



Medication

Many children with single ventricle heart disease will need medications to support the work of their heart at different times in their life. It is important to remember that each child's needs are different and not all children require the same medication.

Parents need to understand their child's medication, and over time the children will start to take responsibility for their medication themselves.

There are many different reasons why your child might need medication.

- They may have an unusual heartbeat.
- They may need to delay their blood from clotting (making scabs).
- They may need to give their heart muscle a bit of a boost.

Some of the most common drugs are listed below.

Diuretics such as Furosemide or Amiloride take strain away from the heart by encouraging the kidneys to work more efficiently.

ACE Inhibitors such as Captopril work to open up the blood vessels to make it easier for the heart to pump blood.

Anti-Arrhythmics such as Propranolol, Digoxin and Amiodarone help to keep the heart beating in a normal rhythm.

Anti-Coagulants such as Aspirin and Warfarin help to keep blood running freely around the body.

It is very important to check that medications are doing their job correctly. With some drugs the doctor can see that they are working by doing a cardiac scan or checking the heart rhythm or checking the blood pressure levels.

Other medications need to be checked by a blood test. If your child is taking Warfarin, it is important to make sure that the right amount of the medicine is in their blood; otherwise they may have problems bleeding for too long if they cut themselves. They will need regular blood tests, either a finger prick or sometimes a normal blood test in hospital to test their INR (International Normalised Ratio). The normal level for anyone on Warfarin is 2 - 3.5; sometimes the doctor will ask for the level to be different for an individual child.