

STS/EACTS Latin America Cardiovascular Surgery Conference

September 21-22, 2017 | Cartagena, Colombia

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AN 18-YEAR EXPERIENCE OF THE VALVE-SPARING AORTIC ROOT REPLACEMENT WITH THE REIMPLANTATION TECHNIQUE

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NOTHING TO DISCLOSE



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OBJECTIVE

- To review the **intermediate results** of aortic valve-sparing operation with aortic valve reimplantation technique in patients with aortic root aneurysm with or without aortic regurgitation (AR).

METHODS

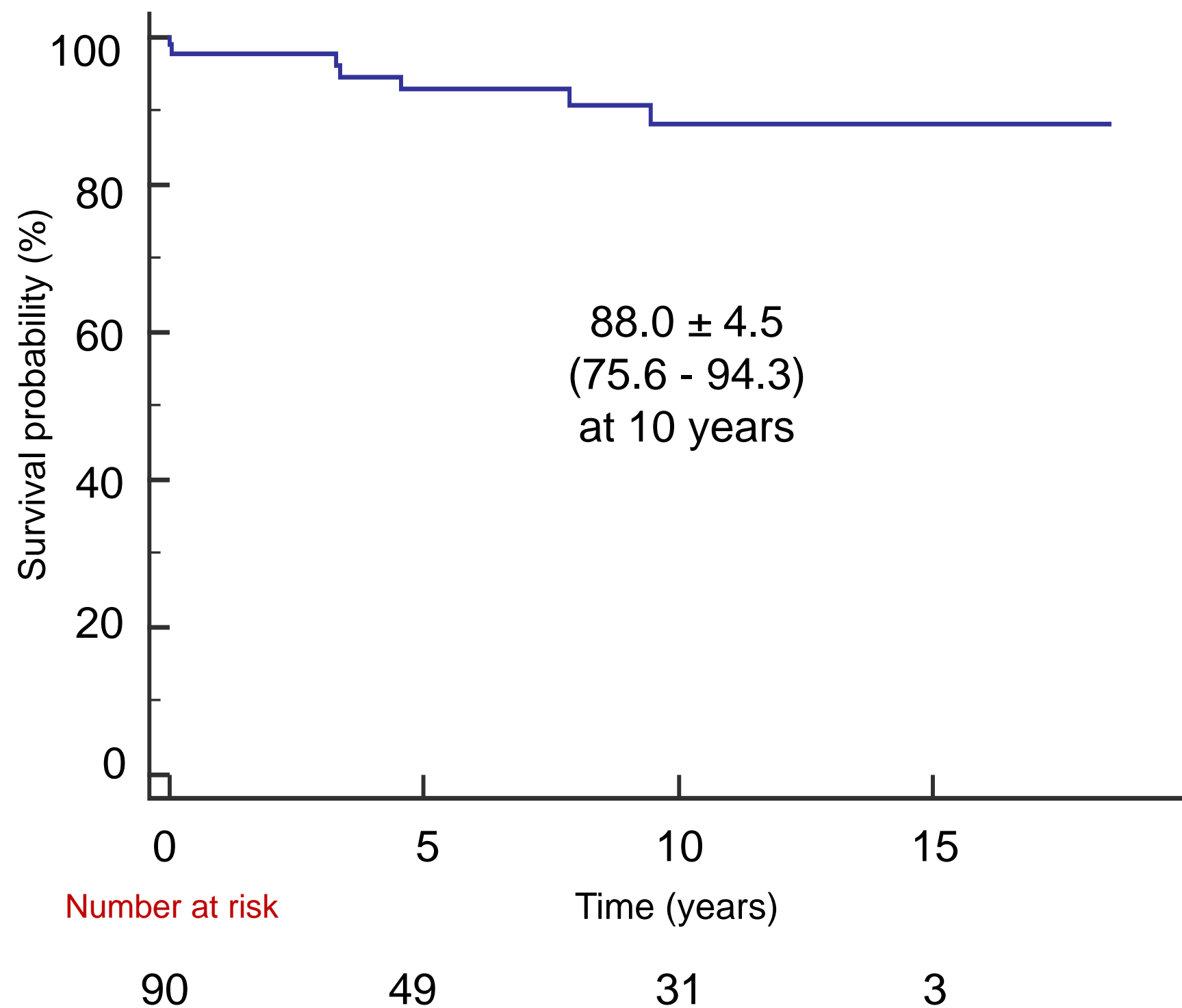
- July 1998 - February 2017
- 90 consecutive patients
- **F/U:** periodic clinical evaluations and echocardiograms
 - Phone, e-mail or medical visits.
 - Mean follow-up time was **6.8 ± 4.6 years**, and 90% complete.
- Kaplan-Meier method, univariate and multivariate logistic regression analysis were used.

