# Original Article

# Status of Cyanotic Congenital Heart Disease Below 12 Years Old Children in Combined Military Hospital, Dhaka 3

DOI: dx.doi.org



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Received: 01 OCT 2022 Accepted: 10 OCT 2022 Published: 14 NOV 2022

#### Published by:

Sheikh Sayera Khatun Medical College, Gopalganj, Bangladesh



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### **ABSTRACT**

Introduction: Congenital heart disease (CHD) is defined as structural, functional, or positional abnormalities of the heart that are present from birth and can appear at any point after birth or not at all. Congenital heart illnesses are a dynamic set of abnormalities that begin in fetal life and alter significantly during postnatal development, rather than a permanent anatomic abnormality that appears at birth. The majority of congenital cardiac defects appear six weeks after conception, and most defects that are compatible with six months of intrauterine life allow for live delivery.

Numerous studies conducted in many places throughout the world have determined that the incidence of congenital cardiac disease is 8-10 per 1000 live births. The incidence of congenital cardiac disorders was estimated to be up to 25/1000 live births in research done at CMH Dhaka. Congenital cyanotic heart disease makes up only about a quarter of all congenital cardiac abnormalities. These days, newborn children with various kinds of congenital cyanotic heart disease are a typical occurrence. Early diagnosis and treatment of newborns with congenital cyanotic cardiac disorders is now a priority for neonatologists and pediatricians. Diagnostic services are also accessible in a number of locations. So, to detect congenital cyanotic heart disease an individual status record from an ideal center of our country is a demand of the time which led to carrying out this study. Aim of the study: The aim of the study was to find out the status of Cyanotic Congenital Heart Disease below 12 years old children in Combined Military Hospital, Dhaka. Methods: This cross-sectional study was carried out at the Pediatric Cardiology Department of Combined Military Hospital, Dhaka Cantonment, Dhaka, from 1st January 2015 to 31st December 2015. A total of 48 patients were selected among patients with cyanotic congenital heart disease who were admitted to the Combined Military Hospital, Dhaka during the study period. **Result:** Amongst the 48 patients who were finally

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analyzed, the status of cyanotic congenital heart disease was 4.9 per 1000 hospitalized patients and tetralogy of Fallot was the most common (56%) type of congenital cyanotic heart disease, others were transpositions of great vessels, a total anomaly of pulmonary venous return and Ebstein anomaly. Most of the patients presented with bluish discoloration of the skin, and mucus membrane. The majority had cyanosis and murmur. Hundred percent of cases ECHO was abnormal. Maximum patients were male and the mean age was  $3.44 \pm 3$  yrs. The economic status of the families affected the disease process significantly. **Conclusion:** The status of cyanotic congenital heart disease was 4.9 per 1000 hospitalized patients and Tetralogy of Fallot was the commonest cyanotic heart disease with a frequency of 56%, Bluish skin was the commonest symptom 38(79%)

**Keywords:** Congenital, Cyanotic, Pattern, Heart Disease

(The Insight 2022; 5(1): 155-163)

#### INTRODUCTION

Congenital heart disorders (CHD) are one of the most common types of birth abnormalities, accounting for around 1% of all human deformities. Numerous studies conducted in many places throughout the world have determined that the incidence of congenital cardiac disease is 8-10 per 1000 live births. In research done at CMH Dhaka, the incidence of congenital cardiac disorders in Bangladesh was estimated to be up to 25 per 1000 live births in a year. The incidence is higher in stillborn (3-4%), spontaneous abortuses (10-25%), and premature infants. **Infants** with congenital cardiac abnormalities have a wide range of severity: around 2-3 out of 1,000 newborns will develop symptoms of heart illness within the first year of life. In 40-50 percent of patients with congenital heart disease, the diagnosis is made by one week of age, and in 50-60 percent of patients, the diagnosis is made by one month of age. Cyanotic Congenital heart disease makes up only about a congenital guarter of all cardiac abnormalities.<sup>2</sup> Common cvanotic congenital heart defects includes-**Tetralogy** Fallot (TOF) of Transposition of great arteries (TGA) 3-5%, Hypoplastic left ventricle 1-3%, **Truncus** arteriosus 1-2%. anomalous pulmonary venous return

