C15. More Than 10 Years Follow-up Of Patients Undergoing The Ross Operation. A Single Center Experience

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OBJECTIVES: The Ross operation offers excellent hemodynamic and clinical outcome in selected patients undergoing aortic valve replacement. Due to an ongoing controversial debate regarding this procedure, long term follow-up data (>10y) in a large adult Ross series are of great interest.

METHODS: Out of 529 Ross operations, a total number of 80 pts (mean age 50.4±13.7years, range 15.1-70.5years, 26.3% >60y, 59 male) with at least a mean FU of 10years (mean 10.9±1.0years) were studied. Underlying valve disease was aortic regurgitation in 24 pts, stenosis in 16 and combined lesion in 40 pts. Additional procedures were performed in 37.5%.

RESULTS: Completeness of FU was 99% (1 pt lost to FU). In-hospital mortality was 1%. Late mortality was 10% (n=8) at a mean of 6.3±4.8years, range 0.1-12.2years (5 non-cardiac and 3 cardiac deaths). Ross procedure-related reoperations were necessary in 21 of the 529 Ross pts .In pts > 10years follow-up, 3 autografts and 3 allografts had to be explanted. At last FU, 94% of pts were in NYHA class I. A comparison with the mortality probability rate of the general German population revealed no difference in the survival between Ross pts and the German population.

CONCLUSIONS: In this series of patients undergoing the Ross procedure, long-term follow-up data showed sustained clinical benefit with a low valve related reoperation and mortality rate. These results may give additional information for choosing the surgical technique in a selective group of patients undergoing aortic valve surgery.