CONGENITAL ANOMALIES

- Congenital abnormalities are those defects and diseases which are substantially determined before or during birth and recognizable in early life.
- Some disorders are detected at birth, some are obvious in early life and some may become apparent until much later in life.

Definition

- All biochemical, structural and functional disorders present at birth.
- Birth defects are structural or functional abnormalities present at birth that cause physical or mental disability. Some may be fatal.

Incidence

- 1. 2-3 per 100 children are born with birth defects around the world
- 2. 2.5/1000 babies are born with Neural Tube Defects
- 2.7/1000 babies are born with Club foot, Gastrointestinal tract abnormalities and defective diaphragm
- 4. 1.9/1000 babies are born with Cleft lip, Cleft palate and Congenital Heart Defects
- 5. Birth defects incidence in India has not reduced over the last 8 years

causes

- Genetic problems caused when one or more genes doesn't work properly or part of a gene is missing
- Problems with chromosomes, such as having an extra chromosome or missing part of a chromosome
- Environmental factors that a woman is exposed to during pregnancy, such as rubella or German measles while pregnant, or using drugs or alcohol during pregnancy.

Risk factors

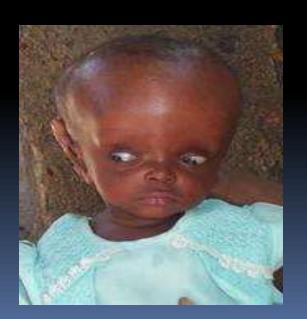
- Advanced maternal age
- Consanguinity
- Maternal malnutrition

Common congenital anomalies

- 1. Central nervous system:
- Anencephaly
- Spina bifida
- Hydrocephalus
- Microcephaly, Macrocephaly
- Syringomyelia, Diastematomyelia
- Porencephaly, schizencephaly
- Agenesis of cranial nerves











2. Congenital heart diseases:

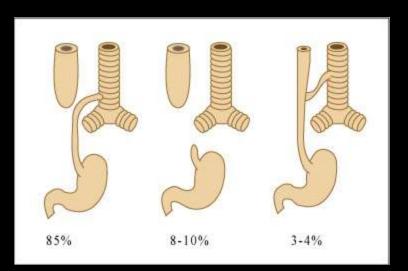
- VSD
- ASD
- TGA
- Tricuspid atresia
- Trucus arteriosus
- Tetralogy of fallot
- Aortic stenosis

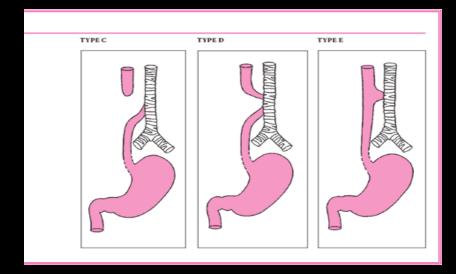
- Pulmonic stenosis
- Aortic or pulmonary artery dilatation
- Mitral or aortic regurgitation
- Ebstein's anomaly
- Dextrocardia

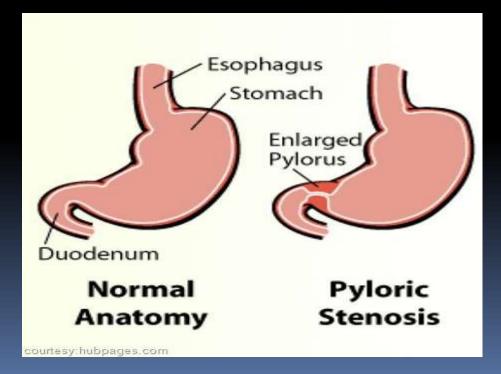
3. GI system abnormalities

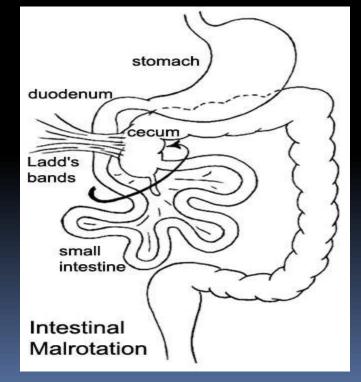
- Tracheo esophageal fistula
- Oesophageal atresia
- Congenital pyloric stenosis
- Meconium ileus
- Malrotation of gut
- Congenital megacolon
- Ano rectal malformations