(TAPVR) 1-2%, Tricuspid atresia 1-2%, Single ventricle 1-2%, Double-outlet right ventricle (DORV) 1-2%. Congenital cyanotic heart disease refers to a group of many different heart defects that are present at birth that result in a low blood oxygen level.<sup>3</sup> A common symptom is a bluish tint to the skin, called cyanosis. Cyanotic congenital heart disease has become increasingly important in recent years because it is one of the important causes of morbidity and mortality in Because of a hereditary component, a newborn will be born with cvanotic heart disease circumstances. When there is a family history of congenital heart disease, a newborn is more vulnerable. syndrome, Turner syndrome, Marfan syndrome, and Noonan syndrome, as well as Ellis-van Creveld syndrome, can all be accompanied by abnormalities that cause cyanotic cardiac disease.4 During pregnancy, infections (such as TORCH) and diabetes are additional factors.4 Congenital cyanotic heart disease can be caused by a variety of physical cardiac abnormalities. Some babies are born with several defects. This study is undertaken to see the status of cyanotic congenital heart disease among the patients reported to the combined military hospital in Dhaka. Patients were selected by appropriate inclusion criteria and sampling was done by the purposive convenient method. No other studies had documented this status of cvanotic congenital heart disease. This study will help to find out the incidence, pattern, and clinical profile of congenital cyanotic heart disease admitted to the Pediatric cardiology ward, CMH Dhaka. Congenital heart disorders significant structural cardiac and/or major vascular abnormalities that are evident at birth or continue after birth.5 Due to a lack of access to medical treatment and funding to conduct extensive population research, the real incidence and prevalence of congenital cyanotic heart disease in Bangladesh remains unclear. This study will help to determine the status of various cyanotic congenital cardiac lesions present in the neonatal period and thereafter. These findings will have implications for the development of cardiac services in other tertiary care Centres in Bangladesh.

# **OBJECTIVE**

## **General Objective**

- To find out the status of cyanotic congenital heart diseases in children below 12 years old who are admitted to Combined Military Hospital, Dhaka
- To find out the types of cyanotic congenital heart diseases in children below 12 years old who are admitted to Combined Military Hospital, Dhaka
- To find out the presentation of congenital cyanotic heart diseases in children below 12 years old who are admitted to Combined Military Hospital, Dhaka

#### **METHODS**

This cross-sectional study was conducted at the Department Pediatric Cardiology, Combined Military Hospital. Dhaka Cantonment. Bangladesh. The study duration was 1 year, from 1st January 2015 to 31st December 2015. A total of 48 patients with cyanotic congenital heart disease were taken who were admitted to Combined Military Hospital, Dhaka during the study period. Informed written consent was obtained from the participants of the present study, and ethical approval was also obtained from the ethical review committee of the study hospital. Data was collected from the parents or guardians of the patients as well as from examination findings of the patients and investigation reports eg. Chest X-rays, ECG. and Echocardiography. Collected data were processed and analyzed using computer software SPSS (Statistical Package for Social Sciences). Data were presented as the percentage of the total number of observations. The test statistics used were descriptive, the Chi-square test, and 'the t-test (for comparison of categorical data). P values less than 0.05 were considered statistically significant. Data was collected using a structured questionnaire containing all the variables of interest and from investigation reports. Collected data was checked daily and edited (if necessary).

#### **Inclusion Criteria**

- Age <12 years
- Patients whose guardians had given consent to participate in the study.
- Cases of cyanotic congenital heart disease diagnosed clinically and by a non-invasive procedure.

#### **Exclusion Criteria**

Patients 12 years or older

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• Afflicted with other chronic conditions

#### **RESULTS**

During the study period, a total of 48 patients were included and a final analysis was done. Details of the study observations and results are described in the following.

