

Eisenmenger´s syndrome with complete AV septal defect in a 55-year-old woman

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Abstract

Nonspecific atrioventricular septal defect (AVSD) diagnosed at 5 months age, after cardiac arrest. Progressive dyspnea, peripheral cyanosis, with development of heart failure and pulmonary hypertension. At 18 years, confirmation of Eisenmenger´s syndrome, (complete AVSD: ASD - “ostium primum”; inlet ventricular septal defect and common AV valve).

CLINICAL CASE REPORT

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Conflict of interests

The authors whose names are listed immediately below certify that they have no affiliations with or involvement in any organization or entity with any financial interest (such as honoraria; educational grants; participation in speakers' bureaus; membership, employment, consultancies, stock ownership, or other equity interest; and expert testimony or patent-licensing arrangements), or non-financial interest (such as personal or professional relationships, affiliations, knowledge or beliefs) in the subject matter or materials discussed in this manuscript.

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Written informed consent was obtained from the patient to publish this report in accordance with journal´s patient consent policy.

Case

A nonspecific atrioventricular septal defect (AVSD) diagnosed at 5 months age, after cardiac arrest. Trough the years the patient showed progressive dyspnea, peripheral cyanosis, with development of heart failure

and pulmonary hypertension. At 18 years, it was given the confirmation of Eisenmenger's syndrome, with a complete AVSD. This type of AVSD, is characterized by atrial septal defect (ADS) - "*ostium primum*" (Figure 1; 2); inlet ventricular septal defect (Figure 1; 2) and common atrial-ventricular valve (Figure 2;3). Nowadays, the patient is medicated to control pulmonary hypertension and cardiac failure. Congenital malformations must be diagnosed early to avoid serious complications such as heart failure and pulmonary hypertension. That's why it's so important to detect and study early cardiorespiratory symptoms (cyanosis; dyspnea; heart murmurs). Doctors are responsible to care and to do their best to provide quality and a possibility to life with better conditions. We must be alert.

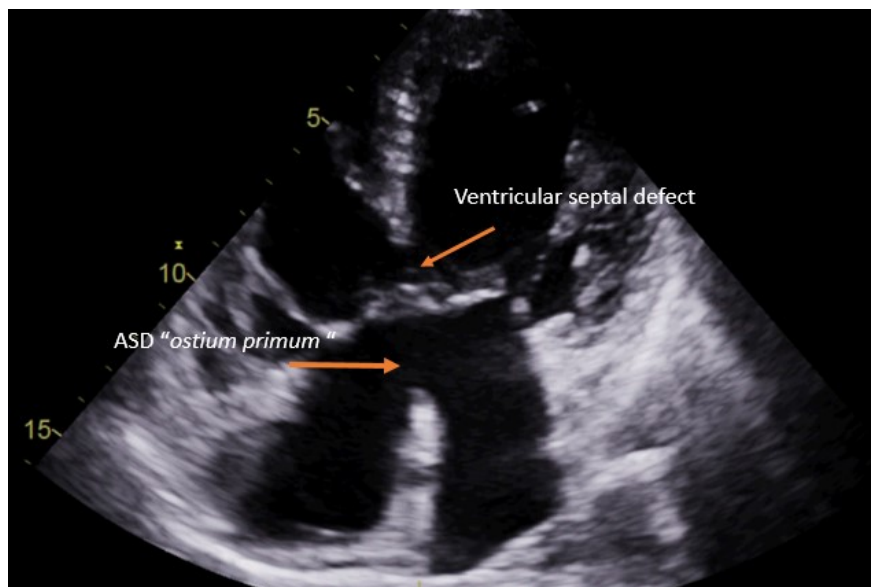


Figure 1. Eisenmenger's syndrome – Atrial septal defect (ASD) type "*ostium primum*" and inlet ventricular defect.



Figure 2. Eisenmenger's syndrome - ASD ("ostium primum") and inlet ventricular defect

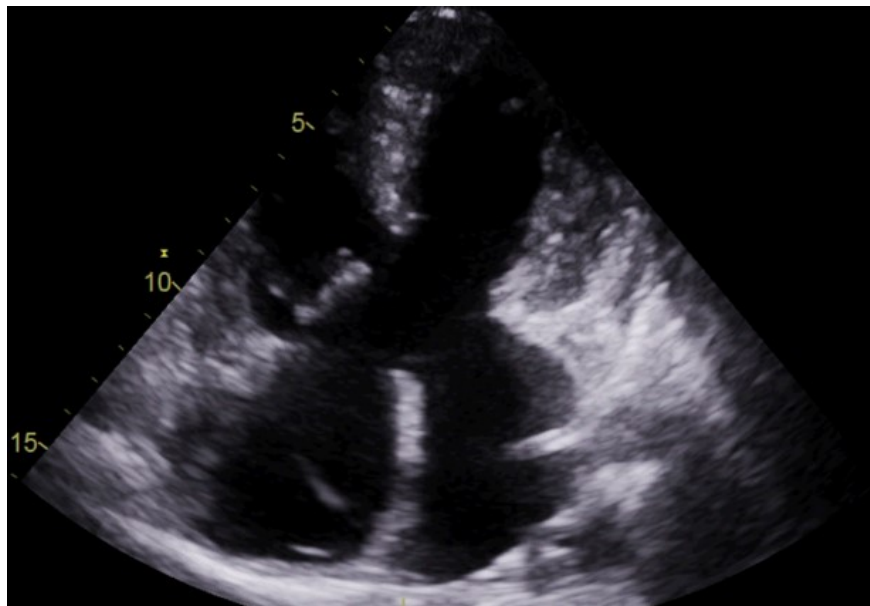


Figure 3. Eisenmenger's syndrome - complete atrioventricular septal defect with a common atrial-ventricular valve.

