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Section E

Tiny Heart Torn to Help

Blue Baby Fights to Live

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It was not the usual balloon you'd give to a baby and little Sean Becker cried when he got it.

"Y-e-e-s, sweetheart," crooned Dr. Dolores Tamer. "You're going to feel better after all this is done."

The balloon, only 1½ centimeters in diameter, was in Sean's heart on the end of a long, plastic catheter. On TV-style X-ray in a diagnostic laboratory at the National Children's Cardiac Hospital, it showed up as an inflating and deflating dark blob.

Dr. Tamer, an assistant professor of pediatrics at the University of Miami, gave the catheter short, sharp tugs, making the balloon tear wider a small opening that could save Sean's life.

THE BABY — 15 days old today — was born with "transposed great vessels" of his heart, which means his blood has not been receiving oxygen as it should. He is a "blue baby," though his is only one of a number of conditions that can cause the purplish blue color described this way.

In Sean's condition, said Dr. Tamer, "the arteries are completely reversed. The right side of the heart is connected to the aorta, which goes out to the body, and the left side of the heart is connected to the pulmonary artery."

Normally, the pulmonary artery, attached to the right ventricle, carries blood to the lungs to receive oxygen and the aorta, arising from the left ventricle, sends the oxygenated blood through the rest of the body.

Instead of a normal "mixing" of processes, in Sean's case the two systems are going round and round independently. The pulmonary artery receives oxygenated blood from the lung and then carries it right back again. The aorta receives blood depleted in oxygen and also sends it right out again, without benefit of oxygenation.

THE CHILD'S BLOOD is oxygenated only through a leak, which is likely to close naturally. What is needed is a shunting system, provided by enlarging the leak.

To Sean's pretty, gray-eyed young mother, all

