

Catching Blue Babies: Critical Congenital Heart Defects in Newborns at Moderate Altitude

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and Genetic Testing Symposium

Pediatric Heart Defects

- Critical Congenital Heart Defects (CCHD)
 - 1 in every 4 newborns with a heart defect
 - 7,200 newborns in the US every year
 - Cardiac procedure within 1st year of life

Newborn Screening for CCHD

- CCHD symptoms:
 - Low oxygen saturations → cyanosis
 - Blue baby syndrome



- Screening using pulse oximetry technique (!!!)

CCHD Screening at Altitude

- Partial pressure of O₂ decreases with increasing altitude → physiological issue
- Screening algorithm based on studies at sea level → efficacy issue
- Limited information on newborns with CCHD at altitude and their screening results
- Secretary HHS requested additional studies

Research Questions

- What are pulse oximetry results of newborns with CCHD born at altitude?
 - Delineate pulse oximetry values
- How did they respond to screening algorithm?
 - Performance of AAP algorithm at altitude

Methodology

- Retrospective cohort of *true positives*
 - Using data from medical charts to recreate screening scenario
- Term/near-term newborn, 7 dx of CCHD, treated at Children's, 2003 – 2013
 - i2b2 → 343 cases
 - No electronic chart, > 48-hr admission, < 24-hr deceased or had cardiac surgery
 - Descriptive statistics → 158 cases
 - Demography, risk factors, O₂ saturations at 24-, 28-, 36-, 48-hr, screening results

Demography

- Male → 64%
 - White/Caucasian → 69%
 - Non-Hispanic/Latino → 64%
- } 78%
from
CO
- KS, MT, NE, NM, TX, WY
 - Transferred to Children’s for higher care within 24-hr after birth



Risk Factors and Diagnosis

- Family history of CCHD, genetic disorder, and maternal diabetic status are ***not*** risk factors in our cases
- Top 3 diagnosis:
 - Hypoplastic Left Heart Syndrome (70%);
 - Transposition of Great Arteries (30%);
 - Tetralogy of Fallot (18%)
- Children's Hospital CO treated ~30 cases/yr

