J Nur Today

SHORT COMMUNICATION

www.jolnt.com

e-ISSN 2456-1630

Nallegowda Syndrome: A Rarest & Recent Syndrome

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Received: 11.07.2017

Edited : 28.08.2017

Accepted: 12.09.2017

Published: 15.09.2017

ABSTRACT

The Nallegowda Syndrome, addresses the radial club hand, a high-arched palate and didn't have a left thumb. There was increased distance between eyes, heart sounds were audible on the right side of the chest; urinating from the middle undersurface of penis and had a deformed spine. X-rays confirmed absence radial bones and missing bones in the hands and spine. A chest X-ray confirmed the heart was located on the right side. The right kidney was in an unusual location and had two urethras. The treatment is based on underlying causes. No proper cause and treatmentfound yet for the syndrome.

KEYWORDS

Nallegowda syndrome, DNA and Dextrocardia

INTRODUCTION

In a proud moment for the Indian research community, a rare congenital condition is set to be named after a Karnataka (INDIA) doctor. It will be called Nallegowda Syndrome.Dr Mallikarjun Nallegowda, from Holalkere in Chitradurga district, studied in Bangalore Medical College in the 1990s and is currently working in Colorado, US. He is said to be the first doctor to notice and write about a rare congenital disorder, whose characteristics are missing hand bones, absence of a thumb, presence of two urethras, increased distance between the eyes and an unusual location of kidney and heart[1].

Evolution of new syndrome:

In 2002:Dr Nallegowda came across a 12-year-old boy with many problems at the outpatient department of All India Institute of Medical Sciences, New Delhi.

Etiology:

It is unclear what causes this. Modern DNA sequencing should help find the reason for this defect occurring at the developmental structures of the embryo[2].

Signs and symptoms:

- Radial club hand
- High-arched palate and
- Didn't have a left thumb.
- Increased distance between his eyes,
- Heart sounds were audible on the right side of the chest;
- Urinating from the middle undersurface of his penis
- Deformed spine[1].

Diagnostic evaluation:

- X-rays confirmed absence of radial bones and missing bones in his hands and spine.
- A chest X-ray confirmed his heart was located on the right side.
- Tests suggested his right kidney was in an unusual location.
- He was found to have two urethras,
- Further diagnostic tests and chromosomal studies, and the findings didn't match any existing medicalcondition[3].
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Treatment:

- Mainly treatment is based on underlying cause
- Complete physical examination.
- Complete rest and constant monitoring
- Monitoring the complications and earliest care
- Surgical intervention is required to re-correct congenital malformation.
- Assist in physical activities
- Psychological support.
- Seeking medical attention immediately for proper diagnosis and treatment.
- May be considered as medical emergency.
- Plan for complete care.
- Health education regarding the syndrome and its prognosis.
- If required use alternative therapy to treat underlying causes.

International recognition and acceptance of syndrome:

After the paper's publication, the rare condition was included in the genetic and dysmorphology (a study of human birth defects) databases.

In 2003, Australia's database — Pictures of Standard Syndromes and Undiagnosed Malformations — named it 'Acrorenal Syndrome - Nallegowda type[4]'.

The London database called it 'Nallegowda - radial defects; renal anoms; dextrocardia'. Gabriela Fuchs and colleagues from Nottingham hospital, UK, published an article in 'Clinical Dysmorphology' and mentioned a case with the characteristics described by Dr Nallegowda, in addition to other features like cleft lip and palate. They confirmed the existence of this disorder and recommended the condition be called 'Nallegowda Syndrome'. It's an established practice to name a disease after the person who first described the condition, typically by publishing an article in a respected medical journal[5].

Conflict of interest: None

Fund: Self

Ethical clearance: Not required

Acknowledgement: I would like to thank my parents and colleagues.

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