Bilateral superior vena cava
This leaflet provides information for parents of children with bilateral superior vena cava. The leaflet does not replace the need for personal advice from a qualified healthcare professional. Please ask your doctor or clinical nurse specialist if you have any questions.
What are bilateral superior vena cava?

When babies are born they usually have one major vein called the superior vena cava which carries deoxygenated (blue) blood from the upper part of the body to the heart.

In rare cases, babies have two of these veins. This is called bilateral superior vena cava (bilateral SVC). Bilateral means both sides. This is because the same type of vein appears on both sides of the body.

Why does my baby have bilateral SVC?

In the very early stages of pregnancy, a baby naturally has two superior vena cava (SVC) veins. As the baby develops in the womb, one vein becomes dominant – usually the one on the right side while the other naturally regresses (shrinks back and disappears).

In your baby the left blood vessel has not regressed. Therefore, both vessels are present.

How is bilateral SVC diagnosed?

Bilateral SVC is often detected either during routine scans in pregnancy or throughout a child’s life.

A scan called an echocardiogram (or echo) which uses sound waves to build up a moving picture of the heart, similar to an ultrasound in pregnancy, is used to confirm the diagnosis.

Some babies, with bilateral SVC may have additional heart defects. If this is the case, your cardiologist (specialist heart doctor) will explain this to you.

There is also a small risk that babies may have other heart defects and genetic conditions which are present at birth. Your obstetrician (a doctor who specialises in care during pregnancy, labour and after birth) will discuss further scans and options for genetic testing with you.
Normal heart

- superior vena cava
- inferior vena cava
- right atrium
- left atrium
- right ventricle
- left ventricle
- aorta
- patent ductus ateriosus (PDA)
- pulmonary artery

Heart with bilateral SVC

- left superior vena cava
- right superior vena cava
- right side of the heart
- left side of the heart
Are there any symptoms?

Patients with bilateral SVC do not have any symptoms.

How common is bilateral SVC?

One in 300 (0.3%) people are diagnosed with bilateral SVC. However, researchers believe the number of people in the general population who have the condition is higher. People are simply not aware that they have bilateral SVC because there are no symptoms.

Will my child’s heart be affected?

A bilateral SVC will not usually affect the way your child’s heart functions.

Follow-up appointments

We will arrange for your child to have another echocardiogram within the first year of life and check on your child’s progress at a follow-up appointment with a cardiologist.

After that, there is often no need for further follow-up appointments.

Everyday activities

Children with bilateral SVC can lead normal lives. Your child can take part in everyday activities, including sport at school.

Information and support

A cardiologist and clinical nurse specialist (CNS) will explain more about your child’s bilateral SVC.

Please contact your CNS if you have any worries or questions when you are at home.
Further family support can be offered by The Brompton Fountain charity.

The charity provides vital support for children who are being cared for at Royal Brompton and Harefield hospitals. It aims to improve the quality of life for our young patients and their families. The charity works closely with paediatric teams to provide activities, medical equipment and services that are not normally supplied by the NHS.

Website:  www.thebromptonfountain.org.uk

More support and information

British Heart Foundation
The British Heart Foundation offers support to families with children who have a cardiac condition.

Helpline:  0300 330 3311 (Monday to Friday, 9am to 5pm)
Website:  www.bhf.org.uk

Useful contacts

If you need more information, please contact a member of the clinical nurse specialists team.

Royal Brompton clinical nurse specialists team  0330 128 7727
(Monday to Friday, 9am to 5pm)
If you have concerns about any aspect of the service you have received in hospital and feel unable to talk to those people responsible for your care, call the Patient Advice and Liaison Service (PALS) on:

- Royal Brompton Hospital – 020 7349 7715
- Harefield Hospital – 01895 826 572

You can also email pals@rbht.nhs.uk. This is a confidential service.
Royal Brompton Hospital  
Sydney Street  
London  
SW3 6NP  
Tel: 0330 12 88121

Harefield Hospital  
Hill End Road  
Harefield  
Middlesex  
UB9 6JH  
Tel: 0330 12 88121

Website: www.rbht.nhs.uk

Royal Brompton and Harefield hospitals are part of Guy’s and St Thomas’ NHS Foundation Trust

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