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SITE: NATIONAL CHILDREN'S HOSPITAL (HNN) LOCATION: SAN JOSE, COSTA RICA COLLABORATION LAUNCHED: 2021

MARCH 8–22, 2023 CARDIAC TRAINING MISSION 4 PATIENT STORY



PATIENT PROFILE

Child	Enzo P.
Age	2 months old
DOB	January 19, 2023
Home	Belen, Costa Rica
Parents	Kassandra and Pavel
Diagnosis	Supracardiac TAPVC, PFO
Open heart surgery	TAPVC repair (March 13, 2023)
Discharged from PICU	March 16, 2023

Based on an interview conducted in Spanish by Lucie Everett, Heart to Heart staff.

HOUSEHOLD AND FAMILY

Enzo is a two-month-old baby born with total anomalous pulmonary venous connection (TAPVC). He lives in Belen, in the province Heredia, with his two loving parents and three-year-old sister. Enzo's mother Kassandra is a stay-at-home mom and his father, Pavel, works for an American company in Dallas.

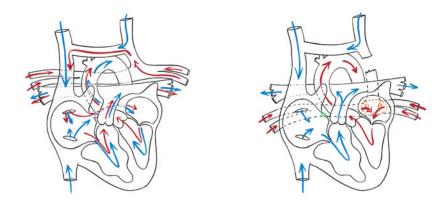
CHILD'S DEVELOPMENT AND MEDICAL HISTORY

When he was born, Enzo was hospitalized for 15 days, but was not diagnosed with congenital heart disease (CHD). It was only after he was transferred to the National Children's Hospital (HNN) that specialists diagnosed him with TAPVC.

Kassandra received routine prenatal care during her pregnancy. She and her husband already had one child and were excitedly planning for their second. When they learned that Enzo had a heart defect, they were surprised and frightened. Kassandra says, "A heart defect is something that any child can suffer from, it has nothing to do with vitamins or taking care. In my family, there is absolutely no one who suffers from anything – nothing cardiac, nothing congenital. Any child can be born with a heart defect. It just happens." We were so pleased to meet this caring, informed mother.

CURRENT CONDITION

On March 13, 2023, Enzo was operated on by our joint Heart to Heart-HNN team. His surgery went smoothly and he was discharged from the ICU just three days later. Thanks to his life-saving surgery, Enzo's future looks bright: he now has the chance to grow up, go to school, and enjoy childhood with his older sister. Enzo will continue to have yearly check-ups with his pediatric cardiologist until he reaches adulthood.



Left: An unrepaired heart with TAPVC. **Right**: A heart after TAPVC repair. By surgically connecting the pulmonary veins directly to the left atrium and patching the atrial septal defect (ASD), oxygenated and deoxygenated blood within the patient's heart become separated, as in a normal heart. This resolves the problematic mixing of blood caused by the defect and allows more oxygenated blood to flow to the child's body, relieving symptoms of congenital heart disease.