

Prospective study of children with NSAA (Non Specific Aortoarteritis)

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Introduction

Non specific aortoarteritis (NSAA) or Takayasu's arteritis in children is a rare disease and no prospective study among children is available.

Methods

28 children with newly diagnosed NSAA were enrolled. Interventions in the form of PTA (percutaneous transluminal aortoplasty) or PTR (percutaneous transluminal renal angioplasty) were done wherever indicated. Patients were prospectively followed for a mean duration of 13.5 ± 6.9 months.

Results

The mean age at presentation was 10 ± 2.92 years (range 6-15 years) with male to female ratio of 1:1. Presenting complaints were very variable with acute decompensated heart failure (50%) being the most common mode of presentation. Classical findings like asymmetric pulses were rare. Uncommon presentations included B/L cataract, seizures and peripheral embolism. LV dysfunction was seen in 19(67.8%), with severe LV dysfunction in 15 (53.5%). Hypertension was found in 20 (71.4%) patients. Type 2 NSAA was seen in 18(64.28%) while 8(28.5%) had Type 3 disease. Most commonly involved vessel was DTA (descending thoracic aorta), seen in 13(46.4%) followed by the renal arteries in 12 (42.8%). Modified Ishikawa's criteria were met by 21(75%) patients.

Interventions were required in 26(92.8%) and were successful in 22(78.57%) patients. On follow up, the mean NYHA class and the LV EF improved.

Conclusions

NSAA in children is a rare disease and children present with myriad of symptoms and are generally sick at initial presentation. Clinical profile of children with this disease is probably very different from the one seen in adults, and hence poses challenges in recognition and management.