Trabalhos Científicos

Título: Lower Respiratory Tract Infection Characteristics Of Hospitalized Young Children With Hemodynamically Significant Congenital Heart Disease In Two Cardiology Centers In Brazil

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Resumo: Introduction: Infants with hemodynamically significant congenital heart disease (hsCHD) are at increased risk for severe Lower Respiratory Tract Infection(LRTI), usually with a complicated clinical course, especially in those patients with RSV infection. Aims: To describe the characteristics of LRTI of hospitalized children with hsCHD at two cardiology centers in Brazil. Methods: Multicenter, descriptive, retrospective cohort study. Eligible subjects were aged <2years, with hsCHD and at least one hospitalization from January-December 2013. Medical chart review was conducted for all eligible children, to collect information on hospitalization characteristics and clinical management of hsCHD, from initial hospitalization until December 2013, death or completion of 2 years old. Results: 489 subjects with 606 hospitalizations were included; 90 subjects had more than one hospitalization. Mean gestational age was 37.7±2.4 weeks, weight at birth 2892.8±596.58 g, and 52.4% were female. A total of 248 (50.7%) subjects presented cyanotic CHD at baseline, and 82.6% had uncorrected cardiac defect with planned surgery. CHD with increased pulmonary blood flow (PBF) (37.8%), CHD with decreased PBF (25.8%), CHD with obstruction to blood progression and no septal defects (16%), and severe CHD incompatible with postnatal blood circulation (12.7%), were the most frequent types of CHD. Median duration of hospitalizations was 21days, admissions were due to CHD complications/interventions (89,4%) or other diagnosis than LRTI (7.1%). The LRTI hospitalization rate due to RSV was 23.3%. Ventilation support was required in 31.2% hospitalizations, and 29.6% had increased supplemental oxygen. Conclusions: The majority of hospitalizations of young children with hsCHD were due to CHD complications/interventions, with frequent admission to ICU. Among hospitalizations due to LRTI, RSV accounted for almost 25% cases, highlighting the importance of prophylaxis in children with hsCHD.