baby development. Certain steps must be performed for the heart to form properly. Congenital heart disease is often the result of one of these procedures not being performed in a timely manner. For example, a hole may be left where a partition should be formed, or a single blood vessel may be left.

Serious Congenital heart Disease causes a group of heart defects that cause severe life-threatening symptoms and require intervention within the first few days or the first year of life. Congenital heart disease is often treatable if detected early. This can include a variety of structural heart problems, as well as abnormal heart rhythms. These problems can range from mild (does not require heart surgery) to severe (requires several different stages of open heart surgery). Congenital heart disease may include abnormalities or defects in the ventricles, holes in the heart, abnormal connections in the heart, and abnormalities in heart function or compression. Most congenital heart diseases affect patients from childhood to adulthood.

Some babies affected by congenital heart Disease may appear healthy at first and behave, but can have serious complications within hours or days of birth. Pulsed oximetry newborn screening is a non-invasive test that measures the amount of oxygen in the blood and helps identify infants who may be affected by congenital heart disease before leaving the newborn nursery. If detected early, infants affected by Congenital heart Disease can be treated and lead a longer and healthier life.

It may be too tight or it may be completely closed. This makes it difficult for blood to pass through. Sometimes it doesn't even go through. Also, the valve may not close properly and blood may flow back. Problems with the wall of the heart these can be problems between the heart's atria (atria and ventricles). The holes and passages between the left and right sides of the heart can mix. These can lead to heart failure. This means that the heart is not pumped as efficiently as it needs to be. In babies, this can cause blood that should go to the lungs to go to other parts of the body instead, or vice versa. These defects deprive the blood of oxygen and can lead to organ failure.

If child has a congenital heart disease, it is important to see a cardiologist on a regular basis. A cardiologist can perform many tests to assess heart problems. A cardiologist will check your medical history and perform a physical examination. He or she may also order an electrocardiogram a chest x-ray or an echocardiogram (ultrasound film of the heart). Blood tests are especially important in patients with cyanosis and single-cavity hearts who are being treated with the Fontana procedure.

After the test is complete, the cardiologist will explain the results and whether follow-up is required. The initial test may not provide sufficient information for a complete diagnosis and may require further testing. These include cardiac catheterization and angiography, Magnetic Resonance Imaging (MRI) and CT scans, Halter recording, and stress tests.

Severe heart problems generally become apparent in the first few months after birth. Some babies are blue shortly after birth or have very low blood pressure. Other defects cause dyspnoea, eating disorders, or loss of weight gain. Minor defects are most commonly detected in routine health examinations. Minor defects rarely cause symptoms. Most children's heart murmurs are normal, but they can also be due to defects.

Correspondence to: Jonathan Roth, Department of Cardiology, Queen Elizabeth Hospital, Birmingham, England, E-mail: jonathan@roth.eg Received: 31-Dec-2021, Manuscript No. jnb-22-329; Editor assigned: 03-Jan-2022, Pre QC No. jnb-22-329 (PQ); Reviewed: 17-Jan-2022, QC No. jnb-22-329; Revised: 21-Jan-2022, Manuscript No. jnb-22-329 (R); Published: 31-Jan-2022, DOI: 10.35248/2167-0897.22.11. 329. Citation: Roth J(2022) Common Heart Defects at Birth. J Neonatal Biol.11:329.

Copyright: © 2022 Roth J. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.