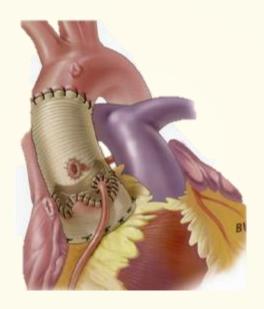




Long-Term Results of Valve Sparing Aortic Root Replacement: Reimplantation Technique



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Disclosure Statement

Nothing to disclose

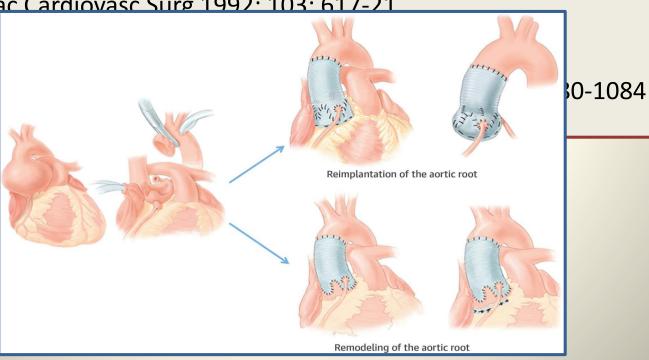


Indication for Valve Sparing Procedures



- Aneurysms of the aortic root/ascending aorta and aortic insufficiency
- Two Methods
 - Reimplantation Technique Tirone David Procedure

 J Thorac Cardiovasc Surg 1992: 103: 617-21
 - Rem Yacoul





Aortic Valve Reimplantation



J Thorac Cardiovasc Surg. 1992 Apr;103(4):617-21; discussion 622.

An aortic valve-sparing operation for patients with aortic incompetence and aneurysm of the ascending aorta.

David TE1, Feindel CM.

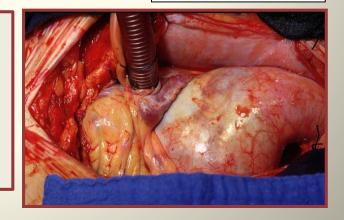
- 10 patients with annuloaortic ectasia were published
- "the aortic valve is re-implanted in a collagen impregnated tubular graft"

Repair of the aortic valve in patients with aortic insufficiency and aortic root aneurysm

Tirone E. David, MD, Christopher M. Feindel, MD (by invitation), and Joanne Bos, RN (by invitation), *Toronto, Ontario, Canada*

The Journal of Thoracic and Cardiovascular Surgery February 1995

- 19 pat. Reimplantation; 26 remodeling of the aortic root;
- Repair remains stable up to 58 month
- These type of repair provided excellent clinical results

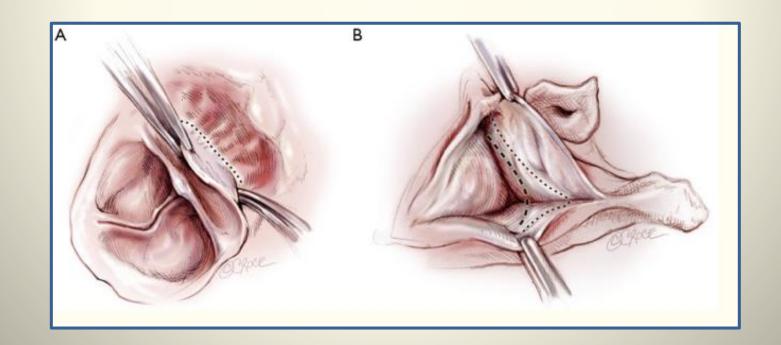




Operative Technique



- Dissection of the aortic root
- As low as possible
- Anatomic limit: plane passing through the nadir of leaflet insertion

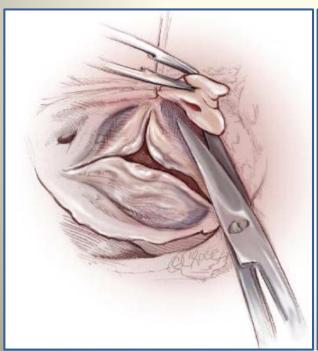






Isolation of Coronary Arteries

- Harvest right coronary artery
- Isolate RCA before external dissection of right sinus



