STS/EACTS Latin America Cardiovascular Surgery Conference November 15-17, 2018 Hilton Cartagena | Cartagena, Colombia The Society of Thoracic Surgeons EACTS

Univentricular Heart: 10 Years Experience In Left Hypoplastic Heart Syndrome

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BACKGROUND

- Hypoplastic left heart syndrome (HLHS) is one of the most challenging congenital heart defects.
- European Association for Cardio-Thoracic Surgery (EACTS) report an In-Hospital Mortality of 37.78% in stage I Norwood palliation.
- Achievements in perioperative management and postoperative intensive care have made these advances possible.
- At present, the 30 days survival of patients with HLHS undergoing Norwood repair is as high as 89.8%.

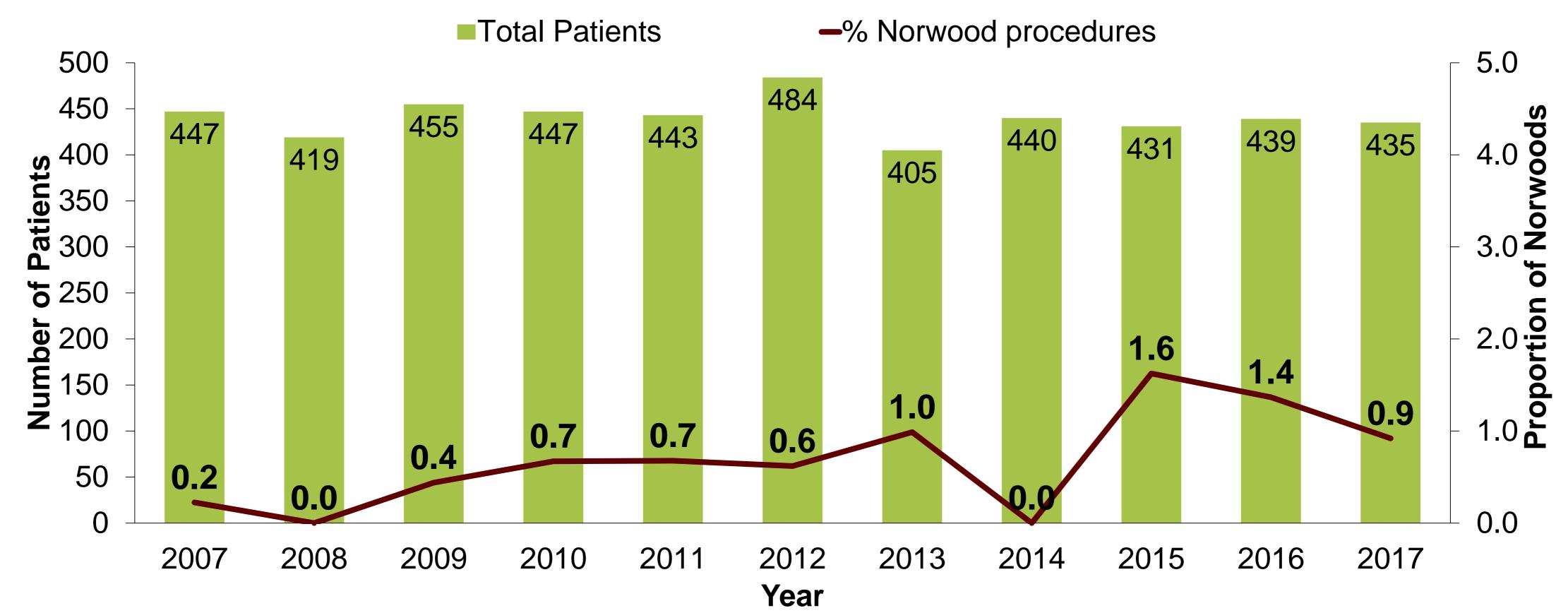
EACTS Database on Results of Surgical Procedures in Congenital Heart Disease. Available from: http://www.eactscongenitaldb.org/db/publicreports.py?fnc=r42&dbname=database

MATERIALS AND METHODS

- Historical cohort of congenital heart disease surgical patients
 between 2007 and December 2017
- 35 patients undergone to Norwood procedures.
- Describe characteristics of patients, outcomes and survival with median and interquartile range, proportions and confident intervals.
- Follow up was done by phone calls and outpatient consultations.

