

**P97. Freedom From Reintervention And Long-term Survival After Interventional Balloon Valvuloplasty Vs Surgical Commissurotomy In Patients With Congenital Aortic Stenosis**

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**OBJECTIVES:** Congenital aortic stenosis (AS) in children is initially treated with balloon valvuloplasty (BV) or surgically with commissurotomy (COM). We compared freedom from re-intervention and long-term survival between the two groups.

**METHODS:** We reviewed 168 patients with congenital AS who received BV or COM between 1984 and 2006. Number of reinterventions, time to reintervention, and survival were compared (Kaplan-Maier).

**RESULTS:** First intervention was BV in 121 patients and COM in 47 patients at mean age of 6.80 (range 0-19.29) and 3.74 (range 0-20.51) years, respectively. In the BV group, 22 received a second BV, 6 received COM and 21 aortic valve replacement (AVR) as a second intervention. In the COM group, 2 received a second COM, 9 received BV and 26 AVR as a second intervention. There were 16 deaths, 11 in the BV and 5 in the COM group during follow-up. After BV 1, 5 and 10-year freedom from second intervention was 79.2±3.7%, 56.2±5.0% and 50.5±5.3%. After COM 1, 5 and 10-year freedom from second intervention was 92.8±3.5%, 54.5±7.0% and 42.1±7.0%. One, 5 and 10-year survival after BV was 88.7±2.8%, 88.7±2.8%, 84.6±3.5%. One, 5 and 10-year survival after COM was 89.7±4.0%, 86.9±4.7% and 84.2±4.9%.

**CONCLUSIONS:** In the first year after intervention there is a higher rate of reinterventions in the BV group. However, there were no significant differences between the BV and COM groups in survival time (log rank 0.63) or freedom from re-intervention (log rank 0.64), despite older age in the COM group.