

Clinical Characteristics of Patients with Acute Rheumatic Fever (ARF) and Rheumatic Heart Disease, Evaluation of the Long-Term Follow-Up Results

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The acute rheumatic fever (ARF) remains a significant health problem for our country. the aim of the study is, evaluate epidemiological, clinical and laboratory characteristics features of the disease and determine the prevalence according to the years and evaluate the long-term prognosis of the valve disease of the patients with carditis in bursa and its environs

In this study, the medical records of 151 patients with the diagnosed of ARF between January 2000 and February 2011 in our Department, were retrospectively reviewed. Application date, initial complaints, major, minor and supportive signs, laboratory findings, echocardiographic findings and changes in valve involvement during the follow-up time, were evaluated. To determine the valve insufficiency in patients with carditis, echocardiographic examination, in admission, after the inflammation recovered and in last control, were evaluated respectively.

Patients age ranged between 4 and 15 years (9.6 ± 2.42), male and female ratio is 1.2 /10. Sixty-nine of the cases (45.7%) were 9 years or under and 82 (54.3%) were aged 10 years or over. The most common symptoms were fever (62.9%) and joint symptoms (36.6%) respectively. Carditis (76,8%) was the most common symptom according to the Jones major criteria. The most commonly association was, arthritis and carditis (52.9%) There was no difference in the distribution of the major criteria according to sex and age groups.

The most common valvular lesion in the first echocardiography was combined mitral (MR) and aortic regurgitation (AR) (59.8%). When evaluated separately, the most common valvular lesion was mitral valve insufficiency (%36,2). In the control echocardiographic examination after inflammation period, complete improved were detected in the 15% of MR and %20,4 of AR according to the baseline examination. On the last echocardiographic examination total recovery rates were 37,5% for MR and %50 for AR, 39,5% of the cases, there were no change for valvular lesions. Subclinical carditis (silent carditis) was detected in 17.2% of the cases. surgical intervention was performed in six (5,4%) cases. In conclusion, this study showed that, despite decrease in the number of cases over ten year period in Bursa and environs, ARF still remains a health problem for our region.