Nikita lives in the Rostov Oblast with his parents and twelve-year-old sister. His mother, Tatiana, works as a waitress in a restaurant, and his father, Anatoly, is a miner. The family lives in a house of their own, and have relatives nearby to help. Nikita attends school and is doing well.

When Nikita was two months old, his pediatrician detected a heart murmur. Two months later, when Nikita refused to drink from a bottle, his mother took him back to the pediatrician. The doctor explained that, because of Nikita’s heart condition and related breathing problems, her baby didn’t have the energy required to breathe well enough while sucking from a bottle, and again referred the family to the Rostov-on-Don Cardiac Center.

Doctors there diagnosed Nikita with Tetralogy of Fallot and recommended open heart surgery. At the time, Tatiana and Anatoly were reluctant to accept this recommendation. In Russia today, awareness of childhood heart disease has just begun to gain momentum, and is still far from widespread. Open heart surgery on newborns — with the exception of a few isolated centers — is still almost unheard of in Russia. Tatiana and Anatoly couldn’t imagine that their tiny, fragile baby would be able to withstand open heart surgery.

The Russian doctors explained that without surgery, Nikita’s defect would cause further damage to his heart and lungs, but Tatiana was determined to postpone surgical intervention for as long as possible. Over time, he became more cyanotic. He remained thin, had difficulty breathing, and could not engage in much physical activity. In December 2008, just before Nikita turned six, his parents consented to allow him to undergo a palliative, open heart procedure that would significantly improve his blood flow and allow him to grow stronger, in anticipation of an eventual complete repair. A year and a half later, in July 2010, a diagnostic catheterization was performed, confirming Nikita’s readiness for his second and final open heart surgery.

Nikita’s defect, Tetralogy of Fallot, is among the most common of congenital heart defects. Nikita’s surgery, performed by the joint team, was not only life-saving for our young patient but also a superb teaching opportunity that enabled Heart to Heart to share vast experience treating this common heart defect with colleagues at our newest program in development.

Nikita’s surgery went well, with no complications. He was discharged from intensive care within a week after his surgery.

Based on an interview conducted in Rostov-on-Don, in Russian, by Josie Everett, Heart to Heart executive director.