ISSN: 2181-4341, IMPACT FACTOR (RESEARCH BIB) - 7,245, SJIF - 5,431

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VENTRICULAR SEPTAL DEFECT

Annotation (Summary Explanation): A Ventricular Septal Defect (VSD) is a congenital condition where there is an abnormal opening in the **septum** dividing the heart's lower chambers (ventricles). This allows oxygen-rich blood from the left ventricle to mix with oxygen-poor blood in the right ventricle, leading to increased blood flow to the lungs. Depending on the size of the defect, symptoms may range from none to serious complications like heart failure or growth delays in infants. Diagnosis is usually through echocardiography, and treatment options vary from watchful waiting to surgical repair.

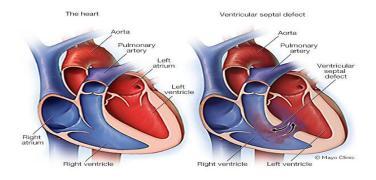
Key Words: congenital heart defect, septum, ventricles, left-to-right shunt, heart murmur, pulmonary hypertension, echocardiogram, cardiac surgery, oxygenated/deoxygenated blood, hemodynamics.

A congenital heart defect is a structural problem in the heart present at birth. One common example is a Ventricular Septal Defect (VSD), which involves an opening in the septum—the wall separating the two ventricles (the heart's lower chambers).

In a healthy heart, **oxygenated blood** from the lungs flows from the left ventricle to the body, while **deoxygenated blood** from the body flows from the right ventricle to the lungs. In a VSD, due to the hole in the septum, blood flows abnormally from the **left to the right ventricle**—a process called a **left-to-right shunt**. This causes extra blood to be pumped into the lungs.

This abnormal flow can be detected by a **heart murmur**, a sound made by turbulent blood flow, which is often the first clue in diagnosis. Over time, if untreated, the increased pressure in the lungs may lead to **pulmonary hypertension**, a serious condition where the lung arteries become stiff or narrow.

Diagnosis is typically confirmed through an **echocardiogram**, a non-invasive ultrasound of the heart that shows the size and location of the defect and the direction of blood flow.



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Depending on the severity, treatment may include monitoring, medications, or **cardiac surgery** to close the defect. Understanding the **hemodynamics**—how blood flows through the heart and vessels—is essential in deciding the appropriate intervention.

Ventricular Septal Defect is a significant **congenital heart defect** that affects the **hemodynamics** of the heart by creating a **left-to-right shunt** between the **ventricles**. Early detection through **echocardiogram** and timely intervention, including **cardiac surgery** when necessary, can prevent complications such as **pulmonary hypertension** and ensure a healthy life. Awareness of related signs like a **heart murmur** and the mixing of **oxygenated and deoxygenated blood** is key in early diagnosis and management.

VSD types

There are four main types of ventricular septal defects. They differ in their location and the structure of the hole (or holes). The types of VSDs are:

Membranous. This is the most common type of VSD. These VSDs happen in the upper section of the wall between your ventricles.

Muscular. These happen in the lower part of the wall. With this type, there's often more than one hole.

Inlet. This is a hole just below the tricuspid valve in your right ventricle and the mitral valve in your left ventricle. When blood enters your ventricles, it must pass a VSD that connects them.

Outlet. This kind of VSD creates a hole just before the pulmonary valve in your right ventricle and just before the aortic valve in your left ventricle. Blood has to go by the VSD on its way through both valves.

Symptoms of a VSD

Ventricular septal defect symptoms in a newborn may look like heart failure. These include:

Shortness of breath, including fast breathing or struggling to breathe

Sweatiness or fatigue during feeding

Growth faltering (slow weight gain)

Frequent respiratory infections

A VSD heart defect in older children and adults can make them feel tired or out of breath during physical activity.

Most people with VSDs don't have symptoms because the hole is less than 3 millimeters around. This is about as big around as a toothpick and isn't large enough to cause symptoms. But if the hole is large enough (or if there are multiple holes), it can cause blood to leak between the two heart chambers. A VSD that's moderate (3 to 5 mm around) to large (6 to 10 mm around or about the size of a pea) may cause symptoms.

What causes a ventricular septal defect?

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A ventricular septal defect doesn't currently have any known causes. But it does sometimes happen along with other issues present at birth, like heart defects, heart conditions or genetic disorders like Down syndrome.

In very rare cases, a heart attack can tear a hole between the ventricles and create a VSD. This type of ventricular septal defect or rupture is technically a side effect. But it's still a dangerous problem that needs to be repaired.

Risk factors

A VSD heart defect is slightly more likely to happen in premature babies and babies with certain genetic conditions. Taking anti-seizure medications (valproic acid and phenytoin) or drinking beverages containing alcohol during pregnancy may also increase the risk of a VSD. But it'll take more research to confirm if these are definite causes.

Conclusion

Ventricular Septal Defect is one of the most common congenital heart abnormalities. Early detection and appropriate management, especially in moderate to large defects, are crucial for preventing complications and ensuring normal development. Advances in pediatric cardiology and surgery have significantly improved outcomes, allowing most children with VSDs to lead healthy, active lives.

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