Danil is an only child. He lives with his mother, Anastasia, in Novocherkassk, a mid-sized suburb (pop. approx. 200,000) of Rostov-on-Don. Anastasia, who is divorced from Danil’s father, is a stay-at-home mom. She comments that taking care of her son is a full-time job. When money allows, Anastasia sends Danil to private preschool. (Public schools often refuse to accept children with untreated heart conditions.) Anastasia is fearful about giving birth to another child with a heart defect and, perhaps because of this, shies away from the idea of remarrying.

**CHILD’S DEVELOPMENT AND MEDICAL HISTORY**

Cardiologists at the Rostov-on-Don Regional Cardiac Center diagnosed Danil’s heart defect when he was four months old: an exceedingly rare condition which would compromise the function of the heart’s ventricles as he grows. Since his diagnosis, Anastasia brings Danil to the Center every few months for an examination, including a new echocardiogram. Danil likes coming to the Center — his favorite part is going to a café afterward.

When Heart to Heart’s cardiologists examined Danil a year ago, during our 2010 surgical-education mission, they confirmed that his condition was stable, with no immediate need for surgical intervention.

**CHILD’S COURSE OF TREATMENT: PALLIATION**

Danil arrives at the Center during this year’s mission, looking happy and deceptively healthy. After examining him, Heart to Heart’s specialists determine that the time has come to operate. Pediatric cardiac surgeon Dr. Gary Raff leads the joint team in placing a band on Danil’s pulmonary artery (PA band) via a thoracotomy, a small opening on the side of the chest. Tightening this artery will prepare Danil’s left ventricle to pump blood at higher pressure as he grows. (Currently, his right ventricle handles the job of supplying his body with oxygenated blood.) In a few years, he will be ready for a Double switch operation to redirect both his venous and arterial blood flows to the “proper” ventricle.

Placing a PA band can be difficult to do properly. The procedure can be used to palliate a number of congenital heart lesions, or to ”buy time” while an infant grows before undergoing a more definitive surgery. Danil’s procedure provided an excellent opportunity for Heart to Heart to review patient selection for palliative procedures, optimal PA band placement, and patient follow-up in clinic.

Danil’s palliative closed heart procedure was uneventful. His recovery was relatively smooth and quick. Not accustomed to being apart from his mother, Danil was very happy and relieved to be reunited with her the day after surgery.

Based on an interview conducted in Rostov-on-Don in Russian, by Albina Popov, Heart to Heart staff.