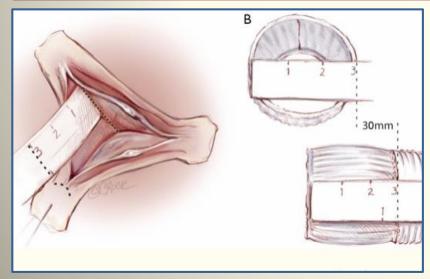




Sizing of the Graft

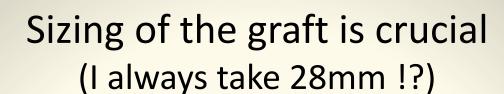


- Feindel-David formula: [(height X 2) X 2/3] + (2 X thickness of aortic wall)
- El Khoury technique: Height of interleaflet triangle: L/N coronary sinus
- De Paulis approach: Annulus diameter + 5 mm
- Vienna approach: lenght of the free margin of the cusp minus 20%











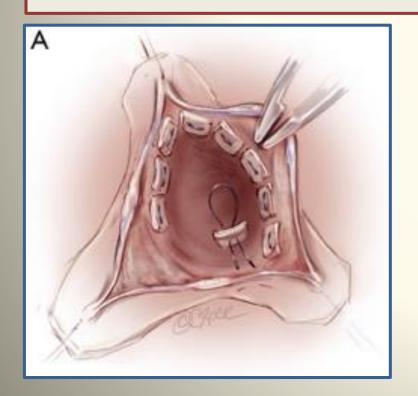
- Diameter of the Dacron prosthesis depends on the length of the free margin of the cusps / size of the annulus
- The longer the free margin of the cusps the bigger the diameter of the prosthesis!
- Mismatch in sizing will result in:
 - Prolaps of the cusps: long cusps small prosthesis
 - Central insufficiency: small cusps big prosthesis





Subvalvular Proximal Suture Line

- Placement of subannular sutures with pledges
- R/N coronary commissure: stitches higher up to avoid heart block
- Tailoring of the tubular prosthesis recommended



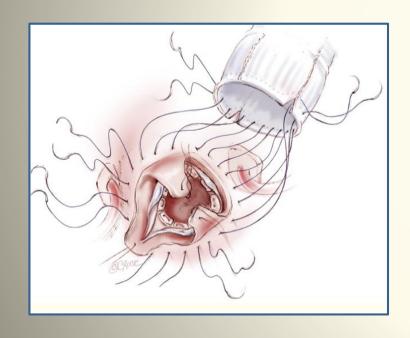






Dacron Graft Implantation

 Placement of the prearranged sutures through the free margin of the Dacron prosthesis



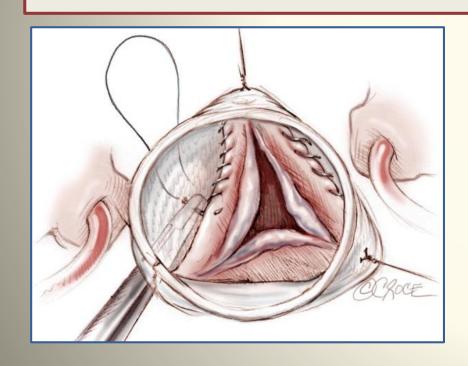






Re-Implantation of the Valve

- Firmly pull the 3 commissures
- Attach high on the tube graft
- 4-0 polypropylen running suture around valve apparatus

