

PHENOTYPIC RELATIONSHIPS IN CERTAIN MINOR HEART DEVELOPMENTAL ABNORMALITIES IN CHILDREN

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Relevance

Minor heart developmental abnormalities (MHDA) represent a large heterogeneous group of anomalies in the development of the cardiovascular system, characterized by various anatomical and morphological deviations from the normal structure of the heart and major vessels, but without clinically or hemodynamically significant disturbances.

Aim of the study: To identify the relationship between phenotypic manifestations of connective tissue dysplasia in newborns and minor heart developmental abnormalities.

Material and Methods. The scientific work was conducted at the cardiology and neonatology departments of the Andijan City ODMCC. Twenty children with minor heart developmental abnormalities were selected for observation and study. They were divided into two groups: full-term children with minor heart developmental abnormalities (7 children) and premature children with minor heart developmental abnormalities (13 children). A phenotypic map of 38 most common external signs of connective tissue dysplasia was created. A comparative analysis of the frequency of external dysmorphological stigmata in children with and without MHDA showed that the number of minor developmental abnormalities in newborns with MHDA ranged from 4 to 7, while in healthy children it was no more than 3. Statistical analysis revealed that full-term newborns with MHDA had a significantly higher frequency of the following 5 stigmata compared to children without heart micro-anomalies (Table 1): high palate (66.6% vs. 13.3%), short frenulum of the tongue (64.4% vs. 23.3%), diastasis of the rectus abdominis muscles (61.1% vs. 6.6%), hypotelorism (33.3% vs. 10%). The frequency of other external micro-anomalies was significantly lower. In premature newborns with MHDA, the following external stigmata were significantly more frequent compared to children in the second group: short frenulum of the tongue (76.0% vs. 30.0%), high palate (60.0% vs. 10.0%),



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diastasis of the rectus abdominis muscles (56.0% vs. 13.3%), nipple hypertelorism (46.0% vs. 13.3%), hypotelorism (50.0% vs. 16.6%), low-set ears (40.0% vs. 6.6%).

Conclusions

The external manifestations of connective tissue dysplasia in minor heart developmental abnormalities are characterized by multiple variations, significant heterogeneity in both quantitative and qualitative ranges, and combinations.



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