

Ventricular Septal Defect (VSD)

What is a VSD?

A VSD is an opening or hole (defect) in the wall (septum) between the heart's two pumping chambers (ventricles). A VSD can vary in shape, size and location. A child can have more than one VSD.

The heart has four chambers.

- The upper two chambers are the atria, and the lower two are the ventricles.
- Normally the right side of the heart takes in blood from the body that is low in oxygen and pumps it to the lungs.
- The left side of the heart takes in blood from the lungs that is high in oxygen and pumps it to the body.

When there is a VSD, the high-oxygen (red) blood from the left side of the heart mixes with low-oxygen (blue) blood in the right side of the heart. With a large VSD, this may cause more blood to be pumped to the lungs.

What testing is needed?

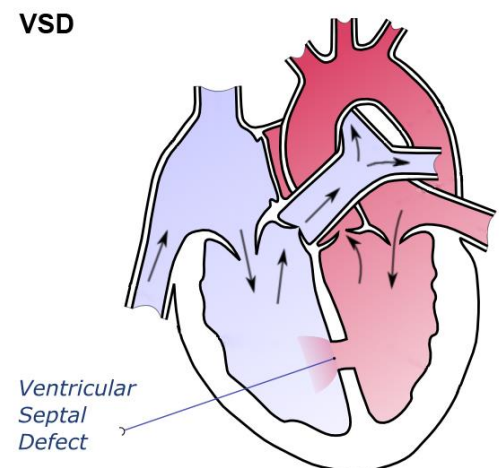
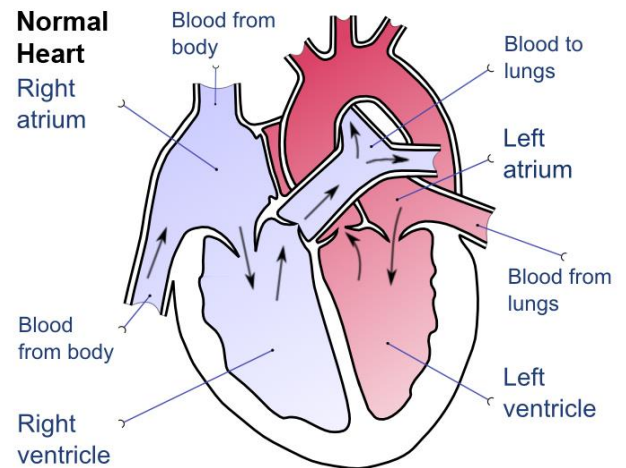
Your child will have an ultrasound of the heart. This test is called an echocardiogram. It helps your child's heart doctor see if there is a hole, where it is located, and how big it is.

How does a VSD affect my baby?

Often a baby is diagnosed with a VSD because the doctor hears a heart murmur. A murmur is a noise heard with a stethoscope. If the opening is small it will not cause symptoms because the heart and lungs don't have to work harder. The only finding is a heart murmur. If the opening is large, the baby may breathe faster and harder than normal. The baby may have trouble feeding and growing at a normal rate. Symptoms may not happen until several weeks after the baby is born.

How is a VSD treated?

If the opening is small, it won't make the heart or lungs work harder. Surgery or other treatments may not be needed. Most small VSDs close on their own in the first months or years of life. If the opening is large, surgery may be needed to close the opening. If your baby does develop symptoms, there are medicines to help. Your child's heart doctor will talk with you about this.



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What is the outcome for my child?

The long-term outcome for infants or children with a VSD is excellent. They normally live full lives with no limits on activity. We recommend follow-up with your child's heart doctor before and after the repair of a VSD.

Other helpful websites and organizations

- [Children's Hospital of Wisconsin](#)
- [American Heart Association](#)
- [Congenital Heart Information Network](#)
- [National Heart, Lung, and Blood Institute](#)

ALERT: Call your child's doctor, nurse, or clinic if you have any questions or concerns or if your child:

- Is working hard to breathe.
- Sweats a lot.
- Is taking longer to eat or eating less.
- Has skin that looks blue or gray and puffy.
- Is more fussy than usual.
- Has special health care needs that were not covered by this information.

This sheet was created to help you care for your child or family member. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment and follow-up.