Supplementary Pannel
Rheumatic Heart Disease, as a Social Problem
Proposal from a Pediatric Point of View

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Rheumatic heart disease is a preventable disease. As for the primary prevention of rheumatic heart disease, early detection and adequate treatment for streptococcal infection are necessary.

As for the secondary prevention, two procedures should be considered, that is, early diagnosis and adequate treatment of rheumatic carditis can reduce the incidence of residual heart disease and well scheduled chemoprophylaxis for streptococcus in rheumatic individuals apparently decreases the incidence of recurrences of rheumatic activity. Since the recurrence of rheumatic activity in rheumatic heart disease occurs even in adulthood and recurrences apparently cause the progression of the disease, prophylactic procedure should be continued from childhood until adulthood, if possible throughout a life, as recommended by WHO.

Since the discontinuation of prophylaxis for the recurrence often occurs in the transferring period between pediatric and medical care in Japan as well as in the United States, physicians of internal medicine are requested to continue the chemoprophylactic procedure against the recurrence of rheumatic fever in adult patients with rheumatic heart disease.

The second point to be stressed is that “rheumatic heart disease is never incurable disease”.

By Tompkins et al. in 1972, in about 70 per cent of the cases with rheumatic mitral regurgitation receiving regular chemoprophylactic procedure, mitral regurgitant murmur disappeared, accompanied with normalized cardiac size and normal electrocardiographic findings, within ten years from the onset of the disease. This fact is also observed by us and considered to be a big hope for the patients with rheumatic heart disease.

Every physician as well as every patient with rheumatic heart disease are expected to understand the importance of continuing the prophylaxis against the recurrence of rheumatic fever.