## INTRODUCTION AND AIM OF THE WORK

Rheumatic fever is predominantly a disease of childhood usually affecting those aged between 5-15 years, but it can occur in the very young and also in adult, mitral valve is most commonly involved in the 1st attack and may be affected alone **(Barbara Ansell, 1991).**

Sever mitral stenosis can occur in children below five years of age **(Strasser, 1981).**

The cause of mitral stenosis is usually rheumatic fever, it is seldom congenital **(Michael Petch, 1989).**

In children below 5 years of age, mitral regurgitation may be due to mitral valve prolapse or any condition that cause left ventricular dilatation and thus alter the anatomy and histology of the mitral apparatus **(Hurst, 1987).**

Formerly mitral regurgitation was regarded as being invariably due to rheumatic fever, but the early investigation of infants with heart disease has shown up a small number of patients with isolated congenital mitral regurgitation, in addition, mitral regurgitation is well recognized in endocardial cushion defects, L-(corrected) transposition, endocardial fibroelastosis hypertrophic

obstructive cardiomyopathy, in association with coronary artery or myocardial disease causing left ventricular dilation, cleft anterior mitral valve cusps, shortened or absent chordae tendineae, accessory orifices, redundant post cusps and deficient posterior cusps **(Jordon, 1989).**

## AIM OF THE WORK

The aim of this work is to identify the different causes of mitral valve diseases and their incidence, including congenital and acquired causes in young children below five years of age.