**Table 1:** Status of cyanotic congenital heart disease in this study patients

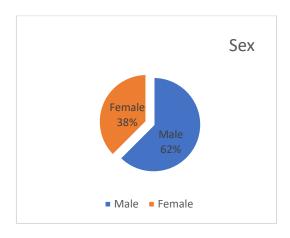
| Month | Total no of<br>hospitalized<br>patients | No new<br>patients | Status-<br>Incidence                         |
|-------|---|--------------------|--|
| Jan   | 820                                     | 04                 |  |
| Feb   | 795                                     | 03                 |  |
| March | 837                                     | 05                 |  |
| April | 840                                     | 04                 |  |
| May   | 816                                     | 05                 | р  |
| June  | 845                                     | 03                 | lize   |
| July  | 832                                     | 06                 | oita]  |
| Aug   | 835                                     | 03                 | dso  |
| Sep   | 804                                     | 04                 | ų Jc   |
| Octo  | 816                                     | 04                 | 00   |
| Nov   | 768                                     | 04                 | 10(<br>1ts                                   |
| Dec   | 788                                     | 03                 | <b>4.99/1000</b> of hospitalized<br>patients |
| Total | 9796                                    | 48                 | <b>4.</b> 9                                  |

Table I shows the status-incidence of cyanotic congenital heart disease in hospitalized patients is 4.99 per 1000 hospitalized patients

**Table 2:** Age distribution of the study patients (n=48)

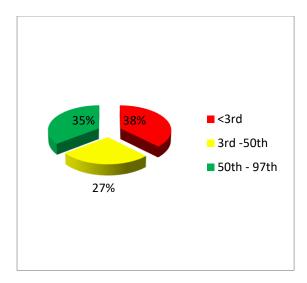
| Age<br>(years) | Frequency | Percent (%) | Mean±SD<br>(Age) |
|----------------|-----------|-------------|------------------|
| 1D - 2         | 21        | 43.75       |                  |
| >2 - 5         | 13        | 27.08       | 3.44             |
| >5             | 14        | 29.16       | ± 3              |
|                |           |             | yrs              |

Table II shows the age distribution of the study patients. The majority of the patients belonged to the 1 Day - 2 years of age group (43.75%). The mean age was found  $3.44 \pm 3$  years.



**Figure 1:** Pie chart showing the sex distribution of the study patients

Figure 1 shows maximum (62%) of patients were male and 38% were female.



**Figure 2:** Pie chart showing the weight distribution of the study patients

The pie chart shows that 18 (38%) patients were below the 3rd centile, 13(27%) in between the 3rd to 50th centile, and 17(35%) in between the 50th to 97th centile.

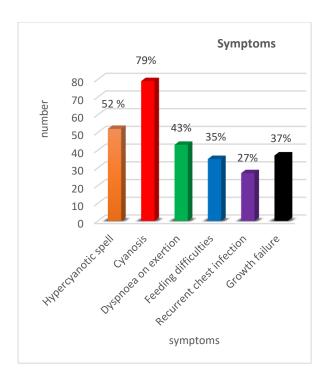
**Table 3:** Sex distribution with the pattern of cyanotic congenital heart disease (N-48)

| Pattern  | No of<br>patient | Male | Female | M: F      |
|--|------------------|------|--------|-----------|
| Tetralogy of<br>Fallot                           | 27               | 18   | 09     | 2:1       |
| Transposition of great arteries                  | 12               | 07   | 05     | 1.4:<br>1 |
| Total<br>anomalous<br>pulmonary<br>venous return | 03               | 2    | 1      | 2:1       |
| Ebstein<br>anomaly                               | 03               | 2    | 1      | 2:1       |
| Truncus<br>arteriosus                            | 02               | 1    | 1      | 1:1       |
| Tricuspid<br>atresia                             | 01               | 1    | 0      | 1:0       |