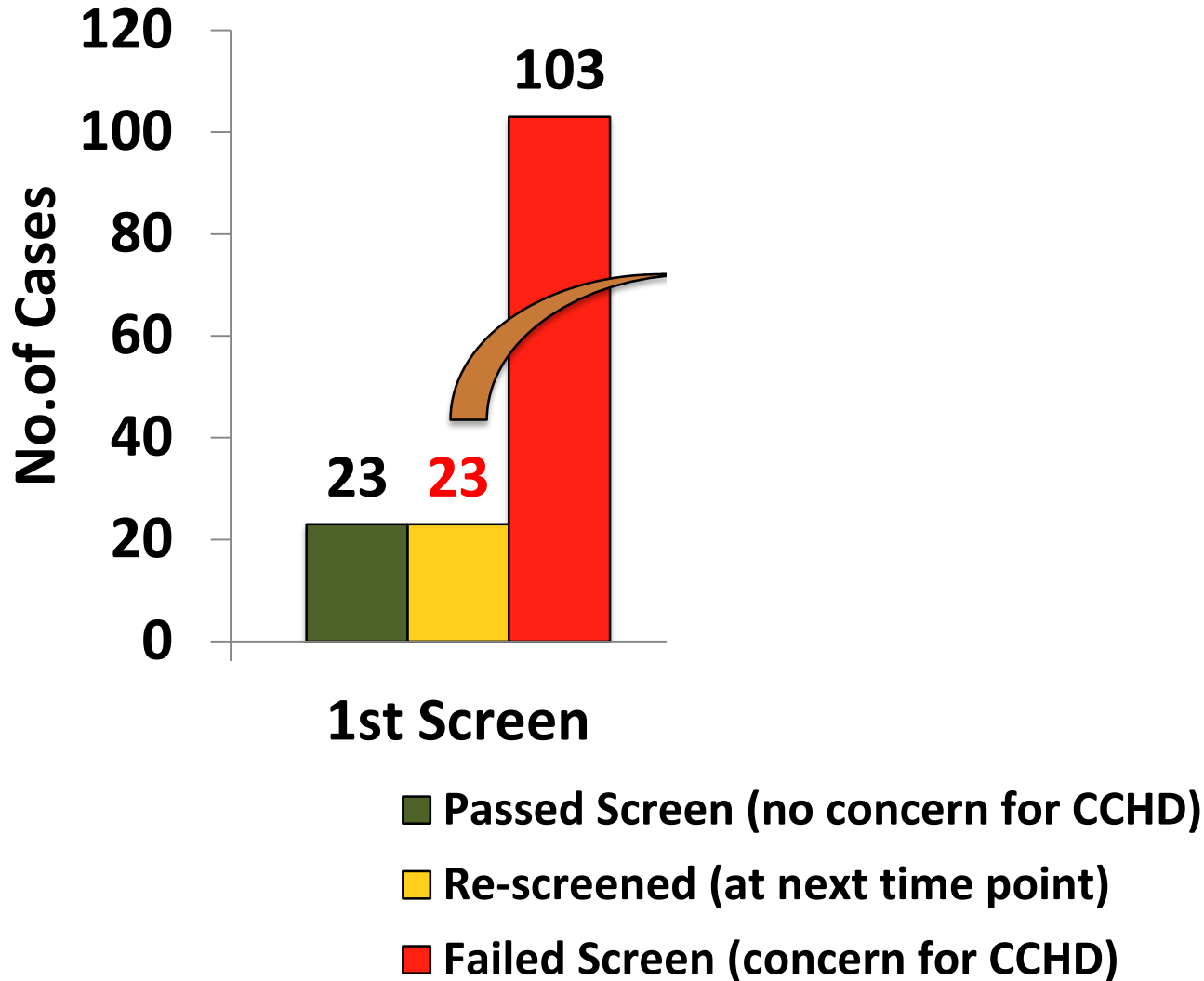
Comparative O₂ Saturation Values

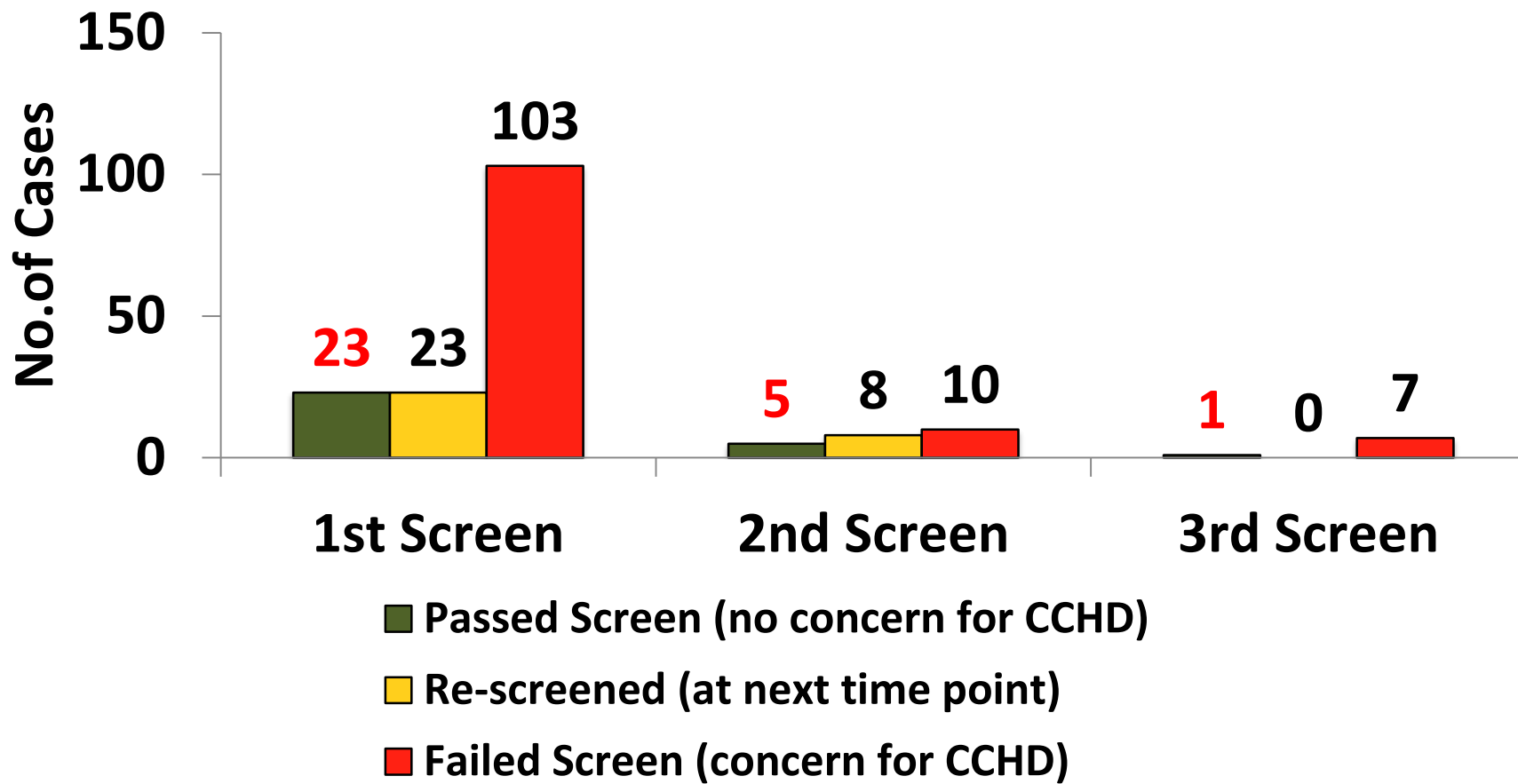
Diagnosis	Altitude	Statistics	Preductal (%)	Postductal (%)
CCHD	Moderate	Average	87.1 ± 7.2	87.8 ± 6.3
CCHD	Moderate	Range	70.0 – 100.0	67.0 – 100.0
Healthy	Moderate	Average	97.2 ± 1.9	97.2 ± 2.1
Healthy	Moderate	Range	88.0 – 100.0	88.0 – 100.0
Healthy	Sea Level	Average	98.3 ± 1.4	98.9 ± 1.6
Healthy	Sea Level	Range	94.7 – 100.0	94.7 – 100.0

(Samuel et al., 2013, Acta Paediatrica)

(Wright et al., 2014, Pediatrics)

Screening the Positives





- 29 out of 149 false negatives (19.5%)
 - 80.5% screen capture rate
 - Comparable to national data (76.5%)

(Thangaratinam et al., 2012, Lancet)

CCHD Treatments

- Prostaglandin (PGE) & O₂ supplementation
 - 72% given PGE; 54% given O₂ (158 cases)
 - Comparable to false negatives (29 cases)
- Failed screening even after treatments:
 - Newborns at altitude have more severe defects
 - Current screening algorithm is sufficiently applicable and effective at altitude

In Summary

- First comprehensive review of newborns already diagnosed CCHD
 - Novel approach
 - Delineate average and range of O₂ saturations
 - Evaluate performance of current screening algorithm performed at altitude

Implication & Future Direction

- 80.5% capture rate of current screening algorithm performed at altitude
 - Helpful in moving forward with CCHD screening efforts in CO
- Combine with data of true negatives to get a complete assessment of the performance of screening algorithm at altitude

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Thank You!

