**Tetralogy of Fallot**

- There are 4 main abnormalities:
  1. The pulmonary valve is narrow (pulmonary stenosis) and the muscle below it is thickened
  2. There is a ventricular septal defect (VSD)
  3. The aorta is located over the left and the right ventricles instead of just the left (overriding aorta)
  4. The right ventricle is enlarged and more muscular (right ventricular hypertrophy)

- The blood being pumped around the body lacks enough oxygen as the blood mixes due to the VSD
- Symptoms are often a blue appearance (especially lips, tongue, inside mouth and hands). Hypercyanotic attacks can occur where the baby becomes very blue, pale, floppy or faint.
- Can be associated with other syndromes such as Down’s and 22q11 deletion
- Requires surgery at around 4-6 months old

**Transposition of the Great Vessels**

- The pulmonary artery comes from the left ventricle instead of the right and the aorta comes from the right ventricle instead of the left
- The deoxygenated blood gets pumped around the body instead of the oxygenated blood
- The ductus arteriosus needs to be kept open very quickly to allow some oxygenated blood to be pumped around the body
- The baby may have a blue appearance due to the lack of oxygen
- First step of treatment is to keep condition stable by increasing oxygenated blood, medicines such as prostin can do this by keeping the duct open.
- A balloon septostomy can also be used to cause the duct to stay open/create a hole
- Risk of infective endocarditis