**Table 4:** Pattern of cyanotic congenital heart disease in all patients (N-48)

| Types of cyanotic congenital heart disease | No of patient | Percentage |
|--|---------------|------------|
| Tetralogy of Fallot                        | 27            | 56%        |
| Transposition of great arteries            | 12            | 26%        |
| Total anomalous pulmonary venous return    | 03            | 6%         |
| Ebstein anomaly                            | 03            | 6%         |
| Truncus arteriosus                         | 02            | 4%         |
| Tricuspid atresia                          | 01            | 2%         |
| Total                                      | 48            | 100%       |

Table 4 shows the types of cyanotic congenital heart diseases in this study's patients. TOF was found in 27(56%) cases. TGA was seen in 12(26%) and TAPVR in 3(6%) patients. 3(6%) subjects had Ebstein anomaly and 2(4%) had Truncus arteriosus. Tricuspid atresia was found in 1(4%) patient.



**Figure 3:** symptoms of cyanotic congenital heart disease of the study patients

\*Multiple symptoms were present in singular patients

Figure 3 is showing the symptoms of the study patients. Hypercyanotic spell was found in 25(52%) cases. Bluish skin was seen in 38(79%) and dyspnea on exertion in 21(43%) patients. 17(35%) subjects had feeding difficulty and 18(37%) had growth failure. Recurrent RTI was found in 13(27%) patients.

**Table 5:** Important physical findings in cyanotic congenital heart disease (N=48)

| Physical findings  | No of patient | Percentage |
|--------------------|---------------|------------|
| Cyanosis           | 32            | 67 %       |
| Clubbing           | 13            | 27 %       |
| Precordial bulging | 03            | 06 %       |
| Palpable P2        | 00            | 00%        |
| Murmur             | 39            | 81 %       |

| Abnormal<br>heart sound | 07 | 15 % |
|-------------------------|----|------|
| Tachycardia             | 05 | 10 % |
| Hypertension            | 02 | 04 % |

# \* Multiple findings were present in singular patients

Table 5 shows the physical findings of the study patients. Cyanosis was found in 32(67%) cases. Clubbing was seen in 13(27%) and murmur in 39(81%) patients. 7(15%) subjects had abnormal heart sounds and 5(10%) had tachycardia. Hypertension was found in 2(4%) and precordial bulging in 3(6%) patients.

**Table 6:** Positive Investigations findings in cyanotic congenital heart disease (N=48)

| Investigation | positive<br>findings<br>percentage | Percentage |
|---------------|------------------------------------|------------|
| Chest X-ray   | 31                                 | 65 %       |
| ECG           | 35                                 | 73 %       |
| ЕСНО          | 48                                 | 100 %      |

Table 6 shows 48 (100%) patients had positive ECHO findings, 35(73%) had positive ECG and 31(65%) patients had a positive chest x-ray.

**Table 7:** Economic status of children (n=48)

| Economic<br>Status | Frequency | Percent<br>(%) |
|--------------------|-----------|----------------|
| High average       | 08        | 17             |
| Average            | 38        | 79             |
| Poor               | 02        | 04             |
| Total =            | 48        | 100.0          |

In this study economic status was evaluated by following the income range of the families. The social groups were determined as shown below;

High average: >15,000 taka/month Average: 7,000- 15,000 taka/month

Poor: <7,000 taka/month

Most of the patients (79%) are belongs to the average socioeconomic status.

#### DISCUSSION

A congenital heart defect (CHD) is an anatomic anomaly of the heart or major arteries that develops during fetal development and is apparent at any age.6 Congenital cardiac defects can be classified as acyanotic or cyanotic depending on whether the individuals develop clinical cyanosis. Due systemic venous blood bypasses, the pulmonary circulation is shifted to the left side of the heart in cyanotic congenital cardiac defects. As a result, there is systemic arterial desaturation. Cyanosis produced by intrapulmonary right-to-left shunting and pulmonary venous desaturation due to congestive heart failure is not classified as cyanotic CHD.6 Right-to-left shunts are frequently caused by numerous cardiac abnormalities. Right-to-left shunts and cvanosis are caused by obstructions to pulmonary blood flow (such as tetralogy of Fallot), a complete admixture of pulmonary and systemic venous returns (such as total anomalous pulmonary venous return and double-inlet left ventricle), and parallel rather than inseries circulation (such as transposition of the great arteries). This is a crosssectional study that was carried out in Combined Military Hospital Dhaka during the study period. To the best of our knowledge, no such study was conducted in Bangladesh prior to this one. During the period January 2015 to December 2015, a total number of 48 admitted patients were included in this

