

# Signs of Heart Problems in Children and Teens

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## Brief Report

Although the number of adults living with heart disease and other heart-related disorders has been widely documented, few people realise that heart disease may also impact children's hearts—and does so in significant numbers.

- Each year, around 40,000 babies in the United States are born with a congenital cardiac condition or abnormality.
- Chronic rheumatic heart disease, the most devastating complication of rheumatic fever, affects an estimated 3 to 5 million children globally.
- Every year, more than 4,000 children are diagnosed with Kawasaki illness, which is the leading cause of acquired heart disease in children under the age of five.

While some pediatric heart conditions can't be prevented, there are signs that parents can look for and things parents can do that can lead to earlier intervention and better outcomes for their kids and teens.

## Pediatric heart condition

Congenital heart disease, or problems present at birth, and acquired heart disease, which develops as the child grows older, are the two most common types of heart disease in children.

## Congenital heart defect

Congenital Heart Defects (CHD) affects roughly one out of every 100 babies due to improper development of the heart or blood arteries surrounding the heart. These problems, which can be slight or severe, obstruct the heart's capacity to function normally. Within 24 hours of birth, newborns in the United States are checked for major congenital heart problems. Some congenital heart problems, such as atrial septal defects (holes in the heart's walls), can go undetected until a kid is in his or her teen years or later.

"Since the advent of the stethoscope, the diagnosis of cardiac illness in children has been a high goal of the medical profession," says Glen Iannucci, MD, a Pediatric Cardiologist at Children's Healthcare of Atlanta Heart Center. "In the current era, we have become more sophisticated in our methods of detecting heart disease, including the prenatal detection of congenital heart defects and rhythm abnormalities." Although you may hear some physicians use CHD in reference to congenital heart disease, congenital heart defect is the more accurate term. Both phrases refer to the same thing.

## Acquired heart disease

Acquired heart disease is the kind we most often associate with adults, but children and teens can also be affected. The most common acquired heart diseases in children are rheumatic heart disease and Kawasaki disease.

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## Kawasaki disease

The immune system of the body attacks healthy tissues in Kawasaki illness, causing inflammation in the coronary arteries and heart muscles. In the United States, it is the main cause of acquired heart disease in children. Kawasaki illness is most common in Asian children or children of Pacific Island ancestry, and it affects boys more than girls. Around 80% of children diagnosed are under the age of five.

A fever lasting five days or more, a rash, red or bloodshot eyes, swollen or cracked lips, a red "strawberry" tongue, swollen hands and feet, and swollen lymph nodes are all noncardiac signs of Kawasaki disease. Many parents are also astonished to find that youngsters can acquire excessive blood pressure and cholesterol, which can be precursors to heart disease.

## Atherosclerosis

The accumulation of fat and cholesterol-filled plaques inside arteries is referred to as atherosclerosis. As the plaque builds up, the arteries stiffen and constrict, increasing the risk of blood clots and heart attacks. Atherosclerosis usually develops over a long period of time. It is uncommon for children or teenagers to be affected. Obesity, diabetes, hypertension, and other health problems, on the other hand, put youngsters at greater risk. Children with risk factors such as a family history of heart disease or diabetes, as well as those who are overweight or obese, should be screened for high cholesterol and high blood pressure. Treatment usually entails adjustments in one's lifestyle, such as greater activity and nutritional changes.

## Viral infections

Viruses can influence heart health in addition to producing respiratory sickness or the flu. Myocarditis is a viral illness that affects the heart's ability to pump blood throughout the body. Heart viral infections are uncommon and often have few symptoms. When symptoms do occur, they're comparable to those of the flu, such as exhaustion, shortness of breath, and chest tightness. The symptoms of myocarditis are treated with drugs and therapies.

## Signs of heart problems in children

Signs of heart problems in children vary based on the condition, a child's age and whether the heart condition or disease was acquired before a child was born or during childhood.

## Heart problems in babies

Signs of potential heart problems in infants may include:

- Trouble gaining weight
- Bluish color to the lips, tongue or nail beds
- Difficulty with feeding
- Fast or rapid breathing, or difficulty breathing, even while resting
- Tiring easily while eating
- Sweating while feeding

## Heart problems in young children

In young children, look for:

- Passing out during physical exercise or activity
- Heart palpitations—a heartbeat that feels funny or fluttery to a child

- Shortness of breath while playing or being active
- Chest pain

### Heart problems in teens

Heart disease symptoms in teenagers are comparable to those in younger children. Teens who participate in sports are likely to have already had a physical exam with their paediatrician, which includes questions aimed at detecting potential cardiac problems early. Consider scheduling a screening and examination with a paediatric cardiologist if your teen athlete complains of chest pain or other heart symptoms during activity [1-5].

### Signs of heart problems you may have missed

Persistent breathing trouble, regardless of age, is an often-overlooked symptom of a possible paediatric cardiac problem. This is due to the fact that most people identify breathing problems with respiratory problems rather than heart problems. If your kid has persistent breathing problems or has been diagnosed with a respiratory illness that isn't responding to therapy, seeing a paediatric cardiologist for a consultation and screening could be a good next step.

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