





SRCC CHILDREN'S HOSPITAL



Managed by Narayana Health

Haji Ali Park
Mumbai



A
CHALLENGING CASE
OF
HYBRID
PDA 
STENTING
on a
ONE DAY OLD
BABY

One-day old baby, born by caesarean section with birth weight of 2.3 kg, was found to be cyanosed at birth with SpO2 - 65%.

The baby was referred to SRCC Children's Hospital, managed by Narayana Health for cardiac evaluation. The echocardiogram done at 6 hours of life confirmed a diagnosis of **TETRALOGY OF FALLOT WITH PULMONARY ATRESIA.**

This is a duct-dependent pulmonary circulation, and the treatment needs to start within the first few days of life, before the PDA closes spontaneously.

She was admitted to NICU and started on PGE1 infusion to maintain ductal patency. On day 4 of life, she was taken to the cath-lab for ductal stenting, and the procedure was done with a unique hybrid carotid approach, where the carotid artery was accessed with an open carotid cutdown by the cardiac surgeons, and then the interventional pediatric cardiologists proceeded to deploy a stent in the PDA to allow the PDA to remain patent for the next 6-12 months.

She was observed in the cardiac ICU for 72 hours and was discharged home 8 days after the procedure.

The child was on regular follow-up with us since then and returned for the definitive surgical repair of Tetralogy with Pulmonary atresia at 9 months of age.

During the complete repair, the VSD was closed and an RV to PA conduit was used to connect the right ventricle to the pulmonary arteries.

The child is now 2 years of age and is doing well with normal activity and development.

HYBRID PDA STENTING

PDA stenting is the standard first palliation in pulmonary atresia patients, who do not have a main pulmonary artery connecting the right ventricle to the branch pulmonary arteries. PDA stenting is physiologically similar to modified BT shunts, but is preferred at most cardiac centers as the patient condition and post-op course are more stable after stenting.

In this procedure, we place a coronary stent across the PDA, and these patients are then discharged on dual antiplatelet therapy. The patients then return for their complete surgical correction 6-12 months later.

The Bi-Plane Cath Lab at the institute allows us to perform such complex procedures with greater precision and safety.



Dr. Supratim Sen

Paediatric Cardiologist

Expertise:

- Interventional Paediatric Cardiology
- Complex Cardiac Interventions

Dr. Pradeep Kaushik

Paediatric Cardiac Surgeon

Expertise:

- Complex Congenital Heart Surgery
- Paediatric Heart Transplantation



10,000+

children with
heart defects seen
in outreach
program



5,000+

children
underwent heart
surgeries /
procedures



20,000+

children with
heart defects
seen in
OPD


Appointments

1800-309-0309



Emergencies

022-71222333

 1A, Haji Ali Park, Mahalaxmi, Mumbai

 www.narayanahealth.org