study. The present study findings are discussed and compared with previously published relevant studies. In the current study, it was observed that a total of 9796 patients and a total of 48 new cyanotic congenital heart disease patients were admitted to CMH, Dhaka during the study period. The incidence rate of congenital cyanotic heart disease 4.99 was per thousand among hospitalized patients. This finding is consistent with the study of NN Fatema<sup>7</sup> et al (5.2%) and NN Fatema<sup>8</sup> et al (3.89%). In this study majority of the patients belonged to 1Day - 2 years of age group (43.75%) and the Mean  $\pm$  SD (Age) was  $3.44 \pm 3$  years. This finding is consistent with the findings of Fazlur Rahman<sup>9</sup> et al (46%) and MH Sadiq <sup>10</sup> (74%). Similarly, NN Fatema et al (45%) and Mujibul<sup>11</sup> et al (59.83%) found almost the same age range in their studies. In this study, we found most of the patients were male (62%) and 38% were female. This finding is also consistent with the study of H Khadija  $N^{12}$  et al (77%). Similarly, this finding is also comparable with the findings of NN Fatema<sup>7</sup> et al (58%), L Shamima Sharmin<sup>13</sup> et al (56.5%), and Mujibul<sup>11</sup> et al (63.25%). We have also seen that most of the patients had growth failure (38%). This finding is also consistent with the study of L Shamima Sharmin<sup>13</sup> et al (41.7%) and MH Sadiq<sup>10</sup> (33.4%). 27% of patients in between the 3rd to 50th centile and 35% in between the 50th to 97th centile. In this study, we have seen most of them had Tetralogy of Fallot (56%). This finding is consistent with the findings of Fazlur Rahman<sup>9</sup> et al (25%). TGA was seen in 26% and TAPVR in 6% of patients. 6% of subjects had Ebstein anomaly and 4% had Truncus arteriosus. Tricuspid atresia was found in 4% of patients. In TOF, the male and female ratio was 2:1. This finding is consistent with the findings of MH Sadiq<sup>10</sup> (1.6:1) and L Shamima Sharmin<sup>13</sup> et al (4.25:1).

Other cyanotic congenital heart diseases also had male predominance. In the study patients- Hypercyanotic spell was found in 52% of cases. Bluish skin was seen in 79% and dyspnea on exertion in 43% of patients. 35% of subjects had feed difficulty and 37% had growth failure. Recurrent RTI was found in 27% of patients. We have seen most of the had cyanosis (67%).This finding consistent with the findings of Sadiq et al (91%). Murmur had 81% of patients. Clubbing was seen in 27% and murmur in 81 patients. 15% of subjects had abnormal heart sounds and 10% had tachycardia. Hypertension was found in 4% and precordial bulging in 6% of patients. All patients had positive echocardiographic findings, 73% had positive ECG and 65% patients had positive chest x-ray findings. In this study, most of the patients belonged to average socioeconomic status.

*Limitations of The Study* 

The study was conducted in a single hospital with small sample size. So, the results may not represent the whole community.

#### CONCLUSION

This study gives an overview of the types, (incidence, presentation) of cyanotic congenital heart disease in Bangladesh armed forces populations. The incidence of congenital cyanotic heart disease is 4.99 per thousand hospitalized patients. Tetralogy of Fallot and transposition of the great arteries are the most common cyanotic congenital heart defects in children, are discussed. The clinical presentation, and laboratory findings are described. These defects sufficiently distinctive features such that they can be diagnosed.

**Funding:** No funding sources **Conflict of interest:** None declared

**Ethical approval:** The study was approved by the Institutional Ethics Committee

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