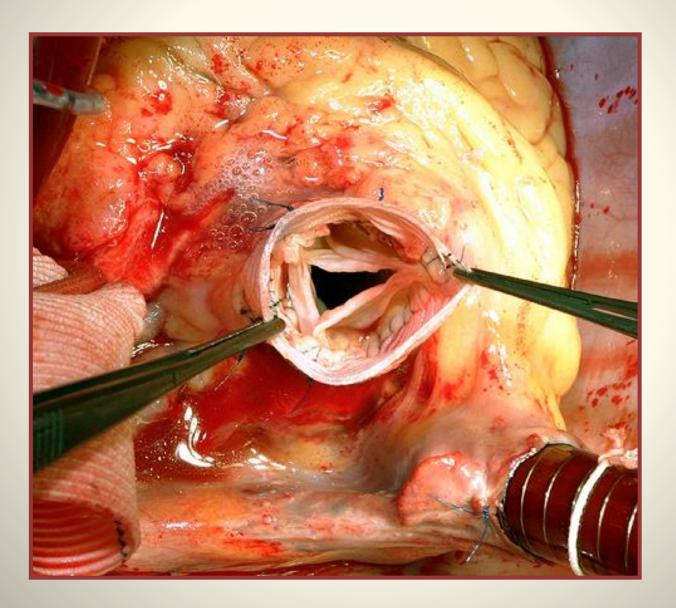










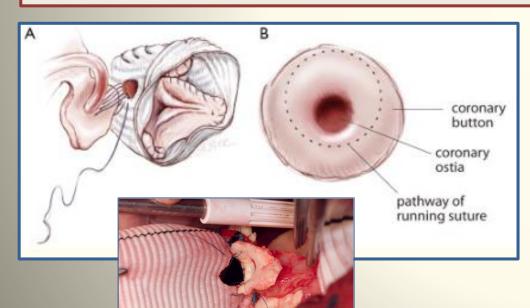


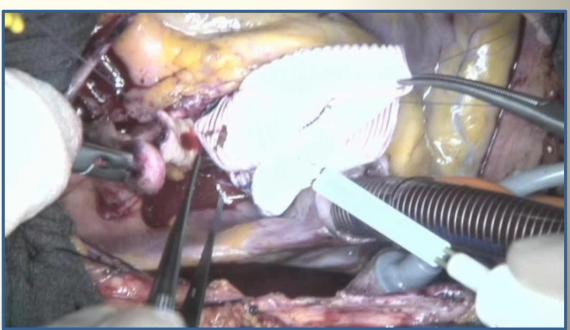


Coronary Button Reimplantation



- Cave: atypical location of right coronary artery in patients with root aneurysms
- Reimplantation with 6-0 polypropylen suture
- Reinforcement with strip of autologous pericardium in patients with friable tissue

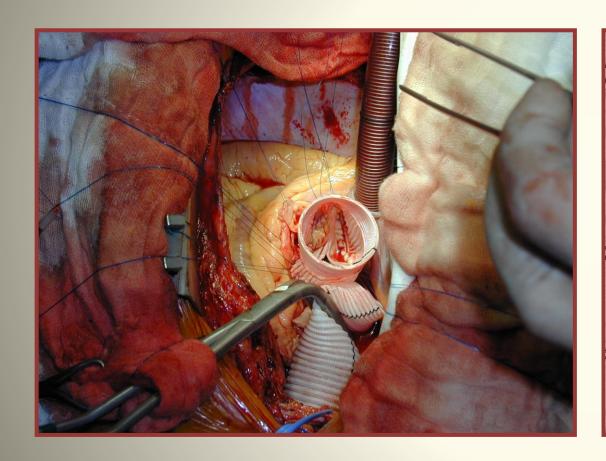


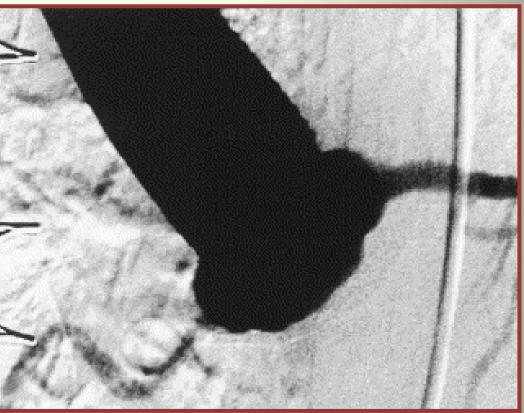






Operative Result





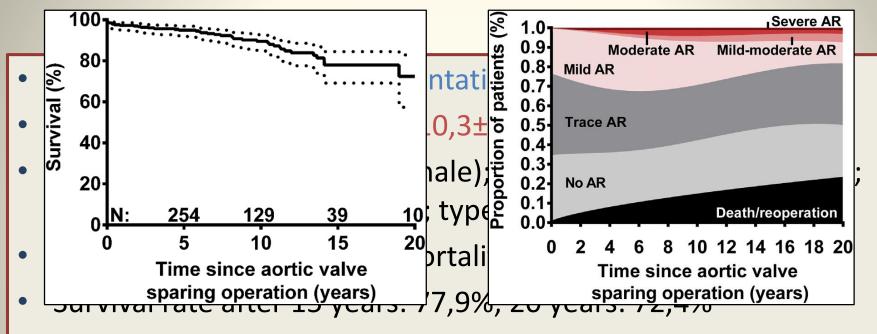


Reimplantation of the aortic valve at 20 years





Tirone E. David, MD, Carolyn M. David, BN, Christopher M. Feindel, MD, and Cedric Manlhiot, PhD



