Recognition and Initial Management of Life Threatening Cardiac Problems in the Neonates

Recognition and initial management of serious cardiac problems in the neonates are extremely important and often critical. It remains a challenge for those who provide care for these patients at all levels. Many of the neonates do not show any obvious symptoms and signs suspecting cardiac problems particularly if they are discharged early within the first few days of life. These are usually related to patent ductus arteriosus (PDA) and/or patent foramen ovale (PFO). As a rule, PDA will close after birth and PFO will close or remain probe patent, but has no functioning significance in a normal situation. These structures may behave differently in an abnormal situation. When these structures are intact, typical symptoms of heart failure, cyanosis and findings of poor pulses may not be present. It is important that a high level of suspicion of congenital cardiac anomalies be kept in mind. When the babies do not look right or do not do well without any obvious reasons. Appropriate evaluation and prompt management should be initiated. Early discharged patients may not show any typical symptoms or signs of serious cardiac anomalies when the PDA and PFO are present. It is a great challenge for all of us who take care of these patients. It is important to find some means to recognize these entities and to initiate appropriate treatment which will affect the outcome and consequences.