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IC006

Interventional Cardiology & Catheterization • Poster Presentation

SUCCESSFUL TRANSCATHER CLOSURE OF A LARGE PATENT DUCTUS ARTERIOSUS IN A 17 MONTHS OLD CHILD WITH HEART FALIURE - A CASE REPORT

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Background Patent ductus arteriosus (PDA) is one of the most common congenital heart defects. Transcatheter device closure has become the preferred treatment because it provides excellent outcomes with low complication rates.

Case Presentation A 17-month-old girl was referred with a diagnosis of a large PDA and clinical signs of congestive heart failure. Transthoracic echocardiography demonstrated a large PDA measuring approximately 6 mm, mild pulmonary hypertension, dynamic subaortic stenosis, and left ventricular noncompaction. Catheter- based closure was considered feasible. Cardiac catheterization was performed under sedation through femoral arterial and venous access. Angiography demonstrated a type A, 5,3mm PDA. An 8-mm Amplatzer PDA occluder device was successfully deployed using standard transcatheter techniques. Final angiography confirmed stable device position without procedural complications. Image 1. contrast imaging on the right oblique position after the release of the device Post-procedure echocardiography demonstrated the occluder device in an appropriate position with only trivial residual flow through the device immediately after implantation. The patient recovered uneventfully and was discharged in stable condition for scheduled follow-up, including evaluation of the associated subaortic stenosis. During the follow up, residual shunt was not seen.

Conclusion Transcatheter closure of a large PDA can be performed safely and effectively even in young children presenting with heart failure. This case demonstrates that careful patient selection and appropriate device sizing can achieve excellent immediate procedural results while avoiding surgical intervention. According to our knowledge this was a youngest case in Nigeria.

Keywords: Patent ductus arteriosus; Transcatheter closure.