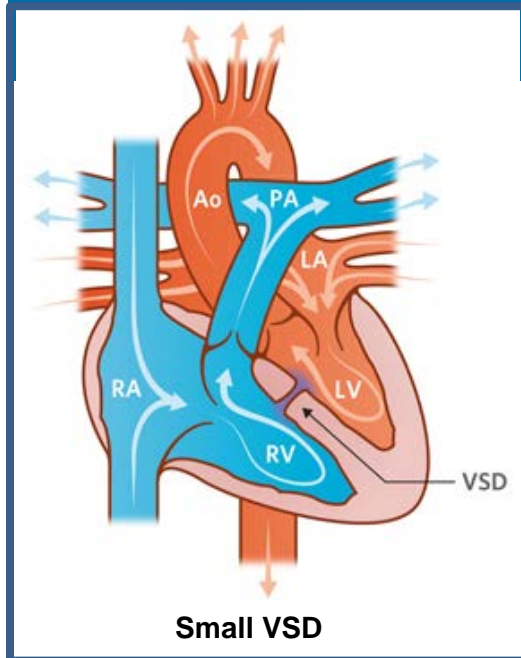
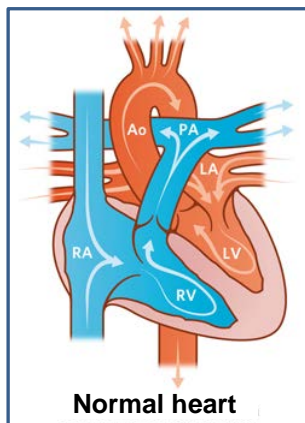


# Small Ventricular Septal Defect (VSD)



Your recent ultrasound showed a minor heart defect in your baby known as a **small ventricular septal defect or VSD**. This is one of the most common heart defects we find in babies.



A small VSD is a hole in the heart between the right and left pumping chambers (ventricles).

*[see picture on the left]*

This is not a life-threatening condition. A small VSD does not harm the baby during pregnancy and does not affect a child's growth, development or ability to live a normal life.

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**Most small VSDs close on their own and may even close before the baby is born.**

## How reliable is this ultrasound result?

This result is very reliable and lets us know that a serious heart problem is very unlikely in your baby. Minor conditions, like this, are not usually seen on prenatal ultrasound. However, in this case, we were able to see this small hole. This VSD may go away and not be seen on a future ultrasound.

## Could the VSD get bigger?

Some babies have a large VSD that lets lots of blood flow between the heart chambers, which can cause heart symptoms. This does not happen with a small defect like the one seen in your baby. The small VSD seen in your baby will not get bigger or turn into a large VSD.

## What are the limits of this ultrasound?

Some minor heart conditions are not able to be seen. The baby's heart is very small at this point and the heart works differently when the baby is inside the uterus (womb). While there are limits to what can be seen, the rest of your baby's ultrasound looks normal.

## Could my baby have a chromosome problem?

Any baby could have a chromosome problem, but this minor heart condition does not increase the chance. When there are no other ultrasound findings, the chance for a chromosome problem is the same as babies without this heart condition. You may have already had screening for common chromosome conditions in your baby.

This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult your doctor.

### What happens during pregnancy?

The small VSD found in your baby will not change your prenatal care at all. No additional tests or ultrasounds are needed during pregnancy. We will place a note in your chart letting the doctors know about this ultrasound finding in your baby.

### What happens after delivery?

After delivery, the pediatrician will examine your baby as they would for any newborn in our hospitals. This always includes checking the baby's heart and listening for a heart murmur. If the heart sounds normal, no other testing or follow-up is needed.

If a heart murmur is detected, your baby will be referred for a pediatric cardiologist consultation and the doctor may schedule an echocardiogram. This is a special ultrasound of the baby's heart. It is similar to the ultrasound done on your belly, but is done on the baby's chest. This lets us safely look for a VSD and see the blood flow in the heart.

### What if this condition is confirmed after birth?

You can treat your baby normally, even if a small VSD is confirmed after birth. There are no special precautions or restrictions. Most small holes will eventually close without any treatment. The pediatric cardiologist will review the very favorable prognosis and answer any questions you might have.

There is an extremely small chance for heart infections in children with certain heart conditions. For this reason, we encourage children with a VSD to practice good dental hygiene. This is something all children should do, but there is an extra benefit for children with heart conditions.

### Could this happen to future babies?

There is a small chance for a related heart condition in future babies. The chance is about 3% for brothers and sisters of a person with a VSD and a little higher for their own children.

### REFERENCES:

Sternfeld et. al., Isolated ventricular septal defects demonstrated by fetal echocardiography: prenatal course and postnatal outcome. *J Maternal Fetal Neonatal Med.* (2020)

Svirsky et. al., The genetic and clinical outcome of isolated fetal muscular ventricular septal defect (VSD). *Neonatal Med.* (2019)

Gómez et.al., Isolated ventricular septal defects in the era of advanced fetal echocardiography: risk of chromosomal anomalies and spontaneous closure rate from diagnosis to age of 1 year. *Ultrasound Obstet Gynecol.* (2013)