

Patient Information Leaflet

**HEART MURMUR IN THE NEWBORN
INFORMATION FOR PARENTS**

Produced By: NICU

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If you require this leaflet in another language, large print or another format, please contact the Quality Team, telephone 01983 534850, who will advise you.

Congratulations on the birth of your new baby!!

As you know, the Paediatrician has heard a murmur during your baby's routine newborn examination today.

We know that you may find this very worrying and upsetting but we would like to reassure you that the vast majority of these murmurs we hear during the first few days of life disappear after the first few months.

What is a heart murmur?

A murmur is the medical term used to describe extra sounds that the blood makes as it passes through the valves and blood vessels of the heart. It can be heard through a stethoscope between normal heartbeats. (It makes a sound like water rushing through a pipe).

What causes the murmur?

It is common for newborn babies to have heart murmurs in the first days of life (one study noted murmurs in 60% of newborn babies).

It can be caused by fast blood flow through the heart, which is normal for babies.

The blood circulation system in the baby whilst inside the womb is different from the circulation system in the newborn baby. After birth, changes take place in the circulation pathways and these can cause murmurs.

Other causes

Murmurs can also be made by blood crossing through a hole in the heart, a valve that is too narrow or a leak in a heart valve.

What will happen to the murmur?

Most murmurs tend to disappear as the baby grows. This is because the changes that were taking place in the blood circulation system are now complete.

In some babies the murmurs can persist into childhood without anything being wrong with the heart – these are called “innocent” or “functional” murmurs.

In some babies there can be problems with the heart (1 in 145 babies can have congenital heart disease). But this is usually associated with other problems, which may become apparent in the first few days of life, such as rapid breathing, feeding difficulties, blue lips and failure to gain weight. In some babies there can be no symptoms or signs, apart from a heart murmur.

What happens now?

The Paediatrician will check the oxygen saturation – measuring the amount of oxygen in your baby's blood by using a clip on the finger, ear or toe. If this is satisfactory, your baby will be discharged home.

We will be informing your GP and Community Midwife about the heart murmur.

The baby will be seen in clinic by a Senior ANNP in 1-2 weeks time. If your baby becomes unwell in any way, please contact NICU on 534337. In particular we would like you to be aware of the following symptoms:

- If your baby becomes too breathless to feed?
- Has there been any change in his colour?
- Is he excessively pale or blue?
- Is your baby very sweaty?

None of these symptoms necessarily mean that your baby has a heart problem, but we feel it would be wise for a doctor to check that your baby is well. We would like to add that these symptoms should prompt parents to seek medical advice, regardless of whether or not a heart murmur has been heard.

If the murmur is still present at 1-2 weeks the Paediatrician may refer your baby to the Cardiologist (Heart Doctor). The Cardiologist may arrange for some tests including an echocardiogram (scan of the heart), which should not cause your baby any discomfort. This will be explained in more detail in clinic.

If you have any questions, please ask the Paediatrician again before you go home.

For further information contact

Neonatal Intensive Care Unit (NICU) on 534337
St Mary's Hospital
Newport, Isle of Wight

References

Arettaz R, Archer N and Wilkinson AR. Natural History of innocent heart murmurs in newborn babies; controlled echocardiographic study. Archives of Diseases in Childhood, Fetal neonatal edition 1998; 78: F166-170.
Braudo M & Row, RD. Auscultation of the heart – early neonatal period. American Journal of Diseases in Children 1961; 101:575-86
British Heart Foundation
Children's Heart Foundation.

Valuables should not be brought into the hospital. If patients have to bring in valuable items they should ask a nurse to store them safely and request a receipt for the items. You may not be able to have the valuable items returned if the time of discharge from hospital is out of hours.

We are sorry but the Trust cannot accept responsibility for loss or damage to items not given for safe keeping.

You can get further information on all sorts of health issues online at: <http://www.nhs.uk/>

For Health advice and out of hours GP service please call the NHS 111 service on: 111

We Value Your Views On Our Service

If you wish to comment on the care which you, your relative or friend has received, we will be pleased to hear from you. Please speak to the person in charge of the ward, clinic or service in the first instance or ask them to contact the Quality Team. If you wish to contact them directly, telephone on 534850.

Alternatively you may prefer to write to:

Chief Executive
Isle Of Wight NHS Trust
St Mary's Hospital
Newport
Isle of Wight
PO30 5TG

You can also share any concerns you have about our services with the Care Quality Commission (CQC) on 03000 61 61 61 or at enquiries@cqc.org.uk

All NHS sites are no smoking areas.

If you would like help and advice to stop smoking please call: Freephone 0800 169 0 169 to talk to the NHS Smoking Helpline.

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