- Freedom from re-operation at 20 years: 96,9%
- Conclusion: aortic valve re-implantation provides excellent clinical results and stable aortic valve function during the second decade of observation

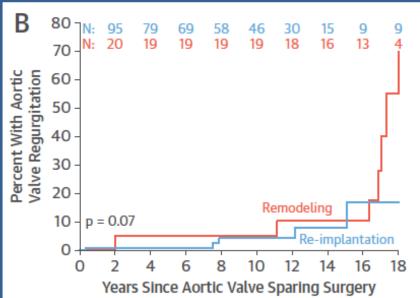


Outcomes of Aortic Valve-Sparing Operations in Marfan Syndrome



Tirone E. David, MD, Carolyn M. David, BN, Cedric Manlhiot, BSc, Jack Colman, MD, Andrew M. Crean, MD, Timothy Bradley, MB, ChB

- 1988-2012: valve sparing operation in 146 patients; reimplantation technique in 121pat.; remodeling technique in 25 pat.; mean age: 35,7 years
- Mortality at 15 years: 6,8%
- Aortic insuffice for reimplant
- Valve sparing associated with Aortic Valve Regurditation



or remodeling than

an syndrome were plications in long-

JACC VOL. 66, NO. 13, 2015 SEPTEMBER 29, 2015:1445-53

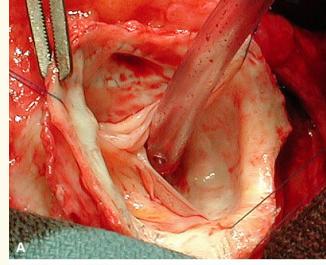


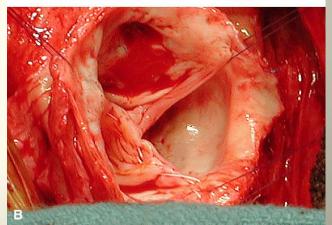
Aortic cusp repair with Gore-Tex sutures during aortic valve-sparing operations



Tirone E. David, MD, and Susan Armstrong, MSc, Toronto, Ontario, Canada

- 1994-2007: out of 267 valve sparing procedures 64 patients had repair of one or more cusps
- Freedom from valve insufficiency
 mild
 - 1 year: 100%
 - 5 years: 96,4%
 - 10 years: 86,7%
- Cusp repair by plication or Gore-tex suture had no negative effect on durability

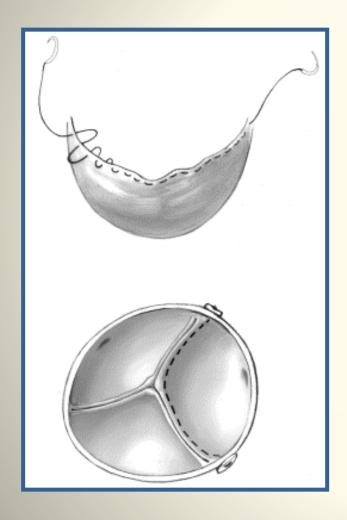








Prolaps of a single leaflet



- Repair of prolapsing aortic leaflet with 6-0 Gore-Tex suture (mild-to-moderate prolapse)
- Triangular resection at the central area of the leaflet
- Plication of the free margin of the cusps at the central area



Survival and reoperation pattern after 20 years of experience with aortic valve-sparing root replacement in patients with tricuspid and bicuspid valves