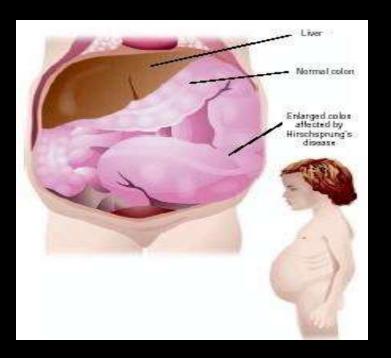
- Exomphalos
- Umbilical hernia
- Diaphragmatic hernia
- Femoral hernia
- Congenital intestinal obstruction
- Gastroschisis

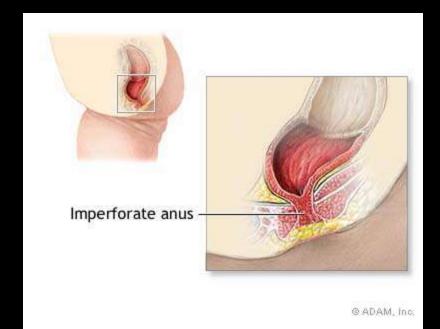




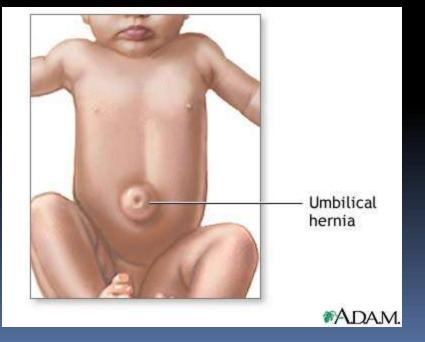


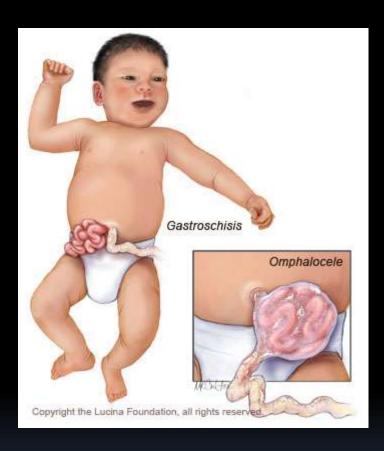












4. Respiratory system abnormalities

- Choanal atresia
- Tracheooesophageal fistula
- Congenital atelectasis
- Pulmonary agenesis
- Congenital stridor
- Congenital cyanosis

5. Genito urinary system

- Renal agenesis
- Congenital hydronephrosis
- Congenital polycystic kidney
- Horse shoe kidney
- Posterior urethral valves
- Hypospadias

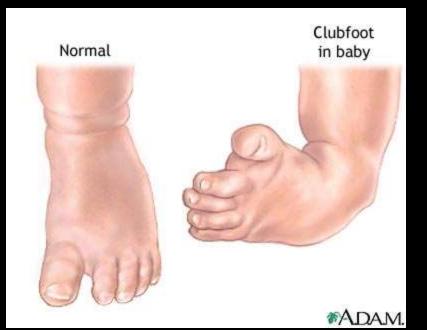
- Epispadias
- Congenital phimosis
- Cong. Hydrocele
- Undescended testes
- Cong. Inguinal hernia
- Ambiguous genetalia
- Malformations of reproductive organs.

