

Dept of Neonatology

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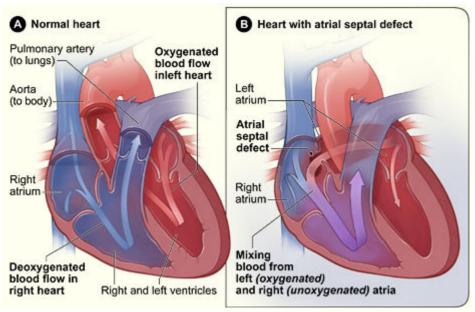
ATRIAL SEPTAL DEFECT (ASD)

What are an atria and a ventricle?

There are four chambers in the heart. The two small chambers are called atria and the two large chambers are called ventricles. The right atrium receives deoxygenated (blue) blood from the body and pumps it to the right ventricle which then pumps the blood to the lungs to be oxygenated. The left atrium receives oxygenated (red) blood from the lungs and pumps it to the left ventricle which then pumps the oxygenated blood to the body.

What is a septal defect?

A septal defect is a hole in the membrane separating the two atria.



http://www.web-books.com/eLibrary/Medicine/Cardiovascular/ASD.htm

How is an ASD diagnosed?

When medical or nursing staff listens to your baby's heart they may hear a murmur. A murmur is a noise. Like water flowing in a river, when it comes to a bend the water then makes noise. Blood is similar. When blood flows along smooth surfaces it makes little noise, but if it then flows through an opening it will make sound. If a murmur is heard an echocardiogram (ultrasound of the heart) will be performed which will show the hole.

Can there be other problems with my baby's heart?

An ASD may be associated with other abnormalities of the heart. If this is the case the medical officers will talk to you about any other findings. A frequent finding is a patent foramen ovale which is the opening between the two atria normally present in the fetus and closes in the first few weeks and days after birth.

How will this affect my baby?

In most children ASDs will rarely cause a problem. However, if the defect is large it may cause heart failure. Symptoms of heart failure include fast breathing, fast heart rate and poor growth. These symptoms are often controlled with medications until the hole decreases in size or closes.

The majority of ASDs will close spontaneously by 2 years of age. If it has not closed by this time it is unlikely that it will close and may require surgical closure. Surgical closure is recommended to prevent long-term complications in adulthood (heart failure, abnormal heart rhythms and increased risk of stroke).

If you have any further questions please ask the medical and nursing staff.

Approved by Canberra Hospital Neonatal Intensive Care Unit, 2012 Revision Date 2015