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Truncus arteriosus type 1 distributed ventricular septal defect with pulmonary hypertension: case report and literature review

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Background: Truncus arteriosus is a rare cardiac disorder with an incidence of <1% congenital cyanotic heart disease. We reported the cases of truncus arteriosus (Collett-Edwards type 1) with ventricular septal defect with pulmonary hypertension.

Case Description: The case study begins with a 3-year-old girl who referred to us with complaints of cough and fever from two months. The patient has been diagnosed with truncus arteriosus, since the age of seven months and has never been treated. During physical examination, the patient was central cyanosed, parasternal retracted, wet rhizomes in the bilateral lung basal section, pansystolic murmur in the lower left parasternal area, clubbing finger of the lower extremity finger. On echocardiography, VSD sub truncal with width diameter of 8 mm accompanied with shunt left to the right, main pulmonary artery (MPA) came out in aorta and then branched into two (truncus arteriosus type 1) and the ejection fraction is 55%. The cardiac catheter concludes that there is type I truncus arteriosus and pulmonary hypertension. The patient was treated for five days and given antibiotics, expectorant, anti-heart failure and therapy of pulmonary hypertension. Patient undergoes resolution and clinical improvement on day five.

Conclusion: The purpose of this case report is that type 1 truncus arteriosus in Indonesia with ventricular septal defect is a rare and unreported case in the literature.

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