

P77. Long Term Results Of Mitral Valve Repair In Elderly Patients

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OBJECTIVES: The purpose of the present study was to assess the efficacy and durability of mitral valve repair for severe mitral regurgitation in elderly patient.

METHODS: We reviewed 143 consecutive patients more than 70 years old underwent mitral valve repair for severe mitral regurgitation between 1991 and 2008. The patient population included 62 males and 81 females, mean age of 74±3 years (range, 70 to 86 years). Preoperative echocardiography showed that 15 patients had Capentier type I, 108 type II, 13 type IIIa, and 7 type IIIb mitral valve dysfunction. Thirteen patients suffered from infective endocarditis. The surgical techniques included prosthetic ring annuloplasty (126 patients), leaflet resection for posterior leaflet prolapse (95 patients), chordal reconstruction using Gore-tex suture for anterior leaflet prolapse (41 patients), glutaraldehyde treated autologous pericardial patch (18 patients). Concomitant procedures were performed in 96 patients. The mean follow-up and total follow-up period were 47±43 months and 555 patient-years.

RESULTS: There were 11 hospital deaths and 18 late deaths. The actuarial survival at 5 and 10 years was 83±4% and 64±7%. The freedom from thromboembolism, anticoagulant-related hemorrhage, mitral endocarditis, severe mitral regurgitation and reoperation at 10 years was 77±6%, 94±3%, 99±1%, 95±3% and 98±1%, respectively. The 5 and 10 year freedom from all valve-related events was 80±4% and 67±6%.

CONCLUSIONS: Mitral valve repair in elderly patient is reliable procedure in this long term result. Mitral valve repair should be considered the surgical procedure in patients of any age with mitral regurgitation.