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Cardiac catheterization in Neonates

E ven though there are efforts to detect critical CHD in the fetal life or immediately after birth, large population of neonates with heart defects remain undiagnosed until after developing serious manifestations. Since the introduction of the balloon atrial septostomy (BAS) in 1966, transcatheter interventions have assumed a pivotal role in the treatment of neonates with critical congenital heart disease. Relief of valvar stenosis/atresia, creation/ enlargement of interatrial communications, recanalization of occluded systemic to pulmonary artery shunts, and angioplasty/ stenting of vascular structures have all been described in critically ill neonates. In experienced hands with proper support structures in place, these procedures can be performed with a high success rate and low morbidity and mortality.

Obviously, the evolution of intervention techniques has made more procedures available for the treatment of

critically ill neonates. As technology is developed with respect to catheters and devices coupled with hybrid approaches, we will improve drastically the ability to treat critically ill neonates with congenital heart disease.

Speaker Biography

Luis Martinez has completed his MD degree at the age of 26 years from Francisco de Miranda University, Vzla. He is a Paediatric Cardiologist and Haemodynamist, Professor of Paediatrics Cardiology of Romulo Gallegos University, Venezuela. He has performed over 1500 procedures in cardiac catheterization in children and has many publications in the field. He has experienced in TTE, TEE pre, intra and postoperative cardiac surgery and Fetal Echocardiography, Author of chapter #25 of the book: ETE in Acyanotic Congenital Heart Disease: Usefulness in Interventional Diagnosis and Perioperative Management "Clinical Cases" in MASTER Transesophageal Echocardiography, Spanish Society of Cardiology, 2015.

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