6. Musculoskeletal

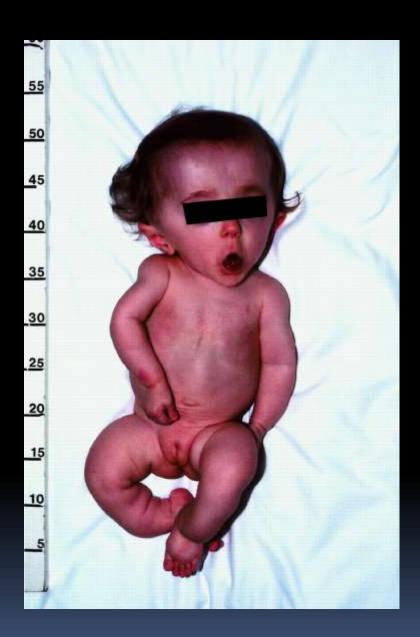
- Club foot
- Cong. Dislocation of hip
- Osteogenesis imperfecta
- Polydactyly
- Webbed fingers
- syndactyly

- Phocomelia
- Cong. Scoliosis
- Marfan syndrome
- Mucopolysaccharidoses
- Muscular dystrophies

















7. Blood diosrders

- Thalassemia
- Hemophilia
- Siclke cell anemia
- Congenital spherocytosis

8. Metabolic disorders

- Cystic fibrosis
- Phenylketonuria
- G- 6PD deficiency
- Porphyria
- Cong. Lactose intolerance
- Glycogen storage diseases
- Mucopolysaccharidoses

- Tay- sachs disease
- Gaucher disease
- Wilson's disease
- Galactosemia
- Inborn errors of metabolism

9. Endocrinal abnormalities

- Cong. Hypopituitarism (dwarfism)
- Cong. Hypothyroidism (cretinism)
- Cong. Adreno genital hyperplasia
- Congenital goiter
- Diabetes mellitus



10. Chromosomal abnormalities

- Down's syndrome
- Patau's syndrome
- Edward's syndrome
- Turner syndrome
- Klienfelter's syndrome
- Cri du chat syndrome



Miscellaneous

- Cleft lip/ palate
- Cong. Cataract
- Cong. Glaucoma
- Retinoblastoma
- Color blindness
- Cong. Deafness
- Deaf and dumb
- Mental retardation

- Microagnathia
- Albinism
- Hemangioma
- Pseudohermophroditis m
- Situs inversus
- Prader- willi syndrome
- Apert syndrme
- Cong. Biliary atresia



PREVENTION OF CONGENITAL ANOMALIES

Preventive measures

- Genetic counseling is the true preventive measure of congenital anomalies.
- Reducing & discouraging consanguineous marriages.
- Avoiding late marriage of females and avoidance of pregnancy beyond the age of 35yrs.
- Promotion of health of girl child & pre pregnant heath status of the females by prevention of malnutrition, anemia, folic acid deficiency, iodine deficiency etc.

- Encouraging the immunization of all girl child by MMR
- Increasing attention to the protection of individuals & whole communities against mutagens such as X ray & other ionizing radiations & also for chemical mutagens (drugs, alcohol)
- Immunization by anti D immunoglobulin to the Rh negative mothers after abortion of first child.
- Elimination of active & passive smoking of tobacco by mothers.
- Avoidance of drug intake without consulting physician in the 1st trimester of pregnancy.

- Prevention of intrauterine infections & promotion of sexual hygiene along with general hygienic measures.
- efficient antenatal care
- Promotion of therapeutic abortion of abnormal fetus & fetus with gross cong. Anomalies, after prenatal diagnosis.
- Discouraging reproduction after birth of a baby with cong. Anomalies, without genetic counseling.
- Increasing public awareness about the risk factors & etiological factors of cong. Anomalies.

- Promotion of detection of genetic carriers. Eg:- both partners should arrange to test for thalassemia carrier before marriage.
- Reducing the frequency of hereditary disease and disability in the community to as low as possible by negative eugenics.

Nursing responsibilities

- Collection of detailed history, especially history of prenatal, natal & postnatal period along with history of family illness.
- Preparation of pedigree chart by interview and home visit
- Identification of present problems, its nature & severity, for necessary interventions.
- Participation in diagnostic investigations, treatment, follow up and research project.
- Provide necessary information to the parents
 & family members

- Motivate the family members for genetic counseling & referring to the genetic clinic.
- Participating in genetic counseling process with special training, personal experience, knowledge & competency.
- Provide emotional support & answer questions asked by the counselee.
- Guide the family for rehabilitation of the child & for available social & economical support through social welfare agencies.
- Promote public awareness about the prevention of cong. Anomalies by individual or group health education or by mass media information.