

## **Taussig-Bing heart**

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### **Abstract**

Taussig-Bing heart is one of the conotruncal malformation. Embryologically, abnormal cardiac looping with malalignment of conotruncal septum result its complexity and great artery relationships. It was first described in 1949 by two outstanding physicians, Helen Brooke Taussig and Richard John Bing, who worked together at the John Hopkins Hospital in Baltimore. The original “Taussig-Bing heart” may be summarized as a double-outlet right ventricle (DORV) with semilunar valves side-by-side and approximately at the same height, a bilateral conus, and a subpulmonary VSD. This original description has been broadened to include all kinds of double-outlet right ventricle with subpulmonary VSD. The evolution of surgical repair for the Taussig-Bing anomaly has progressed from atrial baffle procedures to arterial switch with VSD closure and intraventricular repair. For patients with Taussig-Bing type of DORV, the “arterial switch” operation, first reported in 1981, still appears to be the procedure of choice and can be performed in the neonatal period and also in patients with all types of great artery anatomy without ventriculotomy.

### **Biography:**

Ramachandran Muthiah, Consultant Physician & Cardiologist, Zion hospital, Azhagamandapam, Kanyakumari District, India. Completed M.D. in General Medicine in 1996, D.M. in cardiology in 2003 under Tamil Nadu Dr.MGR Medical University, Chennai, India. Worked as medical officer in Rural health services for 5 years and in teaching category as Assistant Professor at Madras medical college, Coimbatore medical college, Thoothukudi medical college and Professor at Dr.SMCSI Mission hospital & Medical college, Karakonam, Trovandrum and Azeezia Medical college, Kollam. Published many papers in Cardiosource, American College of Cardiology Foundation, Case Reports in Clinical Medicine

(SCIRP) and Journal of Saudi Heart Association. Special research on Rheumatic fever and Endomyocardial fibrosis in tropical belts, Myxomas, Ineffective endocarditis, apical hypertrophic cardiomyopathy, Ebstein’s anomaly, Rheumatic Taussig-Bing Heart, Costello syndrome and Tetralogy of Fallot.

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