RESULTS

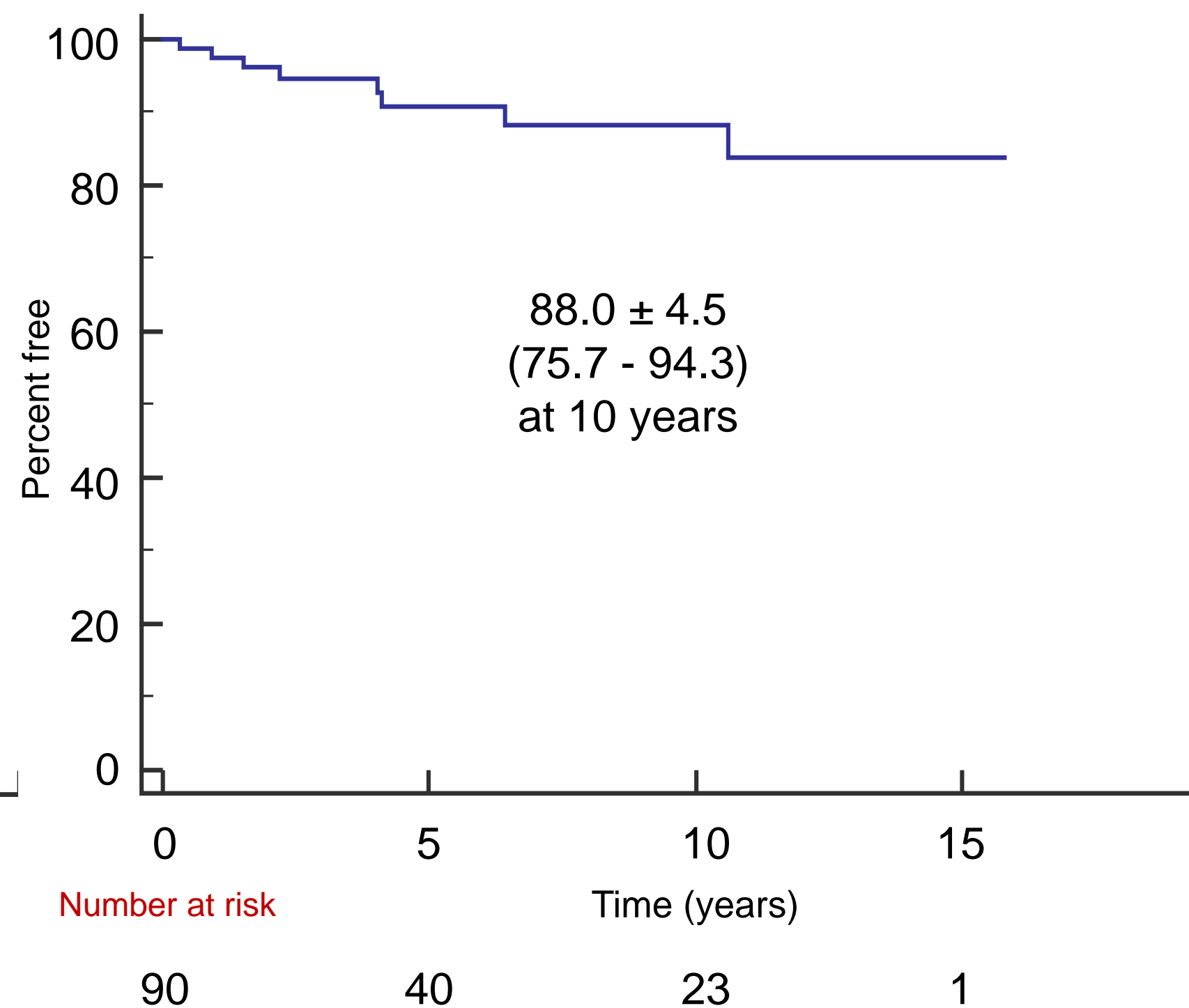
	n [%]		n [%]
Age [mean ± SD, years, range]	42.2 ± 15.4 [14-71]	LVEF	
Male	68 [75.6]	≥50	83 [92.2]
Associated conditions		40-49%	2 [2.2]
Hypertension	32 [35.6]	30-39%	4 [4.4]
Diabetes mellitus	2 [2.2]	<30%	1 [1.1]
Hyperlipidemia	15 [16.7]	Size of aortic root [mean ± SD, mm]	51.5 ± 9.4
Marfan Syndrome	33 [36.7]	Aortic regurgitation	
Bicuspid aortic valve	10 [11.1]	None	14 [15.6]
Type A aortic dissection		Trivial [+1/4]	31 [34.4]
Acute	6 [6.7]	Mild [+2/4]	14 [15.6]
Chronic	6 [6.7]	Moderate [+3/4]	9 [10.0]
Associated heart disease		Severe [+4/4]	22 [24.4]
CAD	7 [7.8]	Indication for surgery	
MR	8 [8.9]	Diameters	71 [78.9]
ASD	5 [5.6]	Dissection	6 [6.7]
Previous cardiac operation	7 [7.8]	Symptoms	8 [8.9]
Timing of surgery		LV dysfunction	5 [5.6]
Urgent/emergent	2 [2.2] / 4 [4.4]		

ASD: atrial septal defect, CAD: coronary artery disease, LV: left ventricle, LVEF: left ventricular ejection fraction, MR: mitral regurgitation, NYHA: New York Heart Association, SD: standard deviation.

