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Abstract

OBJECTIVES: Structural heart disease (SHD) contributes significantly to the health burden of children in Nigeria, unfortunately comprehensive cardiovascular programme including definitive surgery is currently not available locally. This may have contributed to the paucity of research in paediatric cardiology. Available epidemiologic data are limited and mostly outdated. We studied the current distribution SHD in Lagos and compared findings with reports elsewhere. Problems and prospects associated with cardiovascular care at the study site were highlighted.

MATERIALS AND METHODS: Children referred from public and private health facilities for cardiovascular evaluation including echocardiography between January 2004 and December 2005 were studied. PDA in premature babies, PFO and post surgical SHD were excluded. Proportions and relative frequencies of different heart lesions were calculated and analysed using appropriate statistics.

RESULTS: Congenital heart disease (CHD) significantly outnumbered acquired heart disease (AHD) (p=0.0001) in these children aged 4 weeks to 15 years (mean age = 3.8 +/- 2.5 years); the relative frequencies were VSD (41.7%), VSD (41.7%), ASD (20.2%), TOF (11.8%), AVCD/ECD (7.0%), PDA (5.7%), PS (3.1%), single ventricle and TGA (2.2%) each. PS was dominant in males, while septation defects were dominant in females. Pericarditis with effusion (31%), RHD (28.6%), myocarditis (14.3%) and dilated cardiomyopathy (14.3%) were the commonest AHD.

CONCLUSION: Contrary to previous hospital reports CHD rather than RHD and other AHD are dominant in some African settings like Lagos, and their relative frequencies are similar to reports elsewhere. The wide range of children with diverse native CHD is a reflection of non-availability of definitive surgical facilities locally. Regional and International collaboration could be mutually beneficial.

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