



## COMPREHENSIVE PEDIATRIC HEART CENTRE

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*Caring for young hearts*

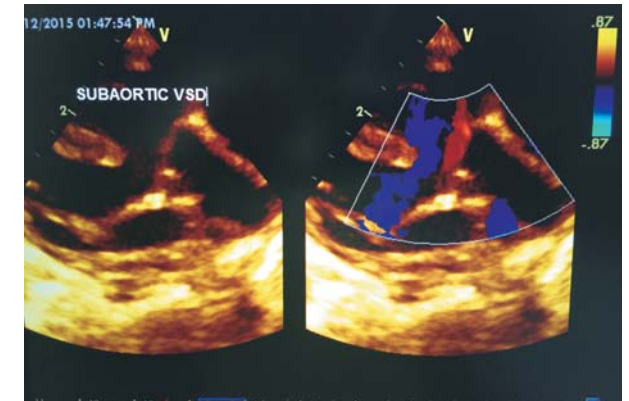
Dear Doctor,

As we all know, managing heart diseases in children has been always challenging due to scarce pediatric heart care facilities and socio-economic factors. Congenital heart disease refers to structural or functional heart diseases which are present at birth; some of these may be discovered later. These are primarily seen in neonates, infants and children; although in our country it is not uncommon to see adults with uncorrected CHD. The burden of CHD in India is likely to be enormous due to very high birth rate.



*Caring for young hearts*

The reported incidence of CHD is 8-10/1000 live births. Nearly one third to half of these CHD are critical, requiring intervention in first year of life. Rapid advances have been taken place in the diagnosis and treatment of CHD over the last 2 decades. With advancement in fetal echocardiography accurate diagnosis of CHD can be made even before birth. With currently available treatment modalities, over 80% of infants born with critical heart disease can survive beyond the first year of life and many can lead normal lives thereafter.



2D Echo and Colour Doppler

Unfortunately majority of children born in developing countries with CHD do not get the necessary care, leading to high morbidity and mortality. Approximately 10% of present infant mortality rate in India may be accounted for by CHD alone. Managing CHD in India is an important issue, often overlooked, despite the enormity of the problem. The resources and infrastructure are abysmally limited.

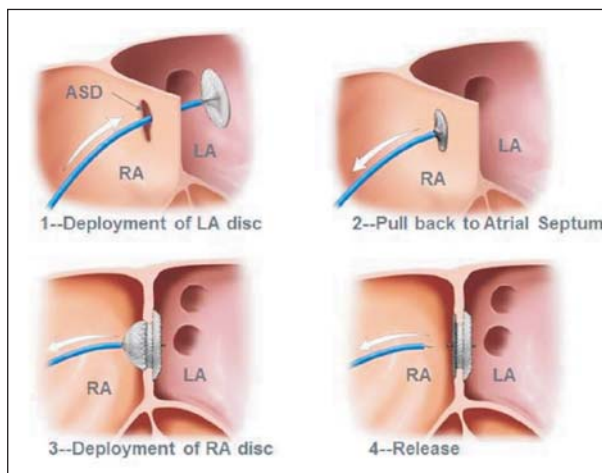
In the past, children born with a heart problem usually required open heart surgery with prominent chest scar. However, trans-catheter interventions allow selective patients to avoid cardiac surgery/scar. Many holes like atrial septal defect (ASD), ventricular septal defect (VSD), PDA can be closed with devices. Balloon

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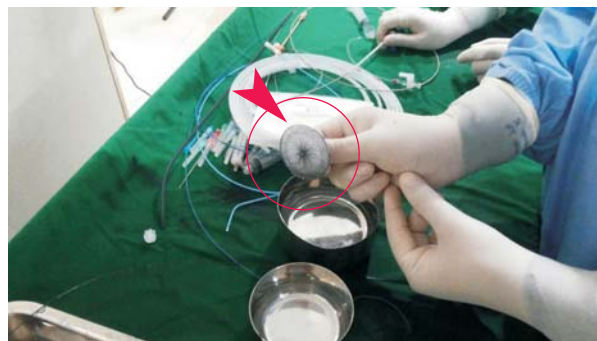
valvotomy for pulmonary and aortic stenosis (blockage of valve) can be also being done through scar less surgery. During these procedures we go through leg vein (femoral vein) using sheath and delivery cable and deploy the device across the hole. Patients are discharged next day. Post interventions children live a normal life without any cardiac medications.



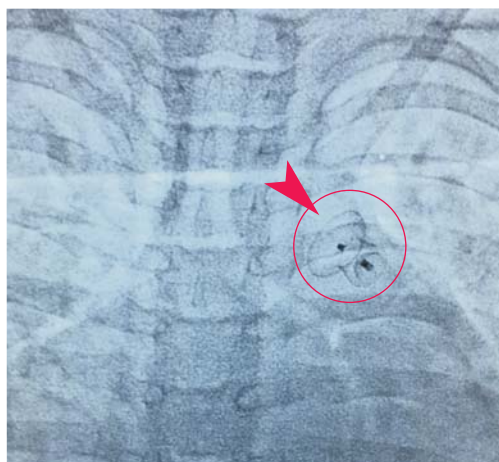
In Cathlab during Intervention



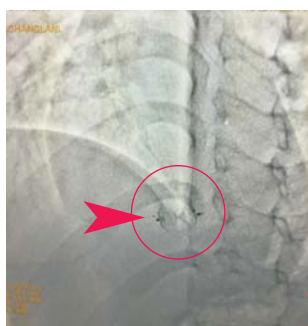
Picture showing ASD device Closure Procedure



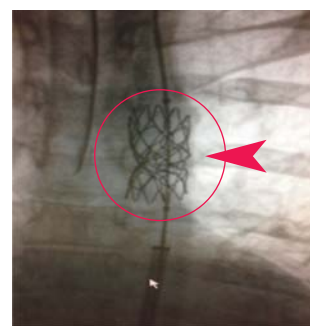
ASD occluder device



PDA occluder device



VSD occluder device



Coarctation Stenting

## SERVICES AT KIDS HEART CENTRE

- Neonatal, Pediatric and adult Echo cardiography including extreme Preterm babies to rule out congenital heart disease
- Pediatric Catheter intervention
  - ASD, PDA, VSD device closures
  - Balloon valvuloplasty for severe aortic and pulmonary valvar stenosis
  - Balloon dilatation/ stenting for coarctation
- Angiography and Hemodynamic study for complex congenital heart disease
- Arrhythmia clinic for children - syncope work up and management of supra ventricular, ventricular arrhythmias in children especially in postoperative children
- Hypertension clinic for children
- Grown up congenital heart disease (GUCH) Clinic  
Follow up of children with corrected CHDs into adult life as well as evaluation and treatment of adults with CHD
- Pulmonary Hypertension clinic for children
- Acquired Pediatric heart disease clinic  
Like Rheumatic heart disease (RHD), Kawasaki disease, Cardiomyopathy (DCM, HOCM, RCM, ARVD)

## KIDS HEART CENTRE

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Email: [kidsheartcentre@gmail.com](mailto:kidsheartcentre@gmail.com)

Timings: 11 AM to 7 PM (with prior appointments)  
SUNDAY CLOSED