

# Cardiomyopathy

A group of diseases can affect the heart muscle. Two of them are:

- **hypertrophic cardiomyopathy** – also known as hypertrophic obstructive cardiomyopathy, or HOCM – and
- **dilated cardiomyopathy**.

## Hypertrophic cardiomyopathy

### What is it?

In children with hypertrophic cardiomyopathy, the heart muscle becomes very thick. In some cases, this obstructs the flow of blood from the heart.

### What are the symptoms?

In some children, the condition is mild and there are no symptoms and the condition may be found during a routine medical examination. Other children may have dizziness, fainting attacks, an abnormal heart rhythm and discomfort in the chest. In newborn babies the symptoms may be more severe.

### What causes it?

The cause is often unknown but the condition does sometimes run in families. So, if you have other children, it is advisable to have them checked too.

### What tests will my child need?

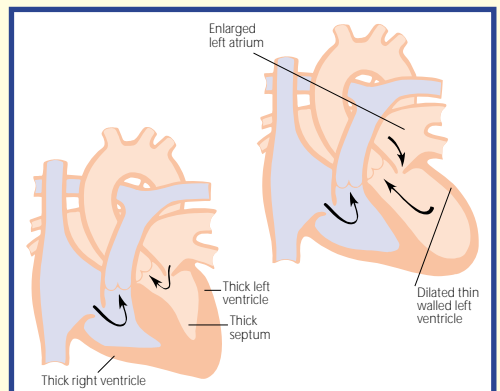
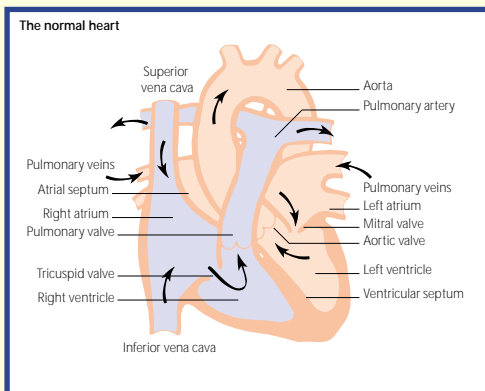
Your child will need a chest X-ray, an electrocardiogram and an echocardiogram to confirm the diagnosis. These tests are described on pages 8-9 of the booklet *Children with heart conditions*. Your child will also need to have blood tests to try and find out what has caused the condition.

### What treatment will be needed?

Your child may need long-term medication to help the heart muscle to relax and to control the abnormal heart rhythm. Heart transplantation may be considered for some children.

### What about follow-up?

Your child will need regular outpatient check-ups.



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## Dilated cardiomyopathy

### What is it?

In children with dilated cardiomyopathy, the heart muscle becomes weak and loses its elasticity. This causes the left ventricle, especially, to become dilated (enlarged).

### What causes it?

The cause is often unknown but it may be as a result of a viral infection. Sometimes, the condition runs in families so it may be a good idea for other family members to be screened too.

### What are the symptoms?

A child with dilated cardiomyopathy may be breathless and have feeding difficulties, poor weight gain and repeated chest infections. Occasionally, babies are born with this condition and have severe symptoms.

### What tests will my child need?

Your child will need a chest X-ray, an electrocardiogram and an echocardiogram to confirm the diagnosis. These tests are described on pages 8-9 of the booklet *Children with heart conditions*. Your child will also need blood tests to try and find out what has caused the condition.

### What treatment will be needed?

Your child may need to take long-term medication to help the heart work more efficiently and to remove extra fluid. Most children gradually improve but, in some, the damage to the heart muscle is more severe and their condition gets worse. If this happens, even after taking large doses of various medicines, heart transplantation may be considered.

### What about follow-up?

Your child will need regular outpatient check-ups.

### Preventing endocarditis

For children with both conditions, it is important to prevent endocarditis. Endocarditis is an infection of the lining of the heart or the heart valves. (See pages 18-19 of the booklet *Children with heart conditions*.)

You can get a free endocarditis card from the British Heart Foundation. This is a small card which states your child needs to take antibiotics before certain forms of surgery or dental treatment. Show the card to any doctor or dentist who is treating your child.

### For more information contact:

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