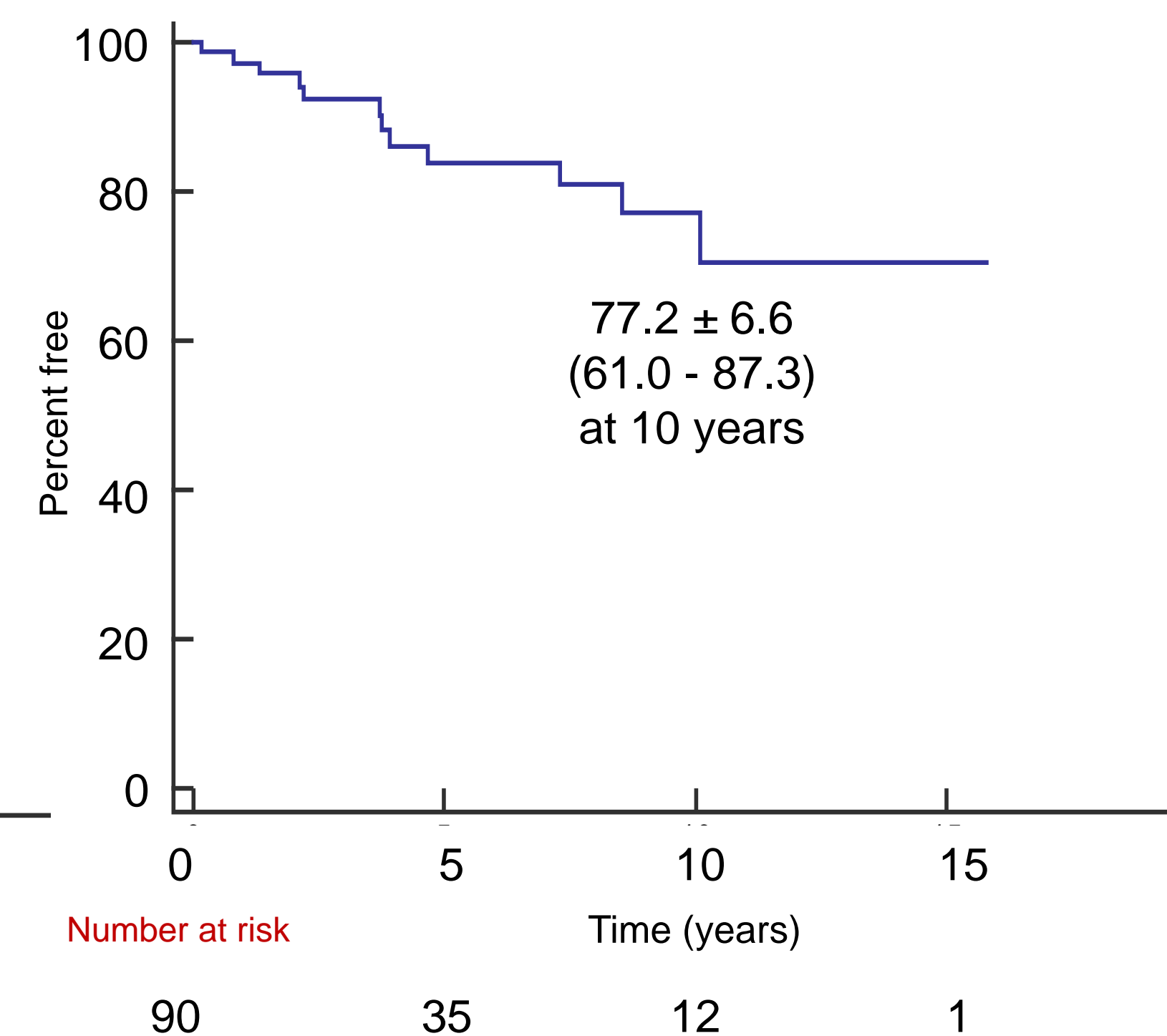
Overall Survival



Freedom From Aortic Valve Reoperation



Freedom From >+1/4 AR



Only **age ≥60y** was associated with **mortality** in the multivariate logistic regression analysis.

None of the variables were associated with increased risk of **AVR**.

None of the variables were associated with increased risk of developing **AR >+1/4**.

None of the variables were associated with augmented risk of **Major Adverse Valve Related Events**.

CONCLUSIONS

- Aortic valve-sparing operation with the aortic valve reimplantation technique was associated with an **excellent medium-term clinical outcome** and a **low valve-related event rate**.
- This procedure constitutes a valid surgical option for selected patients with aortic root disease. However, longer follow-up into the second decade of this technique is needed.

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Thank you



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