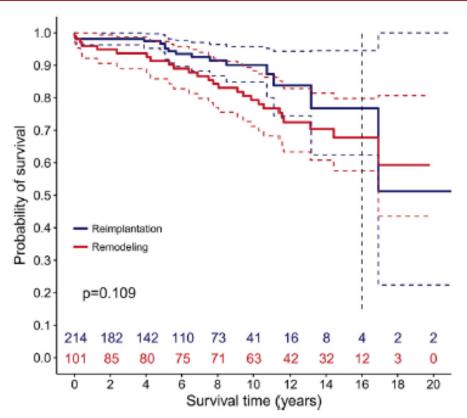




Stefan Klotz, MD, Sir Ulrich Stierle, MD, a

- 315 patier Reimplant
- 30 day mo
- No differe comparab
- Reoperation remodelin
- Conclusion

 - Risk of (after 10 years)



Both te FIGURE 1. Kaplan-Meier survival curve for reimplantation and remodeling technique. The dashed line at 16 years represents the threshold of a statistical meaningful sample size.

Michael Petersen, MD,

d, 89 bicuspid);

nnique: 101

ing: 2%

h groups,

; 11,7% for

bicuspid group





Rationale of Valsalva Prosthesis

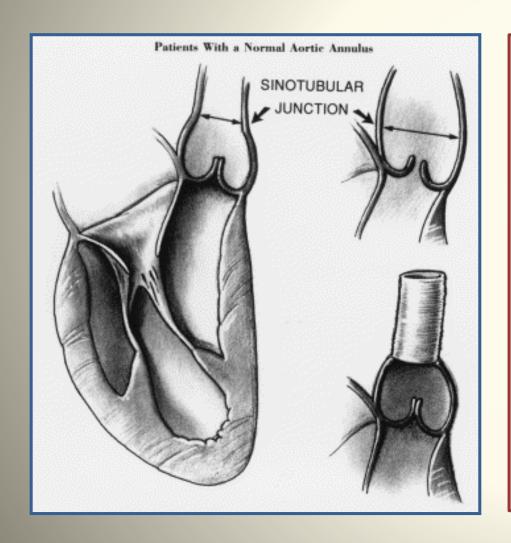


- Mimics the natural shape of the aortic sinuses
- Creates compliant aortic sinuses
- Enables physiologic "pulsation" of sinuses
- Prevents contact of the aortic leaflets with the wall of the prosthesis during opening process





Role of Sinuses of Valsalva



- Compliant nature of the Sinuses of Valsalva
- Allows commissural movement,
 which is critical in the mechanism of valve opening
- Important role in valve closure
- Minimizes the stresses in the leaflet
- Impact on longevity of aortic cusps





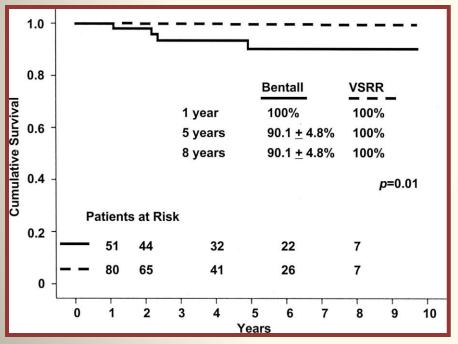
T. David's comment to Sinus Valsalva Prosthesis

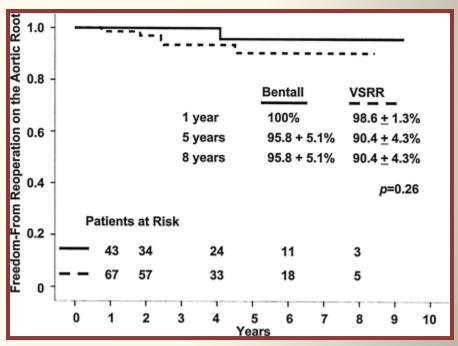
- Further complicates the performance of this operation
- Sinuses are spherical and will deform the aortoventricular junction
- Height of the sinuses may not coincide with the height of the native aortic valve commissures
- relatively high re-operation rate (10% at 10 years) is published using the Gelweave Valsalva graft.





Bentall Operation versus Valve-Sparing Aortic Root Replacement





Patel N. D. et al.; Ann Thorac Surg 2008;85:2003-2011





Conclusion

- Aortic valve reimplantation technique demonstates excellent long-term results
- Can be performed in Marfan patients
- Cusp repair has no negative effect on durability
- Reimplantation technique in patients with bicuspid valves may have higher reoperation rate after 10 years
- Remodeling technique may result in higher reoperation rate due to the lack of annular stabilization