



PD013

Paediatric Cardiology & Congenital Heart Disease • Poster Presentation

SYDENHAM CHOREA FOLLOWING SEVERE RHEUMATIC CARDITIS IN A NIGERIAN CHILD: A REMINDER FOR CONTINUED SURVEILLANCE IN ACUTE RHEUMATIC FEVER

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Stand: POSTER #PD013 | **Venue:** Poster Exhibition Hall & Gallery - Eko Convention Centre | **Online Ref:** <https://nigeriancardiacsociety.com/abstracts/PD013>

Background: Acute rheumatic fever (ARF) is a multisystem autoimmune complication of Group A streptococcal infection. However, Sydenham chorea is a recognised but rare major Jones criterion. Previous Nigerian reports have described Sydenham chorea occurring as the only manifestation of acute rheumatic fever. We report a child who developed chorea after treatment of severe rheumatic carditis, highlighting the evolving and sequential nature of acute rheumatic fever.

Case Report: A 10-year-old boy presented with fever, migratory polyarthralgia, exertional intolerance, and a history of recurrent sore throats. Examination and investigations revealed congestive heart failure, an elevated antistreptolysin-O titre (888 Todd units), a prolonged PR interval, and echocardiographic evidence of severe rheumatic valvulitis with significant mitral regurgitation, aortic regurgitation, and dilatation of the left-sided cardiac chambers. He met the revised Jones criteria for ARF with carditis and was treated with heart failure management, antibiotics, and secondary penicillin prophylaxis. Two weeks after discharge, he developed generalised choreiform movements and notable emotional lability despite improvement in his cardiac condition. Electroencephalography was normal, leading to a diagnosis of Sydenham chorea. Treatment with sodium valproate, rehabilitation, optimisation of heart failure therapy, and ongoing secondary prophylaxis resulted in complete neurological recovery after six months. Rheumatic valvular disease persisted on follow-up.

Conclusions: The autoimmune manifestations of ARF may continue to evolve despite apparent recovery from severe rheumatic carditis. Children recovering from ARF should undergo continued neurological surveillance after discharge, as chorea may develop during convalescence.

Keywords: Chorea, Rheumatic Carditis, Jones Criteria