RESULTS

Procedures by year



RESULTS

Characteristics

Age, median (IQR)

Male, No. (%)

Premature, No. (%)

Prenatal diagnosis, No. (%)

Weight kg, median (IQR)

Saturation %, median (IQR)

Hematocrit %, median (IQR)

Chromosomal abnormality, No. (%)

Medical Disease, No. (%)

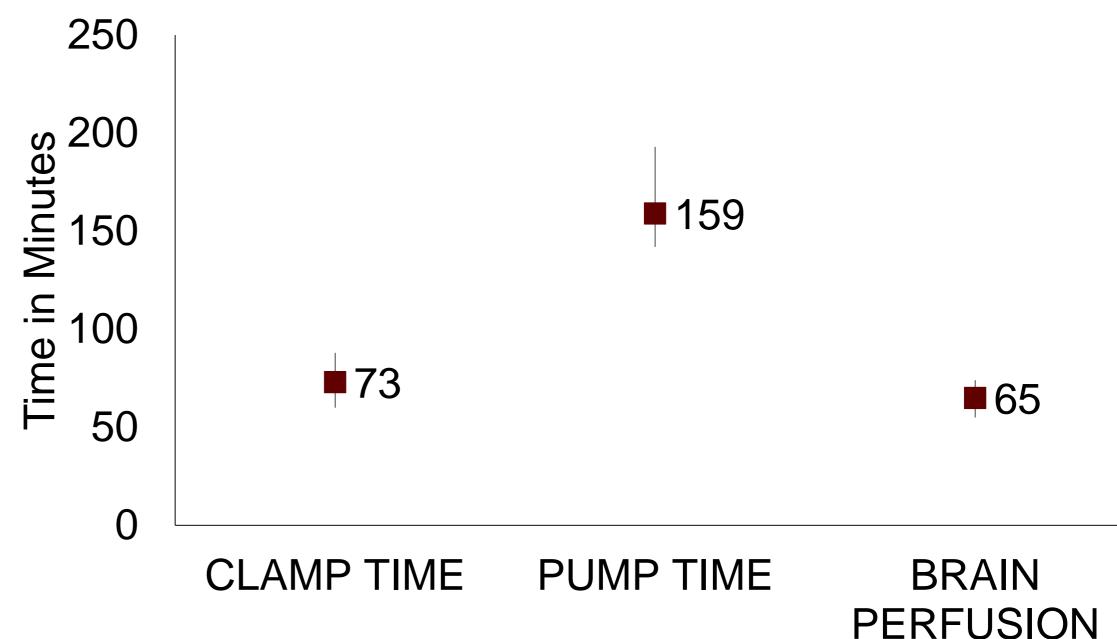
Results
18 (11-35)
22 (64,7)
3 (8,8)
12 (33,2)
3,1 (2,8-3,5)
87 (83-90)
44 (35-53)
2 (5,8)
7 (20,6)



RESULTS

- Open chest: 50% (17/34)
- Ventilation: 4,45 hours (2:30-6:27)
- ICU stay 12 days (6-23)
- Ward stay 8 days (6-11)
- in-hospital survival 50%
- At 30 days Survival 100%

Operative Characteristics



CONCLUSIONS

- Pre-operative management, operative techniques, and postoperative care have clearly improved mid-term prognosis for the patient with HLHS.
- Current treatment options offer palliation but not cure and that problems are to be expected on the long run.
- Outcomes like low mortality centers could be reproducible in developing countries.

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THANK YOU







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